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
- [X] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [ ] 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
QUESTCO COMPANIES RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2001

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)
QUESTCO HOLDINGS, INC.

480 WILDWOOD FOREST DR. SUITE 250
THE WOODLANDS, TX 77380

2b Employer Identification Number (EIN)
81-2333797

2c Plan Sponsor's telephone number
936-756-1980

2d Business code (see instructions)
561300

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.	10/15/2026	CHRISTY ARNOLD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2026	CHRISTY ARNOLD
	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:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	17579
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)**	12579
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	12009
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	5475
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	17484
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	17484
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)**	11808
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)**	13282
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	31
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 2F 2G 2J 2K 2R 2S 2T 3D 3H 2V

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)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(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)** [X] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached _____
- **(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 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
QUESTCO COMPANIES RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
QUESTCO HOLDINGS, INC.

D Employer Identification Number (EIN)
81-2333797

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).. . . . . ☐ 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

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(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)

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(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 37 38 50 63 64 67 68 71 72	TPA	2000307	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SLAVIC MUTUAL FUND MANGEMENT

59-2749576

(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?
28 51	INVESTMENT MGMT	678132	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

FIDUCIARY ALLIANCE, LLC

511 RHETT STREET SUITE 2A
GREENVILLE, SC 29601

(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?
27	ADVISOR	504143	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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)

QUESTCO COMPANIES

81-2333797

(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?
14	PLAN ADMINISTRATOR	194233	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

UHY, LLP

20-0694403

(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?
10	AUDITOR	24875	Yes [ ] No [X]	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
(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.	

(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.	

(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
QUESTCO COMPANIES RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
QUESTCO HOLDINGS, INC.

D Employer Identification Number (EIN)
81-2333797

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: MORLEY STABLE VALUE FUND

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS 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)
93-6274329-025	C	1507929

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)

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)

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)

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

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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
QUESTCO COMPANIES RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
QUESTCO HOLDINGS, INC.

D Employer Identification Number (EIN)
81-2333797

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)	1155158	526953
(2) Participant contributions	1b(2)	607076	809821
(3) Other	1b(3)	21998	34384
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	8221270	10610846
(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)	7218262	8527173
(9) Value of interest in common/collective trusts	1c(9)	1606854	1505600
(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)	422491248	487149781
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	253209	266819

		(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	441575075	509431377
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	441575075	509431377

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)	22403406	
(B) Participants	2a(1)(B)	52281221	
(C) Others (including rollovers)	2a(1)(C)	6870297	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		81554924
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)	595153	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		595153
(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)	11647341	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		11647341
(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)		
(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)		58796653
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		152594071
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	51009327	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		51009327
f Corrective distributions (see instructions)	2f		360841
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)	2194540	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	24875	
(5) Investment advisory and investment management fees	2i(5)	1182275	
(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)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		3401690
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		54771858
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		97822213
l Transfers of assets:			
(1) To this plan	2l(1)		50600557
(2) From this plan	2l(2)		80566468

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: UHY, LLP **(2)** EIN: 20-0694403

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		500000
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)
NEXTEP 401(K) RETIREMENT SAVINGS PLAN	73-1543198	333
ACTIVE DEVELOPMENT THERAPIES LLC 401(K) PROFIT SHARING PLAN	20-1069250	001
PERIMETER SOLUTIONS 401(K)	82-4673053	001
AEGIS MANAGEMENT 401(K) PLAN	86-3812426	001

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 _____.

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)
WIND COMPOSITE SERVICES GROUP, LLC 401(K) PLAN	86-1156893	001
COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	27-3007025	333
SONORAN TECHNOLOGY AND PROFESSIONAL SERVICES--AFSOC 401(K) PLAN	20-8467218	007
SONORAN TECHNOLOGY AND PROFESSIONAL SERVICES--ATLUS 401(K) PLAN	20-8467218	009

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 _____.

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)
SEQUOIA ONE	46-4716239	001
INSPERITY 401(K) PLAN	76-0178498	001
TASTY TOPPINGS INC./GOTTBERG AUTO COMPANY 401(K) PLAN	47-0481675	001
WEATHERFORD INTERNATIONAL, LLC 401(K) SAVINGS PLAN	04-2515019	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 _____.

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)
IMEC US 401(K) PLAN	75-0540932	001
WAO MANAGEMENT LLC 401(K) PLAN	93-1395557	001
NCTTRAC 401(K) PLAN	75-2534492	002
ADP TOTALSOURCE RETIREMENT SAVINGS PLAN	59-2455282	001

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 _____.

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)
NEWLAND MORTGAGE 401(K) PLAN	83-3467059	002
RAISEUP FAMILIES 401K PLAN	76-0447678	001
ADVANCED BUILDING SERVICES INC. 401(K) PROFIT SHARING PLAN AND TRUST	54-1837664	002
JUSTWORKS RETIREMENT SAVINGS PLAN	46-2283648	333

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 _____.

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)
FOUNDATION RISK PARTNERS 401(K) PLAN	81-5191759	001
ADVISOR HR, INC. RETIREMENT SAVINGS PLAN	47-2456660	001
SPATCO ENERGY SOLUTIONS 401(K) PLAN	84-3846075	011
TK SUPPLIES & PACKAGING 401(K) PLAN	47-4456439	001

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 _____.

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)
MULLIKIN GROUP, INC. 401(K) PLAN	83-3036963	001
SERENAGROUP, INC. 401(K) PLAN	26-4449999	001
SSH GOLF ACQUISITION, LLC	87-4727938	001
CURANA HEALTH LLC 401(K) PLAN	87-4701840	001

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 _____.

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)
TRINET 401K PLAN KOCHEK CO LLC	48-1304650	334
DOVLY INC. 401K PLAN	84-1790390	001
ABEL HR MULTI 401(K) AND SAVINGS PLAN- ADMIRAL PERMIAN OPERATING LLC	22-3116338	001
SUCCESSWISE POOLED EMPLOYER PLAN	93-2546116	001

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 _____.

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)
TRUTH BROADCASTING CORPORATION 401K PROFIT SHARING PLAN & TRUST	56-1460305	001
TOTAL DOCUMENT SOLUTIONS INC. RETIREMENT TRUST	71-0797672	001
AIR TREK INC.	59-1915238	002
SWBC PROFESSIONAL EMPLOYER SERVICES 401(K) PLAN	27-3708085	333

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 _____.

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)
ESTRATEGY SOLUTIONS SPIN OFF 401(K) PLAN	74-2957873	002
RESOURCING EDGE RETIREMENT SAVINGS PLAN	46-3045894	002
G & A PARTNERS MULTIPLE EMPLOYER 401(K) PLAN	76-0461926	001
THE STANDARD	25-1838406	873

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 _____.

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)
VENSURE RETIREMENT PLAN	39-2377547	016
PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	87-1231461	333
DEEL PEO RETIREMENT PLAN	92-2581574	001

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
QUESTCO COMPANIES RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
QUESTCO HOLDINGS, INC.

D Employer Identification Number (EIN)
81-2333797

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): 65-0708495 58-1428634

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 / 2022 (MM/DD/YYYY) and the Opinion Letter serial number Q702352A .

SCHEDULE MEP (Form 5500)	MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**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 QUESTCO COMPANIES RETIREMENT PLAN	**B** Three-digit Plan number (PN)..... ▶ 001
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF QUESTCO HOLDINGS, INC.	**D** Administrator's EIN 81-2333797

Part I Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.

1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

- **a** ☐ association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)
- **b** ☒ professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)
- **c** ☐ pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)
- **d** ☐ other multiple-employer pension plan (Describe)_____ (Complete Part II)

Part II Participating Employer Information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. **Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).**

2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
QUESTCO HOLDINGS INC	81-2333797	2.96	16007163
2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
PLUSPLUS USA	81-0948232	0.17	374421

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e	Does the plan include any individuals not participating through an employer or who are individual working owners?	**2e**	☐ Yes ☒ No
2f	If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	**2f**	
2g	If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	**2g**	

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE SEABROOK OF HILTON HEAD INC	57-0559295	0.42	1797318
CHEMFLOW PRODUCTS	26-4637748	0.00	0
CLAYCON OIL LLC	82-4787049	0.45	852178
CURRY BOUDREAUX ARCHITECTS	76-0391114	0.13	1242268
CONCRETE LEVELING SOLUTIONS	81-3790811	0.00	61355
ACCESS ADVANCE LLC	47-3139358	0.00	319
BETTY BLOCKS USA INC	61-1851131	0.05	89970
QUESTCO HOLDINGS INC PLAN EXPENSE REIMBURSEMENT ACCOUNT	39-4256981	0.00	50511
FAST BREAK LC DBA BALCO SYSTEMS	20-2528089	0.35	695541

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INVESTIGATIONS LAW GROUP LLC	26-0875739	0.07	662029
MAC CONSULTING LP DBA ALLIANCE CONSULTING	20-2001313	0.19	2423318
PALADIN DATA CORPORATION	93-0927111	0.83	3275858
SAN ANTONIO BELTING PULLEY CO INC	04-3636306	0.21	863474
THE ASCEND GROUP INC	75-2685950	0.32	4542905
GROF USA DISTRIBUTORS INC	65-1949063	0.05	155444
INNOVATIVE RESEARCH OF WEST FLORIDA INC	14-1847464	0.15	591116
3BMH INVESTMENTS	26-3557329	0.00	0
4MENU INC	76-0188129	0.00	135225

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCORD LLC	81-1383125	0.21	1569363
ACE NDT LLC	46-3834187	0.00	173584
ACTIVE DEVELOPMENT THERAPIES	20-1069250	0.01	0
AETOS CONSTRUCTION LLC	30-0771183	0.16	886295
ALL PRO MANAGEMENT COMPANY LLC	99-0660601	0.00	0
AM PM DIESEL SERVICES INC	47-3311419	0.13	596905
AMERICAN DRYWALL SERVICES INC	74-2184281	0.00	168487
AMERICAN MARKSMAN ARKANSAS	81-4951225	0.00	2800
AMERICAN MARKSMAN LLC	81-1042440	0.10	465186

