Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/1975

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
EMERGEORTHO, P.A.

120 WILLIAM PENN PLAZA
DURHAM, NC 27704-2150

2b Employer Identification Number (EIN)
56-1079264

2c Plan Sponsor's telephone number
919-281-1804

2d Business code (see instructions)
621111

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	ALLISON FARMER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	ALLISON FARMER
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	2028
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	1014
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1111
b	Retired or separated participants receiving benefits	**6b**	5
c	Other retired or separated participants entitled to future benefits	**6c**	1081
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2197
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	5
f	Total. Add lines **6d** and **6e**.	**6f**	2202
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	1899
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	2060
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	83
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2A 2E 2H 2J 2K 2F 2R 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:

9a Plan funding arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [X] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [X] **A** (Insurance Information) – Number Attached 2
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A
(Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
BRIGHTHOUSE LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-2708937	91626	28571001	5	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	1
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	**6d**	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity (3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee (3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			**7b**	
c	Additions: (1) Contributions deposited during the year	**7c(1)**			
	(2) Dividends and credits	**7c(2)**			
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below) ▶	**7c(5)**			
	(6) Total additions			**7c(6)**	
d	Total of balance and additions (add lines **7b** and **7c(6)**)			**7d**	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below) ▶	**7e(4)**			
	(5) Total deductions			**7e(5)**	
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A
(Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
METROPOLITAN LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-5581829	65978	28571000	5	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	1

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

METROPOLITAN LIFE INSURANCE COMPANY
200 PARK AVENUE
NEW YORK, NY 10166

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	1	GROSS DEALER CONCESSION	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	**4**	
5	Current value of plan's interest under this contract in separate accounts at year end	**5**	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	**6b**	1
c	Premiums due but unpaid at the end of the year	**6c**	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	**6d**	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity (3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee (3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			**7b**	
c	Additions: (1) Contributions deposited during the year	**7c(1)**			
	(2) Dividends and credits	**7c(2)**			
	(3) Interest credited during the year	**7c(3)**			
	(4) Transferred from separate account	**7c(4)**			
	(5) Other (specify below) ▶	**7c(5)**			
	(6) Total additions			**7c(6)**	
d	Total of balance and additions (add lines **7b** and **7c(6)**)			**7d**	
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	**7e(1)**			
	(2) Administration charge made by carrier	**7e(2)**			
	(3) Transferred to separate account	**7e(3)**			
	(4) Other (specify below) ▶	**7e(4)**			
	(5) Total deductions			**7e(5)**	
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			**7f**	

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

THE VANGUARD GROUP, INC.

23-1945930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CHARLES SCHWAB & CO., INC.

94-1737782

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CHARLES SCHWAB INVESTMENT MGMT

94-3106735

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

THE VANGUARD GROUP, INC.

23-1945930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 25 33 37 52 99	NONE	123197	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE VANGUARD GROUP, INC.	99	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DODGE & COX 94-1441976	10 BPS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
THE VANGUARD GROUP, INC.	99	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK FUNDS 04-3276558	7 BPS

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CHARLES SCHWAB & CO., INC.	99	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CAPITAL CLIENT GROUP ,INC. 333 S.HOPE ST. 55TH FL. LOS ANGELES, CA 90071	RATE OF 0.37% OF AVERAGE DAILY BALANCE OF ASSET(S)

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CHARLES SCHWAB & CO., INC.	99	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
T ROWE-PRICE 52-1905304	RATE OF 0.40% OF AVERAGE DAILY BALANCE OF ASSET(S)	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
CHARLES SCHWAB & CO., INC.	99	0
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
VICTORY CAPITAL MANAGEMENT INC. 13-2700161	RATE OF 0.10% OF AVERAGE DAILY BALANCE OF ASSET(S)	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2020 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083982-001	C	3195598

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2025 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083980-001	C	12745818

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2030 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083978-001	C	29036506

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2035 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083976-001	C	26551566

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2040 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083974-001	C	28037632

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2045 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083972-001	C	18882294

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2050 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083970-001	C	17466367

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2055 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 27-6715091-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11219847

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2060 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 45-3799419-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5368794

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2065 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 82-6194314-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 664726

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT 2070 TRST II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 87-7039453-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 55651

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RETIREMENT INCOME TR II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 90-6083967-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1235956

a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC TARGET RET INC & GROWTH TR II

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 87-6420194-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1042087	1131291
(9) Value of interest in common/collective trusts	1c(9)	124152144	154460755
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	83668886	88446758
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	4914705	5851600

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	213777822	249890404
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	213777822	249890404

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	8333329	
(B) Participants	2a(1)(B)	7923906	
(C) Others (including rollovers)	2a(1)(C)	3326467	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		19583702
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	73614	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		73614
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3331195	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3331195
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		23065463
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		8691270
c Other income	2c		803538
d Total income. Add all **income** amounts in column (b) and enter total	2d		55548782
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	15702789	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	4938	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		15707727
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	124319	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		124319
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		15832046
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		39716736
l Transfers of assets:			
(1) To this plan	2l(1)		2907036
(2) From this plan	2l(2)		6511190

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: THOMAS , JUDY & TUCKER, PA **(2)** EIN: 56-1965804

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		1100000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
EMERGERORTHO, P.A. RETIREMENT PLAN 2	56-1079264	002

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ..... ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
EMERGEORTHO, P.A. RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
EMERGEORTHO, P.A.

D Employer Identification Number (EIN)
56-1079264

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | **1** |

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 23-2186884

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | **3** |

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6	**a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	**6a**	
	b Enter the amount contributed by the employer to the plan for this plan year	**6b**	
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	**6c**	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q703218A .

EMERGEORTHO, P.A. RETIREMENT PLAN

Financial Statements

As of December 31, 2025 and 2024
and for the Year Ended December 31, 2025

CONTENTS

INDEPENDENT AUDITORS' REPORT	1 – 4
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
NOTES TO FINANCIAL STATEMENTS	7 – 14
SUPPLEMENTAL SCHEDULE	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	15

TJT

Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Retirement Plan Committee
EmergeOrtho, P.A. Retirement Plan
Durham, North Carolina

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the accompanying financial statements of EmergeOrtho, P.A. Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of EmergeOrtho, P.A. Retirement Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of EmergeOrtho, P.A. Retirement Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of EmergeOrtho, P.A. Retirement Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

- the form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Thomas, Judy & Tucker, P.A.