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AST TURBO	61-1778192	0.46	941946
BAYOU CITY WALL SYSTEMS	76-0522146	0.00	182161
BB INTERNATIONAL INC	20-3082032	0.13	1708157
BETTER CARE CHIROPRACTIC	20-5443176	0.00	8071
BIRDWELL SERVCON INC	76-0624712	0.00	122143
BLUFFTON SELF HELP	57-0862658	0.12	360174
BUDDY DOYLES CAR CLINIC LLC	81-2357438	0.00	3780
CAPITOL SCIENTIFIC INC	74-1490119	0.22	1581933
CENTER FOR BALANCE NEUROLOGICAL PHYSICAL THERAPY DBA BALAN	83-0386782	0.00	23820

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEMPAK INTERNATIONAL	36-3687855	0.02	1492516
CLEAR HEALTHCARE SOLUTIONS	47-0698512	0.04	330061
CLEAR RECOVERY INC	47-0559066	0.14	1737710
COMMUNITY SOLUTIONS UNLIMITED	46-1700450	0.03	95841
CONSUMER TITLE ESCROW	83-0778962	0.01	81356
CRC RETREAT PARTNERS INC	68-0658686	0.15	747418
CURTIS WAGNER PLASTICS CORP	76-0381350	0.15	677661
POWELL LAW GROUP	47-1549124	0.08	364909
DYNAMIS ENERGY LLC DBA UNITED ENERGY SERVICES	45-4071996	0.36	2486562

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
E G AMISH FURNITURE	86-3165743	0.03	422798
ESTRATEGY SOLUTIONS	74-2957873	0.00	0
FIRST CARE MANAGEMENT GROUP LLC	47-0841318	0.00	158509
FIRSTSYNC LLC DBA PHYSICIANS CHOICE PRIVATE DUTY	20-8563397	0.12	469098
GAP ENGINEERING	20-0797158	0.00	248099
GENETIVISION CORPORATION 2810	20-4550357	0.07	632325
GH AMERICA INVESTMENTS GROUP INC	47-3628372	0.16	1101200
GH PACVEST LLC	81-4268323	0.00	13966
GHA CAPSTONE LLC	35-2557849	0.18	550114

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GVCC INC	27-2981067	0.05	549148
HASTINGS FOODS LLC	20-3316344	0.01	30312
HOUSTONPASADENA APACHE OIL COMPANY	74-1715124	0.13	1279430
J G SALES INC	74-2735169	0.06	266999
KL CHEMPAK	23-2812397	0.01	384760
KESCO SUPPLY INC	74-1858702	0.07	770389
KOLEYS RELIGIOUS SUPPLY LLC DBA THE COSGRAVE COMPANY	20-2417240	0.05	484168
KOLEYS INC	47-0213250	0.12	1673364
LAW OFFICE OF PATRICIA GARCIA BILLINGS PLLC	27-3215214	0.01	68155

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LINUS PRODUCTS INC	20-1709674	0.00	20444
MAAS NURSERY INC	74-2007671	0.08	615395
MASTER MACHINE INC	76-0106323	0.02	191731
ORCA PC DBA MEDIX OCCUPATIONAL HEALTH SERVICES	47-0822624	0.30	2166796
MID AMERICA PUMP SUPPLY INC	47-0670509	0.43	7823276
FARLEY MANAGEMENT GROUP DBA MIRACLE DENTAL LAB	99-2480342	0.08	177834
MULTIFAMILY MANAGEMENT MINISTRIES	74-1306767	0.18	1047813
P L CAPITAL CORP INC	47-0795997	0.07	1065573
PERIMETER SOLUTIONS LP	76-0802660	2.45	0

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PERKINS DRILLING TOOLS INC	76-0378443	0.04	295127
PHYSICIANS CHOICE NEBRASKA LLC	11-3720366	0.00	91
PINNACLE STORAGE MANAGERS LLC	81-1747196	0.00	0
PLATINUM COPIER SOLUTIONS LLC	61-1535988	0.00	120
PROTECH NUTRITION INC	80-0226775	0.01	42461
PURA VIDA INVESTMENTS LLC	90-0874746	0.02	1924868
RD HOWARD CONSTRUCTION	30-0176993	0.00	23709
RELIABLE BUSINESS RESOURCES ENTERPRISES LLC DBA RBR MACHINE	86-1212581	0.22	543815
RDW INC DBA ASAP EXPRESS	47-0825298	0.06	395371

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RIVER OAKS RUG CLEANERS	76-0206382	0.05	237812
RLB CONSTRUCTION DBA ROOFTEC	76-0472889	0.08	308962
SERVICE STEEL WAREHOUSE CO LP	76-0563341	1.54	12184484
SLOTTS MACHINE	20-3316662	0.00	3345
JS WATER CO LLC	04-3833352	0.00	29393
STOCK SEED FARMS INC	47-0608792	0.00	1
SUNSHINE POOLS	74-2023442	0.24	2520879
SUPERIOR CONTROL SECURITY INC	20-4815699	0.12	605444
TAYLOR FAMILY PRACTICE	71-0959498	0.00	272

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEXAS ASPHALT PAVEMENT ASSOCIATION	74-1445769	0.20	749506
THE BRIDGE INC	47-0591629	0.10	589816
WAVELENGTH ENTERPRISES LTD	06-1594919	0.09	239173
WESTECH ELECTRIC INC	20-2346955	0.02	0
WESTECH SUPPLY COMPANY	20-0637311	0.01	0
WINDCOM SERVICES	86-1156893	0.09	0
WINRIGHT PERSONNEL LP	82-3405099	0.00	720
WORKFIT	87-0704264	0.04	266668
XTREME LASHES	20-2971594	0.00	0

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YOUNG TRUCK TRAILER INC	47-0722835	0.01	24316
HVM TECHNOLOGY INC	20-1680270	0.11	633285
QD RESTORATION LLC	81-3798375	0.00	26234
ASPIRE HOSPITAL	26-2835957	0.05	117080
GENSOLUTIONS LLC	46-1905590	0.00	322957
DAT ENERGY SERVICES LLC	82-1096029	0.00	4466
HOUSTON THERMAL PROCESSING DBA HOUSTON HEAT TREAT	20-8236281	0.09	841689
MEDPERM URGENT CARE CENTER TRUST	92-6561961	0.01	101861
GRACE SCHOOL THEOLOGY	76-0690847	0.00	375373

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JENSEN EQUIPMENT	39-1035397	0.00	134
CRYMAR FINISHES	82-1796686	0.01	16843
CORVIA LLC	36-4903404	0.00	0
ABASCO LLC	20-2621261	0.00	153180
PROHYGIENE DBA ENVIRO MASTER SERVICES	45-3579648	0.01	45596
ACTION AIR FREIGHT SERVICES INC	74-2632465	0.00	1665
UNIQUE LOGISTICS INTERNATIONAL NYC LLC	20-4661272	0.87	6036264
UNIQUE LOGISTICS INTERNATIONAL BOS INC	04-3403898	0.09	3829118
QUESTCO HOLDINGS INC SUSPENSE ACCOUNT	81-2333700	0.00	2842651

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MILLARD SPRINKLER INC	47-0786521	0.19	2399549
NORTHWEST AIRPORT MANAGEMENT LP	76-0591851	0.01	147355
SUTHERLAND PRODUCTS INC	56-1153212	0.00	0
DESERT VALLEY PEDIATRIC THERAPY	20-8475411	0.20	800751
SEANAIR LLC	85-1650576	0.27	696874
TEXAS POOL GUY LLC	81-5419686	0.01	85995
CATCH GLOBAL FOUNDATION	46-5369024	0.13	389927
SONORAN TECHNOLOGY	20-8467218	0.00	0
SONORAN TECHNOLOGY	20-8467218	0.00	0

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EXPERTOX INC	76-0651367	0.04	42307
NORTHGATE COUNTRY CLUBWALDEN GOLF CLUB	46-1203151	0.00	0
NEXT WAVE ENERGY PARTNERS LP	47-1660527	2.13	9220754
CANYON MIDSTREAM PARTNERS II LLC REDCLIFF MIDSTREAM LLC	81-1077316	0.00	1618012
BLEYL INTERESTS INC DBA BLEYL ENGINEERING	76-0455264	1.67	13459720
PHOENIX PLASTICS LP	27-1535468	0.01	45725
PALM BEACH CAPITAL MANAGEMENT IV LLC	81-0725332	0.45	3979378
BELL CREEK FEEDERS	85-2244259	0.03	455948
24 FOUNDATION	20-3768277	0.02	92506

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NORTHEAST TECHNICAL SERVICES CO INC	34-1438512	0.34	5811115
CHOICE BALLAST SOLUTIONS LLC	46-4273338	0.00	49749
EAGLE PCO LLC	26-3219519	0.00	61244
SPLASH FINANCIAL INC	46-5483037	0.04	0
ADVANCE MACHINE TECHNOLOGIES LLC	84-2540757	0.07	34942
UV COUNTRY INC	42-1655301	0.01	295
MIGUEL E TREVINO MD PA	55-0804098	0.02	58656
BHA JEWELRY LLC	82-0912440	0.10	224290
DOGCENTRIC VENTURES INC DBA BARK SOCIAL	84-3480943	0.00	59803

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FRAC FUEL SOLUTIONS	47-1760352	0.00	85418
ENVIRONMENTAL TREATMENT TECHNOLOGIES LLC	45-0512916	0.00	75
PB EQUIPMENT INC	90-0933649	0.01	24264
QMODO AI INC	85-3512345	0.06	212054
PRAXIS VENTURES INC	46-4873466	0.23	785632
CAHILL SERVICES OPERATING LLC	47-4532987	1.56	4773626
STAGE 3 SEPARATION LLC	37-1637370	0.54	1503740
DXO CONSULTING LLC	27-1370068	0.00	7888
TWG SUPPLY	27-3388870	0.00	0

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PAULA J KRUPPSTADT MD PA	20-0130985	0.00	11030
EDGE NATURAL RESOURCES LLC	47-3099268	0.02	0
KEELEYTETON ADVISORS LLC	81-4164631	0.43	2966959
M J REIDER ASSOCIATES INC	23-1714835	0.39	3150012
JOLEY PARTNERS LLC	33-2342956	0.20	834011
TISDALE AIR CONDITION HEATING COMPANY	74-1719318	0.04	766169
HAWK ASSOCIATES LLC	80-0553081	0.43	1513878
LIGHTNING PRODUCTION SERVICES LLC	81-2580661	0.12	276241
EA RESTORATION LLC	47-1814770	0.00	1918

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TASTY TOPPINGS INCGOTTBERG AUTO COMPANY	47-0481675	0.00	0
SCYNCE LED LLC	92-2708148	0.00	24946
WOODLAND MIDSTREAM II PAYROLL LLC	83-2298355	0.00	288992
WOODBRIDGE PACIFIC GROUP	46-4393432	1.07	5742153
OSPREY MANAGEMENT LLC	02-0728177	0.10	544803
DYNOMAX DRILLING TOOLS USA INC	46-3112005	0.09	236532
DATAGRATION SOLUTIONS INC	85-1612186	0.00	0
US CLOUD LC	04-3843034	2.46	5753548
SUMMATION ENTERPRISE LP	31-1825403	0.01	754476

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STI VIBRATION MONITORING INC	27-2182887	0.14	0
ZIGABYTE CORPORATION	46-3028474	0.00	0
INGENERON INC	27-0062430	0.09	612883
VALLOW FLOOR COVERINGS INC	37-1135529	0.13	549101
IMEC USA NANOELECTRONICS DESIGN CENTER INC	30-0941966	0.02	0
INTERNATIONAL ALLIANCE GROUP LLC	86-2643268	0.37	656555
AXELA MGMT LLCAXELA CONSTRUCTION LLC	83-0573807	0.15	302676
HOUSTON GASTRO INSTITUTE PLLC	46-1804857	0.13	271768
FRACTAL RESOURCES LLC	87-1655727	0.06	444506

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BMF SOLUTIONS LLCBMF MILLWORK SOLUTIONS	82-2345569	0.05	255333
WAO MANAGEMENT LLC	93-1395557	0.01	0
BUILDER FUNNEL	82-3697325	0.10	324332
7TH ECHELON LLC	27-1508148	0.02	0
NANOCOPOEIA LLC	47-2407281	0.00	2153789
SIMPLY PROTEIN FOR PETS INC	86-1702252	0.26	180895
INX BUILDING MAINTENANCE SOLUTIONS INC	05-0522919	0.18	558657
CREDITSERVE	27-5209258	1.50	4679951
TEXAS ARMORING CORPORATION	74-2818649	0.00	9898

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RURAL REHAB PROVIDERS LLC	75-2929799	0.24	618504
RENTAL ZEBRA LLC	45-5022565	0.02	69114
ASHTON COMMERCIAL CONSTRUCTION LLC	74-3183579	0.17	476540
GREEN LOOP IT SOLUTIONS	45-2712953	0.14	770526
RISENOW LLC	46-1313720	1.37	6347859
STRATITIA INC2C4 TECHNOLOGIES	27-1662748	0.44	3378862
REPUBLIC BANK OF ARIZONA	36-4558074	0.21	690837
HAMBRIGHT ANIMAL HOSPITAL PLLC	46-5718679	0.36	1983889
NORTH CENTRAL TEXAS TRAUMA REGIONAL ADVISORY COUNCIL INC	75-2534492	0.01	0

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FIRMAN POWER EQUIPMENT	65-0076799	0.00	0
FORTRESS BUILDING PRODUCTS	20-0118276	1.25	9605953
AZHAR VENTURES LLCSILVER RANCH LEARNING LLC	46-0848266	0.00	5076
JUST VIV LLC	87-2451346	0.04	378931
CAREBOX HEALTHCARE SOLUTIONS INC	47-1561466	0.04	172467
AMERICAN METRO BANK	36-4104140	0.24	1287469
SENEGAL SPECIALTY CONTRACTING LLC	74-3057983	0.18	1539232
TEXAS SOCIETY OF PROFESSIONAL ENGINEERS	74-1003495	0.07	828432
EAST COAST LLC	33-1134548	0.00	211050

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AZEA INSTITUTIONS LLC	84-2443601	0.01	16366
RKTM ACQUISITION CO LLCINDUSTRIAL STORAGE SERVICES LLC	87-2857441	1.28	3307496
WINCHESTER ENERGY LLC	46-5585623	0.06	255453
SMARTER SYSTEMS LLC	75-3264371	0.01	0
SOFTWARE BUILT BY DESIGN INC	47-2104351	0.00	12286
AMERIBULK TRANSPORT LLC	84-3835137	0.02	106490
IVY KIDS YOUNG RANCH	82-5075082	0.01	9645
GROF LOUDOUN VALLEY LLC	86-3231590	0.01	14109
NEWLAND MORTGAGE INC	83-3467059	0.00	0

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HUBERT VESTER OPERATING COMPANY LLC	20-0531491	0.12	0
GLOBAL MANUFACTURING SERVICES INC	27-1934637	0.01	221337
GEORGE CLINICAL INC	36-4824331	1.16	6964418
RAISEUP FAMILIES	76-0447678	0.02	0
BEATRICE MECHANICAL CORPORATION INC	47-0726148	0.05	538012
BTT HOLDINGSBEN WENNINGHOFF HOLDINGS	87-4118206	0.04	889972
REALLY GREAT READING COMPANY LLC	90-0981289	0.78	2759697
FRANCHICZAR LLC	38-4016000	0.00	319923
RETHOUGHT INSURANCE CORP	82-1376329	0.45	1625299

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IVY KIDS LLCKATY IVY KIDS	72-1538585	0.06	127302
BTR CONTROLS INC	36-3429487	0.23	1013337
ZAZEN SURGERY CENTER	82-3788213	0.04	142113
PARAGON CONSTRUCTION COMPANY LLC	61-1964887	0.49	982971
CHANDLER OPERATIONS LLC	46-5372271	0.06	149803
PATHWAYS ASSISTED LIVING MEMORY CARE LLC	37-1703179	0.04	27945
HOUGHTON OPERATIONS LLC	47-5410415	0.03	18200
DYNACARE OPERATIONS LLC	20-8867835	0.03	38779
GREENSBORO CEREBRAL PALSY ASSOCIATION	56-0591312	0.01	0

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N M ENTERPRISES INC	26-1302086	0.00	0
ZLINQ INC	82-4681290	0.57	2739187
SOLERA SPECIALTY PHARMACY LLC	46-2221080	0.00	92204
ADVANCED BUILDING SERVICES INC	54-1837664	0.03	0
WATEARTH INC	26-3679313	0.02	0
ASPEN AUTO CLINIC LLCTRANSFORMERS INSTITUTE	84-3851194	0.00	0
PERMUTA TECHNOLOGIES INC	52-2208050	0.54	4129340
ROCKY MOUNTAIN BIOHAZARD INC	81-4714394	0.05	94072
PROFICIO SURGICAL ASSISTANTS	47-1208933	0.00	0

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HUBWISE TECHNOLOGY INC	82-2123508	0.14	483560
MINDBODYGREEN LLC	26-3056412	0.27	1465858
THRIVE FAMILY MEDICINE	83-0778875	0.15	804635
ADVANCED AUTOBODY OKATIE	03-0458346	0.00	28724
SPECTRA TRUE COLOUR LLC	02-0578182	0.00	2964
B AND S HOLDINGS LLC	47-1983795	0.10	543485
BROOKS FURNITURE XPRESS INC	36-4700086	1.96	7407040
BROAD RIVER DENTISTRY LLC	83-1659138	0.04	274510
ECONONMIC DEVELOPMENT PARTNERSHIP	57-0787606	0.09	789188

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CLARKSON HALE LLC	46-5227215	0.10	478921
CAPITOL KAWASAKI INC DBA COLUMBIA POWER SPORTS	57-0696296	0.11	489435
D J MACHINERY AND RIGGINGS LLC	03-0095281	0.00	335713
DPX LABS LLC	03-0600423	0.00	0
FREIGHT BREAKERS LLC	46-3531040	0.16	300160
HAND TANNER FINANCIAL GROUP INC	57-0909399	0.15	1307227
HILTON HEAD RETINA INSTITUTE LLC	85-3285595	0.12	383214
HEAVY IRON LLC	26-1399952	0.25	693405
TRACY AMOS FULMER CPA PA	57-1039384	0.00	41988

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MORRIS GARAGE INC	57-0939298	0.04	184438
MEMORY MATTERS	58-2291775	0.07	327205
MARKET SEARCH CORPORATION	57-0797479	0.02	722904
OMNI PROPERTY MANAGEMENT DEVELOPMENT SERVICES LLC	10-3415573	0.00	4086
PROSTAFFING US LLC	20-5496632	0.07	228797
PRIMECHOICE PACKAGING LLC	56-2207667	0.36	2343339
PEO LAW FIRM LLC DBA THE PEO LAW FIRM LLC	84-3944398	0.09	451444
ASSOC OF LANDOWERS OF PORT ROYAL PLANTATION	23-7348130	0.12	860494
SRS COMMUNITRY REUSE ORGANIZATION	57-0986131	0.15	1211133

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TIDELINE CPA GROUP LLC	82-1942851	0.26	1081558
TRIUNE MERCY CENTER	20-0503624	0.12	522575
VISTA HOLDING GROUP INC	26-0498684	0.14	822526
5 HORIZONS GROUP LLC	26-0716185	0.11	670862
ACUMEN IT	20-8676478	0.22	2179576
CAROLINAPEO INC	20-2420205	0.14	961107
CONMOTO INC	38-4060558	0.19	775426
CROSS RIVER CARDIOLOGY	46-5505272	0.14	781558
DEVPRO	27-4315673	0.12	219657

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DIGITAL REPAIR LLC	26-4249050	0.12	543374
DISTINCTIVE CABINETS LLC	20-2458392	0.04	400609
EMILY K CENTER	56-2230469	0.14	595063
GENESIS MEDIA	20-8733987	0.12	333568
HC CINC	56-1037961	0.10	1377808
INNOVATIVE BUSINESS SOLUTIONS LLC	26-3404606	0.17	723520
JENISON CONSTRUCTION	56-1607412	0.09	1057123
MILLENNIUM WATER ALLIANCE	75-3098460	0.07	554901
PIERCE INSURANCE AGENCY INC	56-1108836	0.00	0

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Part II Participating Employer Information (Continued).