Raleigh, North Carolina
October 12, 2026

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2025 and 2024

ASSETS	2025	2024
Investments at Fair Value:		
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Total Investments at Fair Value	248,759,113	212,735,735
Receivables:		
Employer Contributions	3,520,060	2,709,243
Notes Receivable from Participants	1,131,291	1,042,087
Total Receivables	4,651,351	3,751,330
Net Assets Available for Benefits	$ 253,410,464	$ 216,487,065

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2025

Additions to Net Assets Attributed to:		
Investment Income:		
Net Change in Value of Investments	$	32,560,271
Interest and Dividends		3,331,195
Total Investment Income		35,891,466
Interest Income on Notes Receivable from Participants		73,614
Contributions:		
Employee		7,923,906
Employer		9,144,146
Rollover		3,326,467
Total Contributions		20,394,519
Total Additions		56,359,599
Deductions from Net Assets Attributed to:		
Benefit Payments		15,707,727
Administrative Expenses		124,319
Total Deductions		15,832,046
Net Increase in Net Assets Before Transfers Out of the Plan		40,527,553
Transfers Out of the Plan, Net		(3,604,154)
Net Increase in Net Assets		36,923,399
Net Assets Available for Benefits, Beginning of Year, As Restated		216,487,065
Net Assets Available for Benefits, End of Year	$	253,410,464

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2025 and 2024

1. Description of Plan

The following description of EmergeOrtho, P.A. Retirement Plan (the “Plan") provides only general information for the Plan sponsored by EmergeOrtho, P.A. (the “Company”). Participants in the Plan should refer to the plan agreement for a more complete description of the Plan's provisions.

General
The Plan became effective on September 1, 1975 as a defined contribution plan. The Plan covers substantially all employees of the Company who are 21 years of age. Eligibility for employer contributions includes a one-year service requirement. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Contributions
Participants are automatically enrolled in the Plan with a 4% pre-tax deferral election once an employee becomes an eligible employee. Participants will also receive an automatic deferral increase of 1% each year after their initial enrollment date, effective up to 10%. Participants may elect to contribute a different percentage of their pre-tax or after-tax annual compensation, not to exceed the maximum allowed by the Internal Revenue Service (“IRS”). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan also permits rollover contributions from other qualifying retirement plans. The Company makes safe harbor matching contributions of up to 3% of participants’ compensation. Each year, the Company may also make a discretionary nonelective contribution.

Participant Accounts
Employee contributions and employer contributions activity are maintained separately in each participant’s account. Participants direct the investment of their account balances into various investment options offered by the Plan. Participants may change their investments daily. Each participant’s account is credited with the participant’s contribution, the Company’s contribution, and an allocation of plan earnings and administrative expenses. Allocations are based on participants’ compensation or account balances, as defined. A participant is entitled to the benefit that can be provided from the participant’s vested account.

Vesting
Participants are vested immediately in their elective deferral contributions, rollover contributions and the Company’s safe harbor matching plus actual earnings thereon. Vesting in the Company’s additional discretionary contributions is determined on a graduated basis based upon years of creditable service. A participant is fully vested in the Company's additional discretionary contributions after six years of credited service.

Forfeitures
At December 31, 2025, forfeited accounts totaled $99,746. Forfeitures can be used to pay plan expenses, used to reduce employer contributions or allocated as an additional employer matching contribution. During the plan year ended December 31, 2025, the Plan used $171,280 of forfeited accounts to reduce the employer contributions.

1. Description of Plan (Continued)

Payment of Benefits
Generally, a participant becomes eligible to receive benefits on their normal retirement age (65), death, disability, termination of employment, or reasons of proven financial hardship. Distributions under the Plan may be made as 100% of a participant's account balance in a lump sum or as annuity distributions. Participants are eligible to take in-service withdrawals once they attain age 59½. If the vested balance is less than $5,000, a lump sum distribution is made. Effective October 1, 2025, the amount increased to $7,000. Early retirement is permitted for participants who are 55 years old and have completed 10 years of service.

Hardship Withdrawals
A participant may withdraw all or part of their elective deferral contributions for immediate and severe financial need. Participants self-certify that they have an immediate and severe financial need and that the amount requested does not exceed the amount necessary to satisfy the need. In accordance with IRS regulations, the participant must exhaust all other assets available prior to obtaining the hardship withdrawal.

Notes Receivable from Participants
Participants may borrow from their fund accounts a minimum of $2,000 up to a maximum equal to the lesser of $50,000 reduced by the excess of the highest outstanding balance of all other loans from the Plan during the one-year period ending the day before the loan was made over the outstanding balance of loans from the Plan on the date on which the loan was made or 50 percent of their vested account balance. A participant can only have two loans outstanding at a time. The loans are secured by the balance in the participants' accounts and bear interest at a fixed rate of prime (6.75% at December 31, 2025) as of the date of the new loan. Total notes receivable from participants were $1,131,291 and $1,042,087 at December 31, 2025 and 2024, respectively.

Cash Surrender Value to Pay Benefits
Before restatement of the Plan effective September 1, 2002, participants were permitted to purchase life insurance through the Plan. This investment option is no longer available for participants who entered the Plan after this date. For those participants who retained the life insurance option, the participant's account is reduced by the amount of the premiums and credited with any policy dividends.

2. Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

2. Significant Accounting Policies (Continued)

Use of Estimates
The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents
The Plan considers all invested cash balances to be cash equivalents.

Payment of Benefits
Benefits are recorded when paid.

Investment Valuation and Income Recognition
All contributions and rollovers are invested at the direction of each participant in any combination of the investment funds offered. Investments in mutual funds and the self-directed brokerage account are valued at quoted market prices established in an active market which represent the net asset value of shares held by the Plan at year end. The fair value of the collective investment trust funds, depending on the contract, is determined based on the fair value of the underlying securities, which include market securities and open-end mutual funds or based on the present value of the contract's expected cash flows, discounted by current market interest rates for like investments.

Purchases and sales of securities are recorded on the trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Realized and unrealized appreciation and depreciation in value of investments are allocated to the participant accounts based on participant holdings in each fund.

Plan Expenses
Certain plan expenses are paid by the plan sponsor as provided by the plan document. Expenses related to specific participant transactions (notes receivable from participants and distributions) are charged directly to the participant’s account.

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued, but unpaid, interest. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the plan document.