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PROAD SPORTS INC	62-0912787	0.01	27512
RETAIL ARCHITECTS INC	27-0572209	0.34	3521904
RT GEAR LLC	27-3788935	0.00	8529
SPECIALIZED ROOFING INSULATION INC	20-5489541	0.00	103153
STONE BUILDING SERVICES LLC	47-4240151	0.18	539606
TURNING POINT INC	58-1698701	0.10	576270
VAN DER NOORD FINANCIAL ADVISORS INC	58-2489382	0.10	636891
MOUTHPIECE EXPRESS LLC	20-2465300	0.06	1415143
SALON DESHANO	06-1700229	0.00	271670

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FEREBEEJOHNSON COMPANY INC	54-0461857	0.08	1578952
CUNDIFF HEATING AIR CONDITIONING INC CENTRAL AIR CONDIT	54-1113289	0.18	1219889
BLUE RIDGE DIESEL INJECTION INC	54-0946836	0.05	978774
NEWHALL MOBILEWORKS	46-2875522	0.00	4363
DOMINION SERVICE AND PARTS LLC	47-2624308	0.04	515313
CT JAMISONS PRECAST INC	47-5486861	0.00	7714
KUSTOM FILM TINT LLC	46-3658382	0.09	338662
PALMETTO RESIDENTIAL RENTALS LLC	56-2308425	0.47	5681317
CAROLINA YOUTH COALITION	82-4313926	0.11	338122

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Part II Participating Employer Information (Continued).

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PS121 MANAGEMENT PA DBA VIDA GYNECOLOGY	83-1069179	0.09	1119828
DAIKYONISHIKAWA USA INC	98-0352141	2.04	4891107
FOXFIRE TECHNOLOGIES INC	52-1511133	0.03	229171
EARNNEST	82-2470162	0.14	559134
INTERSERV	16-1698770	0.03	195170
NC IDEA	01-0702442	0.26	1368723
BLACKSTOCK CONSULTING INC	81-2480295	0.09	505468
BLUE GAS MARINE INC	45-4566497	0.04	73282
MACFAB	56-1345903	0.00	0

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Part II Participating Employer Information (Continued).

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DAF INC DBA JP CARLTON COMPANY	57-0681775	0.00	432
SERVANT REHABILITATION	84-4112643	0.18	0
TITAN CHEMICAL TRANSFER SOLUTIONS LLC PUREGREEN EQUIPMENT	45-5474001	0.04	168680
WATKINS BROTHERS INC OF COWPENS	57-0714217	0.00	0
CEDAR SPRING FAMILY DENTISTRY LLC	81-0684464	0.17	742167
BEACON PROPERTY SERVICES LLC	85-1041820	0.00	346392
TK SUPPLIES PACKAGING	47-4456439	0.34	1643522
LIVE MOORE REAL ESTATE SERVICES INC	68-0515838	0.01	13891
BAHMUELLER TECHNOLOGIES INC	56-2177049	0.00	0

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ACCREDIT SOLUTIONS INC	61-1949053	0.05	179685
J C COX LLC DBA EUROSPECIALTY INC	86-3509015	0.02	67770
LIIPFERT LAW GROUP PLLC	47-4980917	0.08	0
BRAGG WASTE SERVICE INC	20-0509678	0.02	82404
PEDIATRIC DENTISTRY OF SPARTANBURG	82-2203120	0.00	59016
SUPREME ELASTIC CORPORATION	56-0815483	0.09	265338
SUPERCLEAN SERVICE COMPANY INC	75-2304358	0.10	644125
NORTHSIDE DEVELOPMENT CORP	30-0698663	0.00	0
MULLIKIN GROUP INC	83-3036963	0.34	2435261

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TREIS BLOCKCHAIN LLC	82-3137228	0.06	189975
INVENIAM CAPITAL PARTNERS	47-5299528	0.00	0
SOLVEITROCKS INC	81-2883175	0.00	261754
GRAVITY 9 LLC	88-1445501	0.00	427837
BULIGO CAPITAL NA INC	37-1831638	0.05	307736
WESTERN ROOTS LLC	88-2583297	0.08	401353
THE FRANKLIN SCHOOL	99-1751830	0.23	563965
SERENA GROUP INC	26-4449999	0.00	1491
OMNISCIENCE INC	84-2747484	0.12	305093

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ASCEND CARDIOVASCULAR LLC	36-4040028	0.00	0
REHAB ESSENTIALS	30-0275429	0.52	2118308
LAKE TOXAWAY COMPANY	57-0406346	0.54	7633329
3WIN CORP	47-5502507	0.22	1866332
ASTER AGING INC	94-2596075	0.05	144275
PRECISION SPORTS PHYSICAL THERAPY	83-1701957	0.60	2147307
ADVANCED AUTO BODY II	82-4886464	0.04	351049
NATIONAL ASSET MORTGAGE LLC	45-3062201	0.06	64045
ML LUBRICATION USA INC	26-2070984	0.00	71724

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LEL INTERNATIONAL INC	64-0961844	0.08	197693
PENROSE MIDSTREAM PAYROLL LLC	92-1054981	0.08	1002519
PETROLEUM DISTRIBUTION LLC	83-1648488	0.07	216733
LUCI SYSTEMS LLC	87-2297741	0.12	926065
SOUTHWEST PHARMACY SOLUTIONS INC	41-2063362	0.14	233704
CURTEC USA LLC	88-2227163	0.27	650259
CLOUD4IA LLC DBA CLOUDFORIA	30-1171398	0.72	5895916
PIONEER FUND COS LTD	81-4956814	0.23	359085
INTEGRITY WELDING FABRICATION LLCCOLORADO WATERJET LLC	83-3095657	0.01	0

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SENIOR HEALTH AND EDUCATION PARTNERS PLLC	47-1781940	0.10	173653
CRYSTAL HEATING COOLING SERVICE INC	43-0961915	0.07	105514
PREMIEREPC TECHNOLOGY GROUP LLC	20-4584342	0.12	1185189
SANIGLAZE INTERNATIONAL LLC	59-3635047	0.05	291171
SSH GOLF ACQUISITION LLC	87-4727938	0.00	24979
DRS INDUSTRIES	88-0959558	0.12	782156
GROF COLUMBIA LLC	87-2877847	0.01	0
ENVIRONMENTAL HOME PROTECTION	31-1590021	0.06	111478
WARD MUNGO CONSTRUCTION LLC	56-2416008	0.01	4890

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LAWYERS COMMITTEE FOR BETTER HOUSING	36-3134577	0.14	93708
STARWOOD MOUNTAIN RANCH LLC	45-4807596	0.02	156057
GCI OF SPARTANBURG LLC	26-2342530	0.27	1285660
BUSINESS ACTUALIZATION	45-4532131	0.07	161857
CARE PROFESSIONAL LIABILITY ASSOCIATION LLC	57-1198664	0.03	63397
AYMING INC	38-4013006	0.01	0
OCEANVIEW CONSULTING GROUP LLC	84-4732490	0.05	656473
SAI FLIGHT SUPPORTSAI FLIGHT SERVICES INC	46-5027188	0.00	0
C C ESTATES DBA CREATIVE RETIREMENT SOLUTIONS GROUP	82-3909672	0.00	165373

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SCRC MANAGEMENT INC	45-4857136	0.28	1006347
SHAE MEDICAL PLLC	87-1524284	0.10	397746
BELSER LAW FIRM PA	57-0979589	0.08	431874
WTS OF JONESVILLE LLC	45-4125553	0.03	0
GEAR TIE LLC DBA XTRUDEX	27-1174494	0.15	331618
CEDAR HEIGHTS HOMEOWNERS ASSOCIATION INC	84-1116996	0.07	697737
ALLIANCE FOR A HEALTHIER SOUTH CAROLINA	92-1097411	0.25	648396
THRIVE FIVE PARTNERS	87-3579574	0.01	11648
EMISSION COOLING SOLUTIONS LLC	30-1337664	0.05	228905

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CORINTHIAN HEALTH SERVICES INCCWS SOUTHLAKE LLC	74-2897477	0.27	369957
SAN ANTONIO APARTMENT ASSOCIATION	74-6085530	0.10	238724
WESTERN VOCATIONAL SERVICES INC	39-1916411	0.79	7997638
BUCCI INDUSTRIES USA INC	13-3688242	0.08	363829
PRAIRIE SKY LLC	92-1014177	0.09	243949
WESTERN ALTERNATIVE CORRECTIONS INC	47-0819067	0.37	3816021
SPARK REVENUE LLC	26-0846570	0.01	9925
NORTHGATE COUNTRY CLUBWALDEN GOLF CLUB	46-1203151	0.06	96954
UNITED MINISTRIES	57-0511977	0.23	3384069