3. Federal Income Taxes

The Plan adopted a Non-Standardized Pre-Approved Profit Sharing Plan document. This document received an opinion letter dated June 30, 2020, in which the IRS stated that the document was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). As allowed by the IRS, the Plan is relying on the opinion letter issued on the plan document for its own qualification. The plan document has been amended for changes required by the IRS since receiving the opinion letter. The plan administrator believes the Plan is designed and currently operating in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would be sustained upon examination by the applicable authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of December 31, 2025, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in process.

4. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become fully vested in their accounts.

5. Investments

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The following information included in the accompanying financial statements and supplemental schedule was obtained or derived from information certified as complete and accurate by Vanguard Fiduciary Trust Company ("Vanguard"), the trustee of the Plan, and was not subject to audit for the years ended December 31:

	2025	2024
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Notes Receivable from Participants	1,131,291	1,042,087
Net Change in Value of Investments	$ 32,560,271	
Interest and Dividends	3,331,195	
Interest Income on Notes Receivable from Participants	73,614	

6. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits.

	Quoted Prices in Active Markets for Identical Assets (Level 1)	Total
December 31, 2025:		
Mutual Funds	$ 88,446,758	$ 88,446,758
Self-Directed Brokerage Account	5,851,600	5,851,600
Total Assets in Fair Value Hierarchy	94,298,358	94,298,358
Investments Measured at Net Asset Value		154,460,755
Investments at Fair Value	$ 94,298,358	$ 248,759,113
December 31, 2024:		
Mutual Funds	$ 83,668,886	$ 83,668,886
Self-Directed Brokerage Account	4,914,705	4,914,705
Total Assets in Fair Value Hierarchy	88,583,591	88,583,591
Investments Measured at Net Asset Value		124,152,144
Investments at Fair Value	$ 88,583,591	$ 212,735,735

6. Fair Value Measurements (Continued)

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels:

Level 1 Inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority.

Level 2 Inputs are based on significant other observable inputs such as:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs are unobservable and significant to the fair value measurement.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. The Plan uses Level 2 inputs when market prices are not attainable but other observable inputs are available to arrive at a fair value, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available. There were no Level 2 or 3 investments in the Plan.

Level 1 Fair Value Measurements
The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year end. The self-directed brokerage account includes mutual funds, common stock, and bond funds. Mutual funds and common stocks are publicly traded investments and are valued daily at the closing price reported on the active market on which the funds are traded. The bond funds are valued based on a valuation model that uses inputs when quoted prices in active markets aren't available.

Collective Investment Trust Funds
These investments are valued using the net asset value ("NAV") of units of the collective investment trust funds. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investments for an amount different from the reported net asset value.

7. Collective Investment Trust Funds

The Plan invests in various collective investment trust funds ("CITs") maintained and administered by Vanguard. The CITs seek to provide capital appreciation and current income consistent with its current asset allocation. The CITs invest in other Vanguard mutual funds and trusts according to an asset allocation strategy designed for investors planning to retire and leave the workforce within a few years of the target year. There were no unfunded commitments.

8. Risks and Uncertainties

The Plan invests in various investment securities as directed by its participants. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

9. Party-in-Interest Transactions

Plan investments are managed by Vanguard, the trustee as defined by the Plan, and therefore these transactions qualify as party-in-interest transactions. Fees paid by the Plan to Vanguard and other parties-in-interest for contract administration, advisory and professional services amounted to $124,319 for the year ended December 31, 2025. The Plan also holds notes receivable from participants. As a result, these notes receivable and all related transactions were with a party-in-interest. All of these transactions are exempt from being prohibited transactions by ERISA.

10. Reconciliation to Form 5500

The following is a reconciliation of the net assets available for benefits per the financial statements to the Form 5500 at December 31:

	2025	2024
Net Assets Available for Benefits Per the Financial Statements	$ 253,410,464	$ 216,487,065
Less: Employer Contributions Receivable	(3,520,060)	(2,709,243)
Net Assets Available for Benefits Per the Form 5500	$ 249,890,404	$ 213,777,822

10. Reconciliation to Form 5500 (Continued)

The following is a reconciliation of the net increase in net assets available for benefits before transfers out of the Plan per the financial statements to net income per the Form 5500 for the year ended December 31, 2025:

Net Increase in Net Assets Available for Benefits Before Transfers Out of the Plan Per the Financial Statements	$ 40,527,553
Change in Employer Contributions Receivable	(810,817)
Net Income per Form 5500	$ 39,716,736

11. Subsequent Events

The Company has evaluated events and transactions for potential recognition or disclosure in the financial statements through October 12, 2026, which is the date the financial statements were available to be issued.

In December 2022, Congress passed the Setting Every Community Up for Retirement Enhancement Act of 2022 ("SECURE Act 2.0") that continued the retirement system reform previously passed in 2019. Certain provisions of the SECURE Act 2.0 are effective starting at various dates through 2026, with the plan amendment for the adoption of SECURE Act 2.0 due by December 31, 2026.

As part of SECURE Act 2.0, effective January 1, 2026, catch-up contributions made by high-income earners will be designated as Roth contributions.

SUPPLEMENTAL SCHEDULE

Schedule 1

EMERGEORTHO, P.A. RETIREMENT PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2025

EIN 56-1079264

PLAN 001

(a)	Identity of Issuer, Borrower, Lessor or Similar Party (b)	Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Current Value (e)
*	Vanguard	Institutional Index Fund Institutional Shares	$ 33,179,651
*	Vanguard	Target Retirement 2030 Trust II	29,036,506
*	Vanguard	Target Retirement 2040 Trust II	28,037,632
*	Vanguard	Target Retirement 2035 Trust II	26,551,566
*	Vanguard	Target Retirement 2045 Trust II	18,882,294
*	Vanguard	Target Retirement 2050 Trust II	17,466,367
*	Vanguard	Target Retirement 2025 Trust II	12,745,818
*	Vanguard	Target Retirement 2055 Trust II	11,219,847
*	Vanguard	Total International Stock Index Fund Admiral Shares	6,281,087
*	Vanguard	Small-Cap Index Fund Admiral Shares	6,278,164
*	Vanguard	PRIMECAP Fund Admiral Shares	5,906,993
*	Vanguard	Self-Directed Brokerage Fund	5,851,600
*	Vanguard	Mid-Cap Index Fund Admiral Shares	5,505,265
*	Vanguard	Target Retirement 2060 Trust II	5,368,794
	Dodge & Cox	Stock Fund Class I	5,340,162
*	Vanguard	Balanced Index Fund Admiral Shares	4,376,157
*	Vanguard	Federal Money Market Fund	4,103,379
*	Vanguard	Total World Stock Index Fund Admiral Shares	3,452,280
*	Vanguard	Target Retirement 2020 Trust II	3,195,598
*	Vanguard	Total Bond Market Index Fund Admiral Shares	2,633,008
*	Vanguard	Small-Cap Value Index Fund Admiral Shares	2,286,865
*	Vanguard	Emerging Markets Stock Index Fund Admiral Shares	2,031,610
*	Vanguard	Intermediate-Term Investment-Grade Fund Admiral Shares	1,736,565
*	Vanguard	Real Estate Index Fund Admiral Shares	1,354,030
	Oakmark	International Fund Investor Class	1,264,927
*	Vanguard	Target Retirement Income Trust II	1,235,956
*	Vanguard	Short-Term Bond Index Fund Admiral Shares	1,093,862
*	Vanguard	Total International Bond Index Fund Admiral Shares	788,312
*	Vanguard	Target Retirement 2065 Trust II	664,726
	Hartford	Small Cap Growth Fund Class Y	544,076
*	Vanguard	Inflation-Protected Securities Fund Admiral Shares	290,365
*	Vanguard	Target Retirement 2070 Trust II	55,651
*	Participant Loans**	Interest Rates (3.25% - 9.25%)	1,131,291
			$ 249,890,404