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEAMLOGIC IT OF COLORADO	92-2694890	0.00	172604
KOCHEK CO LLC	81-3577942	0.14	342370
BATCH 26 COFFEE ROASTING COMPANY	88-4422884	0.06	114619
JW AFFINITY IT LLC	46-4961726	0.00	0
WEITZMAN NATIONAL MUSEUM OF AMERICAN JEWISH HISTORY	23-7379280	0.21	998871
CUSTOM SPRINGS MANUFACTURING LLC	47-4864455	0.33	944607
FLAGSHIP POWER SERVICES LLC	88-3573258	0.36	3822945
CHEROENHAKA NOTTOWAY ENTERPRISES LLC	36-4913116	0.07	148870
SANNAM S4 INC	36-4828423	0.00	43392

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LCP INVESTOR LLCLCPM VAIL EMPLOYMENT LLC	81-3149877	0.64	788683
MULTIPLIHR LLC	92-3339262	0.07	211628
VIGILINT EXPEDITIONARY SOLUTIONS INC	81-2250666	0.09	6644908
VIGILINT PROTECTIVE HEALTH SOLUTIONS PLLC	22-3936861	0.00	627
COLORADO ACADEMY OF VETERINARY TECHNOLOGY INC	20-8468052	1.07	3634693
CONVENIENT APPLIANCE SERVICE INC	56-1685676	0.77	1369129
DOVLY	84-1790390	0.04	25664
GUNPOWDER INC	47-3253005	0.17	954267
ROGER AND JAN ENTERPRISES INC	84-1725799	0.00	0

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MILE HIGH CYBER LLC	85-1911707	0.29	1795853
HS BRANDS GLOBAL	04-3507666	0.02	20926
TEXAS MULTICHEM LTD	74-2196683	0.11	323963
SPIGEL PROPERTIES LLC	74-2680768	0.09	232630
JMA MEDICAL GROUP LTD LLP	20-2041662	0.38	1825387
PROTEUS AUTOSPORT HOLDINGS LLC DBA JESSES GARAGE	87-1230544	0.01	180
THE NETWORK OF BEHAVIORAL HEALTH PROVIDERS	75-3220882	0.02	65646
SHADE INDUSTRIES INC	90-0629852	0.25	785114
MACHEREYNAGEL INC	22-3559103	0.04	154216

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LOWCOUNTRY YOUTH SERVICES	94-3446641	0.19	591478
PH HEALTHCARE SERVICES INC DBA PATRIOT HOSPICE	45-3815342	0.18	316065
LAKE TOXAWAY COUNTRY CLUB	56-1550040	0.01	19821
SHINE SYSTEMS LLCSHINE MANAGEMENT INC	26-0871283	0.43	2096552
PARK VISTA SENIOR HOUSING MANAGEMENT LLC	27-0573221	0.00	0
CRUCIBLE CHEMICAL COMPANY	36-2638561	0.58	4378222
UNITED WATER RESTORATION GROUP OF CHARLOTTE	83-1713327	0.30	847098
STRATEGIC SPARTANBURG INC	88-3599716	0.08	114843
WEAVER INSURANCE LLC	86-1898313	0.10	11901

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ANDERSONS WELDING SERVICE INC	46-4401056	0.03	38731
ADMIRAL PERMIAN OPERATING LLC	88-1667903	0.01	8504
NATIONAL OVARIAN CANCER COALITION INC	65-0628064	0.07	94516
BLUPRINT ONCOLOGY CONCEPTS LLCBLENDWORKS LLC	81-2087605	0.01	0
TRID PLUMBING LLC	46-4306948	0.12	1118348
VIACODE CONSULTING LLC	06-1613147	0.03	0
MEGA CLINICS LLC	20-2537566	0.00	356498
TRUTH BROADCASTING CORP	56-1460305	0.34	517222
EDUWORKS CORPORATION	93-1327990	0.19	2179002

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LIFELINE PROFESSIONAL COUNSELING SERVICES INC	57-1203051	0.01	0
COREWORKS HEAT EXCHANGERS LLC	82-1835316	0.64	2469417
PERSHING TECHNOLOGIES	26-4455698	0.18	1117891
ALPHA OMICRON PI FOUNDATION	58-1343315	0.67	1732438
ALPHA OMICRON PI FRATERNITY INC PARTICIPATING EMPLOYERS	62-0950113	0.43	1556123
LSL ADMINISTRATION LLC DBA HIGH FIDELITY BRANDS	85-1424255	0.06	226686
DARRINS PLACE INC	84-4247450	0.25	1901218
ELENTENY HOLDINGS LLC	27-1863325	0.82	808112
ROVD USA INC	35-2570882	0.05	108412

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KEYSTONE PROPERTY MGT LLC	47-3831277	0.45	2517237
FOUR WINDS BEHAVORIAL HEALTH INC	46-2965783	0.08	66060
CANCER SUPPORT COMMUNITY ARIZONA	86-0897810	0.13	778921
LUMBEE TRIBE HOLDINGS INC PARTICIPATING EMPLOYERS	45-2850833	0.01	9748
RAHNT LLC DBA RIGHT AT HOME	46-3312982	0.07	235985
TEXAS COMPLETE TRUCK CENTER	47-4157363	0.85	3612587
UMIMIU	86-3100476	0.01	6056
THE STATION LAND CO LLC	87-4380263	0.05	40425
LAKEWOOD FOOT AND ANKLE SPECIALISTS	85-2374854	0.00	2039

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JH METROLOGY CO INC	36-2892893	0.27	768988
EMERGE DIAGNOSTICS INC	90-0849392	0.09	73888
PRO MEDICAL EAST LLC	22-3822364	0.00	969681
SUPERIOR JOINING TECHNOLOGIES	36-3863555	0.06	308001
MERRITT GARAGE DOORS AND SERVICES INC	27-0383346	0.05	86219
SWISH BIO LP DBA SWISH	92-2789213	0.03	121904
CALAVISTA LP	75-3011216	0.07	110812
PERFORMANCE ALLOY LLC	26-0622129	0.00	2984
DESERT WHALE PRODUCTIONS INC	20-3129882	0.00	0

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ROST MARTIN LLC	85-2980380	0.10	910200
EVALAST AMERICAS LLC	93-3303350	0.12	321031
ZION ZION LLC	20-8032032	0.02	15981
POWDERSIZE LLC	47-4546092	0.47	473501
FORT CAPITAL LPPOWERS CAPITAL TEAM LLC	46-2744820	0.33	1025691
MASTER MACHINING INC	56-1773312	0.68	4795658
EDWARDS CAPTIAL CORP DBA PRIME REAL ESTATE	74-2439130	0.33	1121289
NEROTECH LLC	84-3187660	0.30	1095700
TRAMONTE DESIGN STUDIO LLC	47-4143874	0.04	104983

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RIVER RIDGE RENTALS	20-1504543	0.02	13117
COPEVILLE SPECIAL UTILITY DISTRICT	26-1248175	0.09	551787
DENVER PUB VENTURE I LLC PARTICIPATING EMPLOYERS	26-1226846	0.03	559053
DESIGNQUEST LLC	26-2988397	0.09	230837
AE GLOBAL MEDIA INC	56-1806564	0.03	26950
TEXAS CONNECTIVITY LLC	85-3128433	0.08	114429
CLAYCON PACKOUT LLC	93-2306425	0.07	651999
VET PROS LLC PARTICIPATING EMPLOYERS	86-1424603	0.03	23452
ABSOLUTE SYSTEMS LLC	27-0752388	0.00	3955

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THE STOWELL COMPANY INC	41-2181568	0.00	45684
LB SMITH CONSTRUCTION LLC	20-4772342	0.00	52855
TRIPLE J COIL TUBING PRODUCTS LLC	45-4853998	1.01	1440112
THE PARC GROUP INC	59-3063755	0.09	134118
KC TRENDS LLC	26-0045826	0.15	873934
COMTEC SYSTEMS INC	84-0989686	0.42	3408434
GERHARDI INC	57-1088358	0.04	59808
TOTAL DOCUMENT SOLUTIONS INCTDS IT LR LLC	71-0797672	0.02	14946
BECKER FARMS INC DBA BECKER VINEYARDS	74-2668794	0.14	294321

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PEAK3 LTD	82-2400435	0.19	0
ADVANCED LEGAL SYSTEMS INC	93-1232677	0.17	1491191
NEW MEXICO WELLNESS LLC	85-2560896	0.36	313529
HIS WAY AT WORK	26-2522139	0.03	36419
UNITED WAY OF PUEBLO COUNTY COLORADO INC	84-0404917	0.12	108322
ACTION TECHNOLOGY SERVICES LLC	83-4400586	0.14	493226
AREA REAL ESTATE LLC	45-2551717	0.08	350611
TUYA NOW LLC	36-4821101	0.11	95766
INDUSTRIAL VACUUM TRANSFER SERVICES USA LLC	85-3924438	0.05	157534

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WESTERN SKY ENERGY PARTNERS LLC	93-2730349	0.14	947761
MARGAUX NEW YORK INC	88-4360407	0.10	370554
ALTOR LLC	87-1553435	0.29	291202
NUMERIC ENGINEERING INC	83-1636739	0.06	0
LOGAN FINANCE CORPORATION	71-0232620	0.13	315023
CAPITAL FINANCIAL LLC	20-5078854	0.17	304376
CANCARE INC	76-0305357	3.09	7435384
SPECFAB SERVICES INC	57-0830349	0.07	65227
DAISY RIVER PROCESSING LLC	99-3800424	0.07	55924

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WILLIAMSMITH FIREPLACES OF SC LLC	85-1110399	0.05	750904
TRIUMPH PHARMACEUTICALS INC	84-1360869	0.01	431
INMOTION SOFTWARE LLC	80-0247616	0.18	269981
AUBURN AUTO DRS INC	45-2530927	0.14	1275568
WILBOW CORPORATION INC	75-2281774	0.17	1740334
BBC BIRCHER AMERICA INC	36-4042103	0.07	51701
BAILEY INFORMATION TECHNOLOGY LLC DBA BIT	13-4228460	0.23	1194601
ONE STEP DATA INC	95-4269911	0.04	289526
CAREER COLLECTIVE LLC	87-4445670	0.27	1125038

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BUSINESS KNOWLEDGE SYSTEMS LLC	20-1990259	0.59	5428392
PEGASUS HOME FASHIONS LLC	93-4184099	0.23	478034
EASYVET ALPHARETTA	82-2980791	0.06	453688
B K SERVICES INC	57-0893023	0.72	1077058
VITEL NET	45-4337600	0.02	12502
EXP CONSULTING LLC DBA ILLI AGENCY	85-2888094	0.22	176867
LEFCON LLC	82-2020695	0.13	504921
NATIONAL COUNCIL ON INDEPENDENT LIVING	74-2291620	0.03	123611
PINK SUMMIT LLC	47-4856405	0.32	1107384

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COGENT GROWTH PARTNERS LLC	27-2191339	0.05	36331
THE WEISBLATT LAW FIRM PLLC	26-4367117	0.11	1453457
ANY TEST FRANCHISING LLC	45-3505062	0.17	1577401
AIR TREK INC	59-1915238	0.10	589008
NOTABLE FINANCE LLC	47-3250921	0.26	193136
CYBERSECURE INNOVATIONS LLC	85-2227815	0.08	0
HAWKEYE ENGINE SERVICES LLC	46-1536206	0.15	1090104
ALLVEST INFORMATION SERVICES INC	91-1931180	0.16	178598
PRAHSYS INC	99-3707593	0.06	500872

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEXAS REAL ESTATE BUSINESS LAW FIRM PLLC	92-1393753	0.37	2363261
LEGACY HOME SERVICES	46-1943690	0.09	71123
LEESHANOK NETWORK SOLUTIONS	75-2990173	0.01	6145
FLEET CORE INC	37-1824552	0.07	564128
WAGNER FOUNDATION	20-6079941	0.12	98607
ON ADVERTISING LLC	46-2686519	0.19	712436
PATEL EDUCATIONAL SERVICES INC DBA PREP EXPERT	47-2382376	0.11	536313
HAYES HUNTER PC	81-5163834	0.14	1191934
HALO AMERICAS INC	88-2854696	0.06	48445

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JASON C WEBSTER PC DBA WEBSTER VICKNAIR MACLEOD	27-2998616	0.06	181792
THOMAS ACQUISITION LLC	26-3928268	0.14	447791
PARTICLE DYNAMICS INTERNATIONAL LLC	27-2584419	0.12	922929
STEP INC	54-0801556	0.01	52575
FOOTHILL BEVERAGE SERVICE INC	82-4250434	0.50	7032420
EVOLVE MANAGEMENT SERVICES LLC	33-4469595	0.04	30112
HPC FINANCIAL SERVICES LLC	46-4048692	0.04	27795
SOLARK LLC	32-0431798	0.01	9927
UNITED WAY NORTHWEST INDIANA	35-6006484	0.03	24569

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MOMENTUM CAPITOL WEALTH ADVISORS LLC	33-4880998	0.67	2569175
LEAPFROGBI LLC	46-2459107	0.09	49830
OPTIMUS TECHSERVICES LLC	82-1924508	0.08	388551
SAPIENT INDUSTRIES INC	82-1270113	0.09	676492
ATLANTIC ENERGY GROUP LLC	82-3733874	0.09	505719
PUREMAXX LLC	83-4496344	0.01	240074
COASTAL MECHANICS CO INC	59-1646661	0.39	422681
MY MECHANIC LLC	54-2137482	0.06	106355
EAGLE HORIZON GROUP INC	82-2246942	0.11	223271

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PETZER TRANSPORTATION CORPORATION	92-3411339	0.01	131857
GYNAIA INC	33-4605772	0.03	621179
CRYOSYS LLC	46-3157548	0.02	60143
COMMUNITIES IN SCHOOLS OF HAMPTON ROADS	26-2504678	0.04	31406
CUNNINGHAM HOLDINGS LLC	82-1191396	0.16	123367
POWER SOURCE ELECTRICAL SERVICES INC	27-3630318	0.06	85957
ADVANCED MACHINING TECHNOLOGIES	39-2343711	0.04	576679
VORTEX ENGINEERING LLC	47-4370544	0.09	335337
THE MECHANICS TIRE AUTO OF LOCUST LLC	82-2626951	0.07	697400

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORGANIC MECHANIC ENTERPRISES LLC	83-2918637	0.05	776331
PAYRO PLUS	33-5015247	0.02	14402
ALEXANDRA GRECCO LLC	30-0965195	0.02	17198
BOULDER VALLEY ALLERGY AND ASTHMA	84-1047937	0.01	9606
EASTERN SECURITY INC	83-0586438	0.04	384321
ARCPOINT FRANCHISE GROUP	20-2377339	0.06	2250576
AN ASSOCIATION OF FRANCISCAN SISTERS OF THE SACRED HEART	36-2166959	0.00	3374
HEPTAGON INFORMATION TECHNOLOGY LLC	47-1453832	0.05	37984
NEW HORIZON INSURANCE CO	81-3739985	0.05	1226602

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MACKAY AGENTS LLC	88-2167326	0.16	121365
KANSAS CASTINGS INC	48-1112564	0.11	2068484
THE CARDON GROUP	57-1160649	0.05	95496
RISEN LOGISTICS LLC	88-1774930	0.04	160661
MONETARY METALS CO	90-1500589	0.04	86389
ABSORPTION PHARMACEUTICALS LLC	26-3231342	0.01	9932
ELECTRIC LEE	82-5332727	0.07	382991
TYCHE WEALTH PARTNERS LLC	83-2847283	0.02	13873
LEGION HEALTHCARE PARTNERS	84-1943139	0.01	7252

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DESIGN BY INITIATIVE LLC PARTICIPATING EMPLOYERS	27-2296624	0.02	317121
AMEN PACKAGING INC	84-0799452	0.01	522587
PALMETTO INDUSTRIAL COATINGS LLC	93-4863984	0.01	10190
BE MANUFACTURING CO INC	56-1821769	0.02	188559
BEHRMANN COMPANY	43-0679665	0.00	124331
MAJOR CONSULTING GROUP INC	86-3131001	0.01	26869
KIDNEY CANCER ASSOCIATION	36-3719712	0.05	36196
ERC GROUP INC	93-4901527	0.00	1345
ASSOCIATION OF AMERICAN CANCER INSTITUTES	23-7410581	0.09	64548

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RESPIRATORY CRITICAL CARE SLEEP MEDICINE ASSOCIATES INC	59-3385828	0.06	47159
RIGHT OF WAY MAINTENANCE EQUIPMENT COMPANY INC	76-0169955	0.02	82342
TRUTEK FRAMING SYSTEMS LLC	81-1122580	0.01	9800
ENVIRONMENTAL PROGRESS INC	57-0956961	0.03	23928
		0.04	29197
		0.00	431

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Part III Pooled Employer Plan Information

Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44) ☐ Yes ☐ No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)

ACK ID _____

QUESTCO COMPANIES
RETIREMENT PLAN

AUDITED FINANCIAL STATEMENTS
AND
SUPPLEMENTARY INFORMATION

As of December 31, 2025 and 2024
and for the year ended December 31, 2025

QUESTCO COMPANIES RETIREMENT PLAN

TABLE OF CONTENTS

	Page
Independent Auditor's Report	1
Financial Statements	
Statements of Net Assets Available for Benefits	4
Statement of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6
Supplementary Information	
Schedule H – Line 4i – Schedule of Assets (Held at End of Year)	15

INDEPENDENT AUDITOR'S REPORT

To the Participants and Plan Administrator of
the Questco Companies Retirement Plan

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

We have performed audits of the accompanying financial statements of the Questco Companies Retirement Plan (the "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 the 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 qualified institutions 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 3 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 Auditor's 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 (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the 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 the 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.

Auditor's 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 auditor's 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 GAAS 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 GAAS, 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 the 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 the 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 certifications, 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.

Supplemental Schedules Required by ERISA

The supplemental schedule, 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 GAAS. 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 their form and content, are 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 is 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 qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).



Sterling Heights, Michigan
October 12, 2026

QUESTCO COMPANIES RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31, 2025	December 31, 2024
ASSETS		
Investments at fair value	**$ 498,027,447**	$ 430,965,727
Investment at contract value	**1,505,600**	1,606,854
Receivables		
Employer contributions	**526,953**	1,155,158
Participant contributions	**809,821**	607,076
Other receivables	**34,384**	21,998
Notes receivable from participants	**8,527,173**	7,218,262
Total receivables	**9,898,331**	9,002,494
Net assets available for benefits	**$ 509,431,378**	$ 441,575,075

See notes to financial statements.