* Party-in-interest to the Plan.

** The accompanying financial statements classify participant loans as notes receivable from participants.

EMERGEORTHO, P.A. RETIREMENT PLAN

Financial Statements

As of December 31, 2025 and 2024
and for the Year Ended December 31, 2025

CONTENTS

INDEPENDENT AUDITORS' REPORT	1 – 4
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
NOTES TO FINANCIAL STATEMENTS	7 – 14
SUPPLEMENTAL SCHEDULE	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	15

TJT

Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Retirement Plan Committee
EmergeOrtho, P.A. Retirement Plan
Durham, North Carolina

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the accompanying financial statements of EmergeOrtho, P.A. Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of EmergeOrtho, P.A. Retirement Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of EmergeOrtho, P.A. Retirement Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of EmergeOrtho, P.A. Retirement Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

- the form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Thomas, Judy & Tucker, P.A.

Raleigh, North Carolina
October 12, 2026

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2025 and 2024

ASSETS	2025	2024
Investments at Fair Value:		
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Total Investments at Fair Value	248,759,113	212,735,735
Receivables:		
Employer Contributions	3,520,060	2,709,243
Notes Receivable from Participants	1,131,291	1,042,087
Total Receivables	4,651,351	3,751,330
Net Assets Available for Benefits	$ 253,410,464	$ 216,487,065

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2025

Additions to Net Assets Attributed to:		
Investment Income:		
Net Change in Value of Investments	$	32,560,271
Interest and Dividends		3,331,195
Total Investment Income		35,891,466
Interest Income on Notes Receivable from Participants		73,614
Contributions:		
Employee		7,923,906
Employer		9,144,146
Rollover		3,326,467
Total Contributions		20,394,519
Total Additions		56,359,599
Deductions from Net Assets Attributed to:		
Benefit Payments		15,707,727
Administrative Expenses		124,319
Total Deductions		15,832,046
Net Increase in Net Assets Before Transfers Out of the Plan		40,527,553
Transfers Out of the Plan, Net		(3,604,154)
Net Increase in Net Assets		36,923,399
Net Assets Available for Benefits, Beginning of Year, As Restated		216,487,065
Net Assets Available for Benefits, End of Year	$	253,410,464

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2025 and 2024

1. Description of Plan

The following description of EmergeOrtho, P.A. Retirement Plan (the “Plan") provides only general information for the Plan sponsored by EmergeOrtho, P.A. (the “Company”). Participants in the Plan should refer to the plan agreement for a more complete description of the Plan's provisions.

General
The Plan became effective on September 1, 1975 as a defined contribution plan. The Plan covers substantially all employees of the Company who are 21 years of age. Eligibility for employer contributions includes a one-year service requirement. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Contributions
Participants are automatically enrolled in the Plan with a 4% pre-tax deferral election once an employee becomes an eligible employee. Participants will also receive an automatic deferral increase of 1% each year after their initial enrollment date, effective up to 10%. Participants may elect to contribute a different percentage of their pre-tax or after-tax annual compensation, not to exceed the maximum allowed by the Internal Revenue Service (“IRS”). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan also permits rollover contributions from other qualifying retirement plans. The Company makes safe harbor matching contributions of up to 3% of participants’ compensation. Each year, the Company may also make a discretionary nonelective contribution.

Participant Accounts
Employee contributions and employer contributions activity are maintained separately in each participant’s account. Participants direct the investment of their account balances into various investment options offered by the Plan. Participants may change their investments daily. Each participant’s account is credited with the participant’s contribution, the Company’s contribution, and an allocation of plan earnings and administrative expenses. Allocations are based on participants’ compensation or account balances, as defined. A participant is entitled to the benefit that can be provided from the participant’s vested account.

Vesting
Participants are vested immediately in their elective deferral contributions, rollover contributions and the Company’s safe harbor matching plus actual earnings thereon. Vesting in the Company’s additional discretionary contributions is determined on a graduated basis based upon years of creditable service. A participant is fully vested in the Company's additional discretionary contributions after six years of credited service.

Forfeitures
At December 31, 2025, forfeited accounts totaled $99,746. Forfeitures can be used to pay plan expenses, used to reduce employer contributions or allocated as an additional employer matching contribution. During the plan year ended December 31, 2025, the Plan used $171,280 of forfeited accounts to reduce the employer contributions.

1. Description of Plan (Continued)

Payment of Benefits
Generally, a participant becomes eligible to receive benefits on their normal retirement age (65), death, disability, termination of employment, or reasons of proven financial hardship. Distributions under the Plan may be made as 100% of a participant's account balance in a lump sum or as annuity distributions. Participants are eligible to take in-service withdrawals once they attain age 59½. If the vested balance is less than $5,000, a lump sum distribution is made. Effective October 1, 2025, the amount increased to $7,000. Early retirement is permitted for participants who are 55 years old and have completed 10 years of service.

Hardship Withdrawals
A participant may withdraw all or part of their elective deferral contributions for immediate and severe financial need. Participants self-certify that they have an immediate and severe financial need and that the amount requested does not exceed the amount necessary to satisfy the need. In accordance with IRS regulations, the participant must exhaust all other assets available prior to obtaining the hardship withdrawal.