QUESTCO COMPANIES RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year ended December 31, 2025

ADDITIONS:	
Investment income:	
Net appreciation in the fair value of investments	**$ 58,796,654**
Dividends	**11,647,341**
Total investment income	**70,443,995**
Interest income on notes receivable from participants	**595,153**
Contributions:	
Employer	**22,403,406**
Participants	**52,281,221**
Rollovers	**6,870,297**
Total contributions	**81,554,924**
Total additions	**152,594,072**
DEDUCTIONS:	
Benefits paid to participants	**51,009,327**
Corrective distributions	**360,841**
Administrative expenses	**3,401,690**
Total deductions	**54,771,858**
NET INCREASE IN NET ASSETS	**97,822,214**
OTHER CHANGES IN NET ASSETS	
Transfers of assets from other plans	**50,600,557**
Transfers of assets to other plans	**(80,566,468)**
Net other changes	**(29,965,911)**
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	**441,575,075**
End of year	**$509,431,378**

See notes to financial statements.

QUESTCO COMPANIES RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2025 and 2024

NOTE 1 – DESCRIPTION OF THE PLAN

The following description of the Questco Companies Retirement Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a multiple employer defined contribution profit sharing plan and trust with a qualified cash or deferred 401(k) arrangement covering all eligible employees of Questco Holdings, Inc. (the "Company") and its participating and adopting employers - who have one month of service. All participating employers of this multiple employer plan have signed joiner agreements that enable them to accept or modify the elections of a master plan document to meet their needs. Each Company's adopted Plan agreement should be referred to by the participants for additional information regarding Plan specifications. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Fidelity Personal Trust Company, FSB is the Plan's custodian. The Plan trustee is Questco Holdings, Inc. Slavic Integrated Administration, Inc. provides recordkeeping services to the Plan. The plan administrator has overall responsibility for the operation and administration of the Plan. The Investment Committee determines the appropriateness of the Plan's investment offerings and monitors investment performance.

The Setting Every Community Up for Retirement Enhancement Act 2.0 of 2022 (the SECURE Act 2.0) was signed into law December 29, 2022. This law, among other things, includes several required and optional provisions that will impact employee benefit plans that go into effect at various times through 2027. The provision that was required to be implemented during the year ended December 31, 2025, was long-term part-time employees with 2-consecutive 12-month periods of at least 500 hours of service must be eligible to participate in the Plan. The optional provisions that could be implemented during the year ended December 31, 2025, are; 1) an increase of catch-up contributions to the greater of $10,000 or 50% more than the regular catch-up contribution for individuals age 60 – 63, and 2) allow employers to treat student loan payments as elective deferrals for purpose of receiving matching contributions.

The Plan has elected to adopt the catch-up contribution limit increase provision of the Secure Act 2.0 during the 2025 plan year. The Plan will be amended for any provisions elected in accordance with applicable law and Internal Revenue Service (IRS) guidance.

NOTE 1 – DESCRIPTION OF THE PLAN (Continued)

Contributions

Each year, participants may contribute up to 100% of eligible compensation, as defined in the Plan, and designate those contributions as either pre-tax or Roth. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan includes an auto-enrollment provision whereby adopting employers may elect to have all newly eligible employees automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at a pre-determined contribution rate and their contributions invested in a designated balanced fund until changed by the participant. In addition, the Plan has adopting employers that have a contribution accelerator feature which automatically increases participant deferral rates to a pre-determined rate annually, with a pre-determined ceiling, unless a participant opts out. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover).

Each adopting employer's matching contributions are discretionary and determined as a percentage of participant elected deferrals for that employer. For the year ended December 31, 2025, adopting employers contributed a discretionary match at various rates.

If elected, each adopting employer makes a safe harbor matching contribution. For the year ended December 31, 2025, adopting employers contributed from 100% of employee deferrals up to the first 1% and 50% of the next 5% to 100% of employee deferrals up to 5% of compensation.

Each adopting employer's discretionary profit-sharing contributions are determined annually by the adopting employer. Profit sharing contributions are allocated to each participant based upon the ratio of the participant's compensation to the total compensation of the adopting employer. There were no profit-sharing contributions for the year ended December 31, 2025.

Contributions are subject to certain IRS limits. Participants direct the investment of their contributions, including their employer contribution, into various investment options offered by the Plan.

Participant Accounts

Each participant's account is credited with the participant's contributions, Company safe harbor matching contributions and discretionary matching contributions, as well as allocations of the Company's profit-sharing contributions and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

NOTE 1 – DESCRIPTION OF THE PLAN (Continued)

Vesting

Participants are vested immediately in their contributions, employer safe harbor matching contributions, plus earnings thereon. Each participating employer provides vesting of participating employer discretionary contributions; refer to specific plan agreements for service criteria, vesting percentages, and the policies regarding vesting upon termination.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of the vested account balance. The loans are secured by the balance in the participant's account. The loans bear interest at rates which are commensurate with local prevailing rates as determined by the plan administrator. Principal and interest is paid ratably through payroll deductions.

Payment of Vested Benefits

On termination of service, participants may elect to receive an amount equal to the value of the vested interest in their accounts in a lump-sum amount. Participants with a vested account balance of less than $1,000 must take a lump-sum distribution. Participants that have a vested account balance greater than $1,000 and less than or equal to $5,000 will have their vested balance rolled into an Individual Retirement Account (IRA). For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account in a lump-sum distribution.

In-service distributions are allowed when a participant reaches age 59½. Rollover contributions may be withdrawn at any time. The Company may authorize certain withdrawals from a participant's account in the event of proven financial hardship. Hardship withdrawals are subject to specific statutory and regulatory requirements.

Forfeited Accounts

As of December 31, 2025 and 2024, forfeited nonvested accounts totaled $245,939 and $821,748, respectively. These will be used to pay plan expenses or reduce employer contributions. During the year ended December 31, 2025, forfeited nonvested accounts in the amount of $1,757,311 were used to reduce the employer match.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from these estimates.

Investment Valuation and Income Recognition

Investments are stated at fair value (except for the fully benefit-responsive investment contract, which is reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Plan management determines the Plan's valuation policies utilizing information provided by the investment advisors and custodian.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Contributions

Contributions from Plan participants and the matching contributions from the employer are recorded in the year in which the employee contributions are withheld from compensation.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

Payments of Benefits

Benefits are recorded when paid.

Corrective Distributions

Amounts paid to participants for contributions in excess of amounts allowed by the IRS are recorded as corrective distributions within the statement of changes in net assets available for benefits. The Plan distributed the 2025 excess contributions to the applicable participants prior to December 31, 2025.

NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefit payments to participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments. Personnel and facilities of the Company have been used by the Plan for its accounting and other activities at no charge to the Plan.

Subsequent Events

The plan sponsor has performed a review of events subsequent to the statements of net assets available for benefits date through October 12, 2026, the date the financial statements were available to be issued, and has determined there are no material events that have occurred during this period, except as disclosed in Note 11.

NOTE 3 – CERTIFIED INVESTMENTS

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments held at December 31, 2025 and 2024, net appreciation in fair value of investments, and dividends for the year ended December 31, 2025, was obtained by management and agreed to or derived from information supplied to the plan administrator and certified as complete and accurate by Fidelity Personal Trust Company, FSB, and Principal Global Investors Trust Company, qualified institutions.

NOTE 4 – FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;

NOTE 4 – FAIR VALUE MEASUREMENTS (Continued)

- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- 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 to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Money market fund: Valued at the daily closing price as reported by the fund. The money market fund is an open-end fund that is registered with the Securities and Exchange Commission (SEC). This fund is required to publish its daily net asset value (NAV) and to transact at that price. The money market fund is deemed to be actively traded.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds registered with the SEC. These funds must publish their daily NAV and transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: Accounts primarily consist of mutual funds and common stocks that are valued on the basis of readily determinable market prices.

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2025 and 2024.

NOTE 4 – FAIR VALUE MEASUREMENTS (Continued)

	Assets at Fair Value as of December 31, 2025			
	Level 1	Level 2	Level 3	Total
Money market fund	$ 10,610,846	$ -	$ -	$ 10,610,846
Mutual funds	487,149,782	-	-	487,149,782
Self-directed brokerage accounts	266,819	-	-	266,819
Total assets at fair value	$ 498,027,447	$ -	$ -	$ 498,027,447

	Assets at Fair Value as of December 31, 2024			
	Level 1	Level 2	Level 3	Total
Money market fund	$ 8,221,270	$ -	$ -	$ 8,221,270
Mutual funds	422,491,248	-	-	422,491,248
Self-directed brokerage accounts	253,209	-	-	253,209
Total assets at fair value	$ 430,965,727	$ -	$ -	$ 430,965,727

NOTE 5 – FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Plan holds a traditional fully benefit-responsive investment contract with Morley Financial Services totaling $1,505,600 and $1,606,854 as of December 31, 2025 and 2024, respectively. Morley Financial Services maintains the contributions in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that was guaranteed to the Plan. The crediting rate is based on a formula established by the contract issuer. The crediting rate is reviewed on a quarterly basis for resetting. The guaranteed investment contract does not have a maturity date. The contract continues in force until all assets are distributed, or no further payments are due.

The contract meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value at December 31, 2025 and 2024. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value, as reported to the Plan by Morley Financial Services, represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

NOTE 5 – FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT (Continued)

The Plan's ability to receive amounts due is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments.

Certain events might limit the ability of the Plan to transact at contract value with the contract issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act of 1974. The plan administrator does not believe that the occurrence of any such event, which would limit the Plan's ability to transact at contract value with participants, is probable.

NOTE 6 – PARTIES-IN-INTEREST TRANSACTIONS

The Plan allows for transactions with certain parties who may perform services or have fiduciary responsibilities to the Plan, including the Company. During the year ended December 31, 2025, there were direct fees of $3,401,690 paid to UHY LLP and Slavic Integrated Administration, Inc., and during the years ended December 31, 2025 and 2024, there were transactions involving the investment of plan assets in investment funds maintained by Fidelity Personal Trust Company, FSB, and Principal Global Investors Trust Company, parties-in-interest as defined in Section 3(14) of ERISA. Indirect fees paid by the Plan for investment management services are included in the net appreciation of the fair value of investments.

NOTE 7 – ASSETS ALLOCATED TO WITHDRAWN PARTICIPANTS

The Plan had $1,648,016 of assets allocated to withdrawn participants as of December 31, 2025 that were distributed to the participants subsequent to year end.

NOTE 8 – 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 would become 100% vested in their employer contributions.

NOTE 9 – TAX STATUS

The Company has adopted a pre-approved plan document that has received an opinion letter from the IRS dated June 30, 2020, stating that the form of the pre-approved plan document was in compliance with the applicable requirements of the Internal Revenue Code (IRC). Although the Plan has been amended since adopting the pre-approved plan document, the plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC, and, therefore, believes that the plan is qualified, and the related trust is tax-exempt.

The Plan is subject to examination by the IRS for the statutory period.

NOTE 10 – RISKS AND UNCERTAINTIES

The Plan invests in various investment securities. 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 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.

NOTE 11 – SUBSEQUENT EVENTS

Effective January 1, 2026, the Plan implemented the required provision of the SECURE Act 2.0 related to the re-characterization of catch-up contributions as Roth for participants with FICA wages over the required limit. The Plan has also implemented the option provision of SECURE Act 2.0 relating to distributions for long-term care insurance premiums.

SUPPLEMENTARY INFORMATION

QUESTCO COMPANIES RETIREMENT PLAN

EIN # 81-2333797, Plan # 001

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2025

(a) Party in Interest	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par or maturity value	(e) Current value
	iShares	MSCI EAFE International Index K	$ 40,373,465
	DFA	Real Estate Securities	1,800,254
	DFA	U.S. Large Cap Growth Portfolio Inst	13,661,195
	Parametric	Commodity Strategies	755,714
*	Fidelity	SDBA	266,819
*	Fidelity	Emerging Markets Index	3,066,582
	Franklin	Utilities R6	1,425,053
*	Fidelity	500 Index	45,390,751
*	Fidelity	US Bond Index	66,518,315
	Invesco	Oppenheimer Gold & Special Miner	5,930,235
	PGIM	High Yield R6	1,549,168
*	Principal Asset Management	Morley Stable Value Fund	1,507,929
	American Funds	New Perspective R6	6,668,158
	BlackRock	Health Sciences K	2,080,940
	American Beacon	Strategic Income Fund	1,124,305
	Victory	Short Term Bond Fund R6 Shares	3,207,953
	Vanguard	Explorer Adm	2,799,083
	Vanguard	Target Retirement 2055	8,514,152
	Vanguard	Target Retirement 2050	13,631,740
	Vanguard	Target Retirement 2040	15,748,341
	Vanguard	Mid Cap Index Admiral	6,105,689
	Vanguard	Information Technology Index Ad	13,236,548
	Vanguard	Target Retirement 2065 Inv	2,578,049
	Vanguard	Federal Money Market	10,610,846
	Vanguard	Mid Cap Growth Index Admiral	5,691,941
	Vanguard	Materials Index Adm	995,227
	Vanguard	Mid Cap Value Index Admiral	2,187,293
	Vanguard	Small Cap Value Index Adm	2,657,218
	Vanguard	Small Cap Index Admiral	5,284,987
	Vanguard	Target Retirement 2070	926,219
	Vanguard	Short-Term Inf Prot Index Admir	4,048,877
	Vanguard	Target Retirement 2030	15,312,567
	Vanguard	Target Retirement Income	3,259,893
	Vanguard	Target Retirement 2045	12,299,393
	Vanguard	Total Stock Market Index Admira	141,124,851
	Vanguard	Target Retirement 2035	11,169,619
	Vanguard	Target Retirement 2060	6,369,925
	Vanguard	Target Retirement 2025	6,830,103
	Vanguard	Target Retirement 2020	2,190,706
	Vanguard	Value Index Admiral	10,288,449
	iShares	MSCI EAFE International Index K	98,501
	DFA	Real Estate Securities	15,593
	Parametric	Commodity Strategies	19,795
*	Fidelity	US Bond Index	332
	Invesco	Oppenheimer Gold & Special Miner	21,242
	American Funds	New Perspective R6	776
	Vanguard	Mid Cap Index Admiral	30,278
	Vanguard	Small Cap Index Admiral	24,459
	Vanguard	Target Retirement 2030	432
	Vanguard	Total Stock Market Index Admira	132,766
	Vanguard	Value Index Admiral	321
			499,533,047
*	Notes receivable from participants	Notes receivable from participants (interest rates range from 3.25% to 10.5%) due at various dates through December 2040	8,527,173
			$ 508,060,220

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

QUESTCO COMPANIES RETIREMENT PLAN **PLAN # 001** **EIN # 81-2333797**

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	BlackRock	BMGKX - BlackRock Mid Cap Growth Eq Port CL K		-
	Bespoke	BSPKX - Bespoke		-
	BlackRock	BTMKX - iShares MSCI EAFE International Index K		40,373,465
	Dimensional Fund Advisors	DFREX - DFA Real Estate Securities		1,800,254
	Dimensional Fund Advisors	DIPSX - DFA Inflation Protected SEC Port		-
	Dimensional Fund Advisors	DUSLX - DFA U.S. Large Cap Growth Portfolio Inst		13,661,195
	Parametric	EIPCX - Parametric Commodity Strategies		755,714
	Fidelity	FISDB - Fidelity SDBA		266,819
	Fidelity	FPADX - Fidelity Emerging Markets Index		3,066,582
	Franklin/Templeton	FUFRX - Franklin Utilities R6		1,425,053
	Fidelity	FXAIX - Fidelity 500 Index		45,390,751
	Fidelity	FXNAX - Fidelity US Bond Index		66,518,315
	John Hancock	JHBSX - John Hancock Bond R6		-
	Oppenheimer Funds	OGMIX - Invesco Oppenheimer Gold & Special Miner		5,930,235
	Prudential	PHYQX - PGIM High Yield R6		1,549,168
	Morley	QAKVX - MORLEY STABLE VALUE FUND		1,505,600
	American Funds	RERGX - American Funds EuroPacifc R6		-
	American Funds	RNPGX - American Funds New Perspective R6		6,668,158
	BlackRock	SHSKX - BlackRock Health Sciences K		2,080,940
	American Beacon	TFGYX - American Beacon Strategic Income Fund		1,124,305
	Victory	URSBX - Victory Short Term Bond Fund R6 Shares		3,207,953
	Vanguard	VASGX - Vanguard Life Strategy Growth		-
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Ad		-
	Vanguard	VEXRX - Vanguard Explorer Adm		2,799,083
	Vanguard	VFFVX - Vanguard Target Retirement 2055		8,514,152
	Vanguard	VFIFX - Vanguard Target Retirement 2050		13,631,740
	Vanguard	VFORX - Vanguard Target Retirement 2040		15,748,341
	Vanguard	VIMAX - Vanguard Mid Cap Index Admiral		6,105,689
	Vanguard	VITAX - Vanguard Information Technology Index Ad		13,236,548
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		2,578,049
	Vanguard	VMFXX - Vanguard Federal Money Market		10,610,846
	Vanguard	VMGMX - Vanguard Mid Cap Growth Index Admiral		5,691,941
	Vanguard	VMIAX - Vanguard Materials Index Adm		995,227
	Vanguard	VMVAX - Vanguard Mid Cap Value Index Admiral		2,187,293
	Vanguard	VSCGX - Vanguard Life Strategy Conservative		-
	Vanguard	VSGDX - Vanguard Short-Term Federal Admiral		-
	Vanguard	VSIAX - Vanguard Small Cap Value Index Adm		2,657,218
	Vanguard	VSMAX - Vanguard Small Cap Index Admiral		5,284,987
	Vanguard	VSMGX - Vanguard Life Strategy Moderate		-
	Vanguard	VSVNX - Vanguard Target Retirement 2070		926,219
	Vanguard	VTAPX - Vanguard Short-Term Inf Prot Index Admir		4,048,877
	Vanguard	VTHRX - Vanguard Target Retirement 2030		15,312,567
	Vanguard	VTINX - Vanguard Target Retirement Income		3,259,893
	Vanguard	VTIVX - Vanguard Target Retirement 2045		12,299,393
	Vanguard	VTSAX - Vanguard Total Stock Market Index Admira		141,124,851
	Vanguard	VTTHX - Vanguard Target Retirement 2035		11,169,619
	Vanguard	VTTSX - Vanguard Target Retirement 2060		6,369,925
	Vanguard	VTTVX - Vanguard Target Retirement 2025		6,830,103
	Vanguard	VTWNX - Vanguard Target Retirement 2020		2,190,706
	Vanguard	VVIAX - Vanguard Value Index Admiral		10,288,449
	BlackRock	BTMKX - iShares MSCI EAFE International Index K		98,501
	Dimensional Fund Advisors	DFREX - DFA Real Estate Securities		15,593
	Parametric	EIPCX - Parametric Commodity Strategies		19,795
	Fidelity	FXNAX - Fidelity US Bond Index		332
	Oppenheimer Funds	OGMIX - Invesco Oppenheimer Gold & Special Miner		21,242
	Morley	QAKVX - MORLEY STABLE VALUE FUND		2,329
	American Funds	RNPGX - American Funds New Perspective R6		776
	Vanguard	VIMAX - Vanguard Mid Cap Index Admiral		30,278
	Vanguard	VSMAX - Vanguard Small Cap Index Admiral		24,459
	Vanguard	VTHRX - Vanguard Target Retirement 2030		432
	Vanguard	VTSAX - Vanguard Total Stock Market Index Admira		132,766
	Vanguard	VVIAX - Vanguard Value Index Admiral		321
	Loan	LOAN - Loan 3.25% - 10.50%		8,527,173