Notes Receivable from Participants
Participants may borrow from their fund accounts a minimum of $2,000 up to a maximum equal to the lesser of $50,000 reduced by the excess of the highest outstanding balance of all other loans from the Plan during the one-year period ending the day before the loan was made over the outstanding balance of loans from the Plan on the date on which the loan was made or 50 percent of their vested account balance. A participant can only have two loans outstanding at a time. The loans are secured by the balance in the participants' accounts and bear interest at a fixed rate of prime (6.75% at December 31, 2025) as of the date of the new loan. Total notes receivable from participants were $1,131,291 and $1,042,087 at December 31, 2025 and 2024, respectively.

Cash Surrender Value to Pay Benefits
Before restatement of the Plan effective September 1, 2002, participants were permitted to purchase life insurance through the Plan. This investment option is no longer available for participants who entered the Plan after this date. For those participants who retained the life insurance option, the participant's account is reduced by the amount of the premiums and credited with any policy dividends.

2. Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

2. Significant Accounting Policies (Continued)

Use of Estimates
The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents
The Plan considers all invested cash balances to be cash equivalents.

Payment of Benefits
Benefits are recorded when paid.

Investment Valuation and Income Recognition
All contributions and rollovers are invested at the direction of each participant in any combination of the investment funds offered. Investments in mutual funds and the self-directed brokerage account are valued at quoted market prices established in an active market which represent the net asset value of shares held by the Plan at year end. The fair value of the collective investment trust funds, depending on the contract, is determined based on the fair value of the underlying securities, which include market securities and open-end mutual funds or based on the present value of the contract's expected cash flows, discounted by current market interest rates for like investments.

Purchases and sales of securities are recorded on the trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Realized and unrealized appreciation and depreciation in value of investments are allocated to the participant accounts based on participant holdings in each fund.

Plan Expenses
Certain plan expenses are paid by the plan sponsor as provided by the plan document. Expenses related to specific participant transactions (notes receivable from participants and distributions) are charged directly to the participant’s account.

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued, but unpaid, interest. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the plan document.

3. Federal Income Taxes

The Plan adopted a Non-Standardized Pre-Approved Profit Sharing Plan document. This document received an opinion letter dated June 30, 2020, in which the IRS stated that the document was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). As allowed by the IRS, the Plan is relying on the opinion letter issued on the plan document for its own qualification. The plan document has been amended for changes required by the IRS since receiving the opinion letter. The plan administrator believes the Plan is designed and currently operating in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would be sustained upon examination by the applicable authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of December 31, 2025, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in process.

4. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become fully vested in their accounts.

5. Investments

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The following information included in the accompanying financial statements and supplemental schedule was obtained or derived from information certified as complete and accurate by Vanguard Fiduciary Trust Company ("Vanguard"), the trustee of the Plan, and was not subject to audit for the years ended December 31:

	2025	2024
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Notes Receivable from Participants	1,131,291	1,042,087
Net Change in Value of Investments	$ 32,560,271	
Interest and Dividends	3,331,195	
Interest Income on Notes Receivable from Participants	73,614	

6. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits.

	Quoted Prices in Active Markets for Identical Assets (Level 1)	Total
December 31, 2025:		
Mutual Funds	$ 88,446,758	$ 88,446,758
Self-Directed Brokerage Account	5,851,600	5,851,600
Total Assets in Fair Value Hierarchy	94,298,358	94,298,358
Investments Measured at Net Asset Value		154,460,755
Investments at Fair Value	$ 94,298,358	$ 248,759,113
December 31, 2024:		
Mutual Funds	$ 83,668,886	$ 83,668,886
Self-Directed Brokerage Account	4,914,705	4,914,705
Total Assets in Fair Value Hierarchy	88,583,591	88,583,591
Investments Measured at Net Asset Value		124,152,144
Investments at Fair Value	$ 88,583,591	$ 212,735,735

6. Fair Value Measurements (Continued)

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels:

Level 1 Inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority.

Level 2 Inputs are based on significant other observable inputs such as:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs are unobservable and significant to the fair value measurement.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. The Plan uses Level 2 inputs when market prices are not attainable but other observable inputs are available to arrive at a fair value, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available. There were no Level 2 or 3 investments in the Plan.

Level 1 Fair Value Measurements
The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year end. The self-directed brokerage account includes mutual funds, common stock, and bond funds. Mutual funds and common stocks are publicly traded investments and are valued daily at the closing price reported on the active market on which the funds are traded. The bond funds are valued based on a valuation model that uses inputs when quoted prices in active markets aren't available.

Collective Investment Trust Funds
These investments are valued using the net asset value ("NAV") of units of the collective investment trust funds. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investments for an amount different from the reported net asset value.

7. Collective Investment Trust Funds

The Plan invests in various collective investment trust funds ("CITs") maintained and administered by Vanguard. The CITs seek to provide capital appreciation and current income consistent with its current asset allocation. The CITs invest in other Vanguard mutual funds and trusts according to an asset allocation strategy designed for investors planning to retire and leave the workforce within a few years of the target year. There were no unfunded commitments.

8. Risks and Uncertainties

The Plan invests in various investment securities as directed by its participants. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

9. Party-in-Interest Transactions

Plan investments are managed by Vanguard, the trustee as defined by the Plan, and therefore these transactions qualify as party-in-interest transactions. Fees paid by the Plan to Vanguard and other parties-in-interest for contract administration, advisory and professional services amounted to $124,319 for the year ended December 31, 2025. The Plan also holds notes receivable from participants. As a result, these notes receivable and all related transactions were with a party-in-interest. All of these transactions are exempt from being prohibited transactions by ERISA.

10. Reconciliation to Form 5500

The following is a reconciliation of the net assets available for benefits per the financial statements to the Form 5500 at December 31:

	2025	2024
Net Assets Available for Benefits Per the Financial Statements	$ 253,410,464	$ 216,487,065
Less: Employer Contributions Receivable	(3,520,060)	(2,709,243)
Net Assets Available for Benefits Per the Form 5500	$ 249,890,404	$ 213,777,822

10. Reconciliation to Form 5500 (Continued)

The following is a reconciliation of the net increase in net assets available for benefits before transfers out of the Plan per the financial statements to net income per the Form 5500 for the year ended December 31, 2025:

Net Increase in Net Assets Available for Benefits Before Transfers Out of the Plan Per the Financial Statements	$ 40,527,553
Change in Employer Contributions Receivable	(810,817)
Net Income per Form 5500	$ 39,716,736

11. Subsequent Events

The Company has evaluated events and transactions for potential recognition or disclosure in the financial statements through October 12, 2026, which is the date the financial statements were available to be issued.

In December 2022, Congress passed the Setting Every Community Up for Retirement Enhancement Act of 2022 ("SECURE Act 2.0") that continued the retirement system reform previously passed in 2019. Certain provisions of the SECURE Act 2.0 are effective starting at various dates through 2026, with the plan amendment for the adoption of SECURE Act 2.0 due by December 31, 2026.

As part of SECURE Act 2.0, effective January 1, 2026, catch-up contributions made by high-income earners will be designated as Roth contributions.

SUPPLEMENTAL SCHEDULE

Schedule 1

EMERGEORTHO, P.A. RETIREMENT PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2025

EIN 56-1079264

PLAN 001

(a)	Identity of Issuer, Borrower, Lessor or Similar Party (b)	Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Current Value (e)
*	Vanguard	Institutional Index Fund Institutional Shares	$ 33,179,651
*	Vanguard	Target Retirement 2030 Trust II	29,036,506
*	Vanguard	Target Retirement 2040 Trust II	28,037,632
*	Vanguard	Target Retirement 2035 Trust II	26,551,566
*	Vanguard	Target Retirement 2045 Trust II	18,882,294
*	Vanguard	Target Retirement 2050 Trust II	17,466,367
*	Vanguard	Target Retirement 2025 Trust II	12,745,818
*	Vanguard	Target Retirement 2055 Trust II	11,219,847
*	Vanguard	Total International Stock Index Fund Admiral Shares	6,281,087
*	Vanguard	Small-Cap Index Fund Admiral Shares	6,278,164
*	Vanguard	PRIMECAP Fund Admiral Shares	5,906,993
*	Vanguard	Self-Directed Brokerage Fund	5,851,600
*	Vanguard	Mid-Cap Index Fund Admiral Shares	5,505,265
*	Vanguard	Target Retirement 2060 Trust II	5,368,794
	Dodge & Cox	Stock Fund Class I	5,340,162
*	Vanguard	Balanced Index Fund Admiral Shares	4,376,157
*	Vanguard	Federal Money Market Fund	4,103,379
*	Vanguard	Total World Stock Index Fund Admiral Shares	3,452,280
*	Vanguard	Target Retirement 2020 Trust II	3,195,598
*	Vanguard	Total Bond Market Index Fund Admiral Shares	2,633,008
*	Vanguard	Small-Cap Value Index Fund Admiral Shares	2,286,865
*	Vanguard	Emerging Markets Stock Index Fund Admiral Shares	2,031,610
*	Vanguard	Intermediate-Term Investment-Grade Fund Admiral Shares	1,736,565
*	Vanguard	Real Estate Index Fund Admiral Shares	1,354,030
	Oakmark	International Fund Investor Class	1,264,927
*	Vanguard	Target Retirement Income Trust II	1,235,956
*	Vanguard	Short-Term Bond Index Fund Admiral Shares	1,093,862
*	Vanguard	Total International Bond Index Fund Admiral Shares	788,312
*	Vanguard	Target Retirement 2065 Trust II	664,726
	Hartford	Small Cap Growth Fund Class Y	544,076
*	Vanguard	Inflation-Protected Securities Fund Admiral Shares	290,365
*	Vanguard	Target Retirement 2070 Trust II	55,651
*	Participant Loans**	Interest Rates (3.25% - 9.25%)	1,131,291
			$ 249,890,404

* Party-in-interest to the Plan.

** The accompanying financial statements classify participant loans as notes receivable from participants.

EMERGEORTHO, P.A. RETIREMENT PLAN

Financial Statements

As of December 31, 2025 and 2024
and for the Year Ended December 31, 2025

CONTENTS

INDEPENDENT AUDITORS' REPORT	1 – 4
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits	6
NOTES TO FINANCIAL STATEMENTS	7 – 14
SUPPLEMENTAL SCHEDULE	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	15

TJT

Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Retirement Plan Committee
EmergeOrtho, P.A. Retirement Plan
Durham, North Carolina

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the accompanying financial statements of EmergeOrtho, P.A. Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of EmergeOrtho, P.A. Retirement Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of EmergeOrtho, P.A. Retirement Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments; administering the plan; and determining that the plan's transactions that are presented and disclosed in the financial statements are in conformity with the plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of EmergeOrtho, P.A. Retirement Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about EmergeOrtho, P.A. Retirement Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

- the form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Thomas, Judy & Tucker, P.A.

Raleigh, North Carolina
October 12, 2026

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2025 and 2024

ASSETS	2025	2024
Investments at Fair Value:		
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Total Investments at Fair Value	248,759,113	212,735,735
Receivables:		
Employer Contributions	3,520,060	2,709,243
Notes Receivable from Participants	1,131,291	1,042,087
Total Receivables	4,651,351	3,751,330
Net Assets Available for Benefits	$ 253,410,464	$ 216,487,065

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2025

Additions to Net Assets Attributed to:		
Investment Income:		
Net Change in Value of Investments	$	32,560,271
Interest and Dividends		3,331,195
Total Investment Income		35,891,466
Interest Income on Notes Receivable from Participants		73,614
Contributions:		
Employee		7,923,906
Employer		9,144,146
Rollover		3,326,467
Total Contributions		20,394,519
Total Additions		56,359,599
Deductions from Net Assets Attributed to:		
Benefit Payments		15,707,727
Administrative Expenses		124,319
Total Deductions		15,832,046
Net Increase in Net Assets Before Transfers Out of the Plan		40,527,553
Transfers Out of the Plan, Net		(3,604,154)
Net Increase in Net Assets		36,923,399
Net Assets Available for Benefits, Beginning of Year, As Restated		216,487,065
Net Assets Available for Benefits, End of Year	$	253,410,464

See Accompanying Notes

EMERGEORTHO, P.A. RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2025 and 2024

1. Description of Plan

The following description of EmergeOrtho, P.A. Retirement Plan (the “Plan") provides only general information for the Plan sponsored by EmergeOrtho, P.A. (the “Company”). Participants in the Plan should refer to the plan agreement for a more complete description of the Plan's provisions.

General
The Plan became effective on September 1, 1975 as a defined contribution plan. The Plan covers substantially all employees of the Company who are 21 years of age. Eligibility for employer contributions includes a one-year service requirement. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Contributions
Participants are automatically enrolled in the Plan with a 4% pre-tax deferral election once an employee becomes an eligible employee. Participants will also receive an automatic deferral increase of 1% each year after their initial enrollment date, effective up to 10%. Participants may elect to contribute a different percentage of their pre-tax or after-tax annual compensation, not to exceed the maximum allowed by the Internal Revenue Service (“IRS”). Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan also permits rollover contributions from other qualifying retirement plans. The Company makes safe harbor matching contributions of up to 3% of participants’ compensation. Each year, the Company may also make a discretionary nonelective contribution.

Participant Accounts
Employee contributions and employer contributions activity are maintained separately in each participant’s account. Participants direct the investment of their account balances into various investment options offered by the Plan. Participants may change their investments daily. Each participant’s account is credited with the participant’s contribution, the Company’s contribution, and an allocation of plan earnings and administrative expenses. Allocations are based on participants’ compensation or account balances, as defined. A participant is entitled to the benefit that can be provided from the participant’s vested account.

Vesting
Participants are vested immediately in their elective deferral contributions, rollover contributions and the Company’s safe harbor matching plus actual earnings thereon. Vesting in the Company’s additional discretionary contributions is determined on a graduated basis based upon years of creditable service. A participant is fully vested in the Company's additional discretionary contributions after six years of credited service.

Forfeitures
At December 31, 2025, forfeited accounts totaled $99,746. Forfeitures can be used to pay plan expenses, used to reduce employer contributions or allocated as an additional employer matching contribution. During the plan year ended December 31, 2025, the Plan used $171,280 of forfeited accounts to reduce the employer contributions.

1. Description of Plan (Continued)

Payment of Benefits
Generally, a participant becomes eligible to receive benefits on their normal retirement age (65), death, disability, termination of employment, or reasons of proven financial hardship. Distributions under the Plan may be made as 100% of a participant's account balance in a lump sum or as annuity distributions. Participants are eligible to take in-service withdrawals once they attain age 59½. If the vested balance is less than $5,000, a lump sum distribution is made. Effective October 1, 2025, the amount increased to $7,000. Early retirement is permitted for participants who are 55 years old and have completed 10 years of service.

Hardship Withdrawals
A participant may withdraw all or part of their elective deferral contributions for immediate and severe financial need. Participants self-certify that they have an immediate and severe financial need and that the amount requested does not exceed the amount necessary to satisfy the need. In accordance with IRS regulations, the participant must exhaust all other assets available prior to obtaining the hardship withdrawal.

Notes Receivable from Participants
Participants may borrow from their fund accounts a minimum of $2,000 up to a maximum equal to the lesser of $50,000 reduced by the excess of the highest outstanding balance of all other loans from the Plan during the one-year period ending the day before the loan was made over the outstanding balance of loans from the Plan on the date on which the loan was made or 50 percent of their vested account balance. A participant can only have two loans outstanding at a time. The loans are secured by the balance in the participants' accounts and bear interest at a fixed rate of prime (6.75% at December 31, 2025) as of the date of the new loan. Total notes receivable from participants were $1,131,291 and $1,042,087 at December 31, 2025 and 2024, respectively.

Cash Surrender Value to Pay Benefits
Before restatement of the Plan effective September 1, 2002, participants were permitted to purchase life insurance through the Plan. This investment option is no longer available for participants who entered the Plan after this date. For those participants who retained the life insurance option, the participant's account is reduced by the amount of the premiums and credited with any policy dividends.

2. Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan are prepared under the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America ("GAAP").

2. Significant Accounting Policies (Continued)

Use of Estimates
The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Cash and Cash Equivalents
The Plan considers all invested cash balances to be cash equivalents.

Payment of Benefits
Benefits are recorded when paid.

Investment Valuation and Income Recognition
All contributions and rollovers are invested at the direction of each participant in any combination of the investment funds offered. Investments in mutual funds and the self-directed brokerage account are valued at quoted market prices established in an active market which represent the net asset value of shares held by the Plan at year end. The fair value of the collective investment trust funds, depending on the contract, is determined based on the fair value of the underlying securities, which include market securities and open-end mutual funds or based on the present value of the contract's expected cash flows, discounted by current market interest rates for like investments.

Purchases and sales of securities are recorded on the trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Realized and unrealized appreciation and depreciation in value of investments are allocated to the participant accounts based on participant holdings in each fund.

Plan Expenses
Certain plan expenses are paid by the plan sponsor as provided by the plan document. Expenses related to specific participant transactions (notes receivable from participants and distributions) are charged directly to the participant’s account.

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued, but unpaid, interest. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the plan document.

3. Federal Income Taxes

The Plan adopted a Non-Standardized Pre-Approved Profit Sharing Plan document. This document received an opinion letter dated June 30, 2020, in which the IRS stated that the document was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). As allowed by the IRS, the Plan is relying on the opinion letter issued on the plan document for its own qualification. The plan document has been amended for changes required by the IRS since receiving the opinion letter. The plan administrator believes the Plan is designed and currently operating in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would be sustained upon examination by the applicable authorities. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of December 31, 2025, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in process.

4. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants will become fully vested in their accounts.

5. Investments

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The following information included in the accompanying financial statements and supplemental schedule was obtained or derived from information certified as complete and accurate by Vanguard Fiduciary Trust Company ("Vanguard"), the trustee of the Plan, and was not subject to audit for the years ended December 31:

	2025	2024
Mutual Funds	$ 88,446,758	$ 83,668,886
Self-Directed Brokerage Account	5,851,600	4,914,705
Collective Investment Trust Funds	154,460,755	124,152,144
Notes Receivable from Participants	1,131,291	1,042,087
Net Change in Value of Investments	$ 32,560,271	
Interest and Dividends	3,331,195	
Interest Income on Notes Receivable from Participants	73,614	

6. Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits.

	Quoted Prices in Active Markets for Identical Assets (Level 1)	Total
December 31, 2025:		
Mutual Funds	$ 88,446,758	$ 88,446,758
Self-Directed Brokerage Account	5,851,600	5,851,600
Total Assets in Fair Value Hierarchy	94,298,358	94,298,358
Investments Measured at Net Asset Value		154,460,755
Investments at Fair Value	$ 94,298,358	$ 248,759,113
December 31, 2024:		
Mutual Funds	$ 83,668,886	$ 83,668,886
Self-Directed Brokerage Account	4,914,705	4,914,705
Total Assets in Fair Value Hierarchy	88,583,591	88,583,591
Investments Measured at Net Asset Value		124,152,144
Investments at Fair Value	$ 88,583,591	$ 212,735,735

6. Fair Value Measurements (Continued)

Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels:

Level 1 Inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority.

Level 2 Inputs are based on significant other observable inputs such as:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specific (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs are unobservable and significant to the fair value measurement.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. The Plan uses Level 2 inputs when market prices are not attainable but other observable inputs are available to arrive at a fair value, and Level 3 inputs were only used when Level 1 or Level 2 inputs were not available. There were no Level 2 or 3 investments in the Plan.

Level 1 Fair Value Measurements
The fair value of mutual funds is based on quoted net asset values of the shares held by the Plan at year end. The self-directed brokerage account includes mutual funds, common stock, and bond funds. Mutual funds and common stocks are publicly traded investments and are valued daily at the closing price reported on the active market on which the funds are traded. The bond funds are valued based on a valuation model that uses inputs when quoted prices in active markets aren't available.

Collective Investment Trust Funds
These investments are valued using the net asset value ("NAV") of units of the collective investment trust funds. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investments for an amount different from the reported net asset value.

7. Collective Investment Trust Funds

The Plan invests in various collective investment trust funds ("CITs") maintained and administered by Vanguard. The CITs seek to provide capital appreciation and current income consistent with its current asset allocation. The CITs invest in other Vanguard mutual funds and trusts according to an asset allocation strategy designed for investors planning to retire and leave the workforce within a few years of the target year. There were no unfunded commitments.

8. Risks and Uncertainties

The Plan invests in various investment securities as directed by its participants. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

9. Party-in-Interest Transactions

Plan investments are managed by Vanguard, the trustee as defined by the Plan, and therefore these transactions qualify as party-in-interest transactions. Fees paid by the Plan to Vanguard and other parties-in-interest for contract administration, advisory and professional services amounted to $124,319 for the year ended December 31, 2025. The Plan also holds notes receivable from participants. As a result, these notes receivable and all related transactions were with a party-in-interest. All of these transactions are exempt from being prohibited transactions by ERISA.

10. Reconciliation to Form 5500

The following is a reconciliation of the net assets available for benefits per the financial statements to the Form 5500 at December 31:

	2025	2024
Net Assets Available for Benefits Per the Financial Statements	$ 253,410,464	$ 216,487,065
Less: Employer Contributions Receivable	(3,520,060)	(2,709,243)
Net Assets Available for Benefits Per the Form 5500	$ 249,890,404	$ 213,777,822

10. Reconciliation to Form 5500 (Continued)

The following is a reconciliation of the net increase in net assets available for benefits before transfers out of the Plan per the financial statements to net income per the Form 5500 for the year ended December 31, 2025:

Net Increase in Net Assets Available for Benefits Before Transfers Out of the Plan Per the Financial Statements	$ 40,527,553
Change in Employer Contributions Receivable	(810,817)
Net Income per Form 5500	$ 39,716,736

11. Subsequent Events

The Company has evaluated events and transactions for potential recognition or disclosure in the financial statements through October 12, 2026, which is the date the financial statements were available to be issued.

In December 2022, Congress passed the Setting Every Community Up for Retirement Enhancement Act of 2022 ("SECURE Act 2.0") that continued the retirement system reform previously passed in 2019. Certain provisions of the SECURE Act 2.0 are effective starting at various dates through 2026, with the plan amendment for the adoption of SECURE Act 2.0 due by December 31, 2026.

As part of SECURE Act 2.0, effective January 1, 2026, catch-up contributions made by high-income earners will be designated as Roth contributions.

SUPPLEMENTAL SCHEDULE

Schedule 1

EMERGEORTHO, P.A. RETIREMENT PLAN

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2025

EIN 56-1079264

PLAN 001

(a)	Identity of Issuer, Borrower, Lessor or Similar Party (b)	Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Current Value (e)
*	Vanguard	Institutional Index Fund Institutional Shares	$ 33,179,651
*	Vanguard	Target Retirement 2030 Trust II	29,036,506
*	Vanguard	Target Retirement 2040 Trust II	28,037,632
*	Vanguard	Target Retirement 2035 Trust II	26,551,566
*	Vanguard	Target Retirement 2045 Trust II	18,882,294
*	Vanguard	Target Retirement 2050 Trust II	17,466,367
*	Vanguard	Target Retirement 2025 Trust II	12,745,818
*	Vanguard	Target Retirement 2055 Trust II	11,219,847
*	Vanguard	Total International Stock Index Fund Admiral Shares	6,281,087
*	Vanguard	Small-Cap Index Fund Admiral Shares	6,278,164
*	Vanguard	PRIMECAP Fund Admiral Shares	5,906,993
*	Vanguard	Self-Directed Brokerage Fund	5,851,600
*	Vanguard	Mid-Cap Index Fund Admiral Shares	5,505,265
*	Vanguard	Target Retirement 2060 Trust II	5,368,794
	Dodge & Cox	Stock Fund Class I	5,340,162
*	Vanguard	Balanced Index Fund Admiral Shares	4,376,157
*	Vanguard	Federal Money Market Fund	4,103,379
*	Vanguard	Total World Stock Index Fund Admiral Shares	3,452,280
*	Vanguard	Target Retirement 2020 Trust II	3,195,598
*	Vanguard	Total Bond Market Index Fund Admiral Shares	2,633,008
*	Vanguard	Small-Cap Value Index Fund Admiral Shares	2,286,865
*	Vanguard	Emerging Markets Stock Index Fund Admiral Shares	2,031,610
*	Vanguard	Intermediate-Term Investment-Grade Fund Admiral Shares	1,736,565
*	Vanguard	Real Estate Index Fund Admiral Shares	1,354,030
	Oakmark	International Fund Investor Class	1,264,927
*	Vanguard	Target Retirement Income Trust II	1,235,956
*	Vanguard	Short-Term Bond Index Fund Admiral Shares	1,093,862
*	Vanguard	Total International Bond Index Fund Admiral Shares	788,312
*	Vanguard	Target Retirement 2065 Trust II	664,726
	Hartford	Small Cap Growth Fund Class Y	544,076
*	Vanguard	Inflation-Protected Securities Fund Admiral Shares	290,365
*	Vanguard	Target Retirement 2070 Trust II	55,651
*	Participant Loans**	Interest Rates (3.25% - 9.25%)	1,131,291
			$ 249,890,404

* Party-in-interest to the Plan.

** The accompanying financial statements classify participant loans as notes receivable from participants.