# 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
VENSURE RETIREMENT PLAN

**1b** Three-digit plan number (PN) ▶ 016

**1c** Effective date of plan 03/01/2024

**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)
SLAVIC INTEGRATED ADMINISTRATION INC.

1075 BROKEN SOUND PKWY NW
SUITE 100
BOCA RATON, FL 33487

**2b** Employer Identification Number (EIN)
39-2377547

**2c** Plan Sponsor's telephone number
800-356-3009

**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 | DANIELLE WHITE |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | | | |
| | **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** | 3188 |
| **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)** | 2812 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 19015 |
| **b** | Retired or separated participants receiving benefits | **6b** | 0 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 5824 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 24839 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 0 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 24839 |
| **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)** | 2247 |
| **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)** | 17723 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested. | **6h** | 3 |
| **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:

2E 2F 2G 2J 2K 2T 3D 2W

**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<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2025**<br>**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
VENSURE RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500
SLAVIC INTEGRATED ADMINISTRATION INC.

**D** Employer Identification Number (EIN)
39-2377547

## 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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**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 | TPA | 1067814 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

VENSURE EMPLOYER SERVICES, INC.

37-1508469

| (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? |
|---|---|---|---|---|---|---|
| 13 | PLAN ADMINISTRATOR | 355809 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

SLAVIC MUTUAL FUND MANAGEMENT CORP

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 | PORTFOLIO MGMT | 75522 | 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)

RETIREMENT PLAN CONSULTANTS

51-0441275

| (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 | 34519 | 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 [ ] |

**(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
VENSURE RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 016

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
SLAVIC INTEGRATED ADMINISTRATION INC.

**D** Employer Identification Number (EIN)
39-2377547

## 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: COLUMBIA TRUST STABLE INCOME FUND

**b** Name of sponsor of entity listed in (a): AMERIPRISE 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) |
|---|---|---|
| 87-2323648-017 | C | 908713 |

**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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Financial Information

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

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

OMB No. 1210-0110

**2025**

**This Form is Open to Public Inspection**

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

**A** Name of plan
VENSURE RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500
SLAVIC INTEGRATED ADMINISTRATION INC.

**D** Employer Identification Number (EIN)
39-2377547

## 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) | 301616 | 2765599 |
| **(2)** Participant contributions | 1b(2) | 411274 | 1607633 |
| **(3)** Other | 1b(3) | 1723 | 31289 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | |
| **(2)** U.S. Government securities | 1c(2) | | |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | | |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | 202767 | 6716064 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 35080 | 2216794 |
| **(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) | 27558388 | 460782277 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | (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 | 28510848 | 474119656 |
| **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 | 28510848 | 474119656 |

## 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) | 20658293 | |
| **(B)** Participants | 2a(1)(B) | 54523937 | |
| **(C)** Others (including rollovers) | 2a(1)(C) | 10904122 | |
| **(2)** Noncash contributions | 2a(2) | | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 86086352 |
| **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) | 231832 | |
| **(F)** Other | 2b(1)(F) | | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 231832 |
| **(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) | 11807397 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 11807397 |
| **(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) | | 39648 |
| (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) | | 32343988 |
| c Other income | 2c | | |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 130509217 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 23254080 | |
| (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) | | 23254080 |
| f Corrective distributions (see instructions) | 2f | | 123875 |
| 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) | 1423624 | |
| (3) Recordkeeping fees | 2i(3) | | |
| (4) IQPA audit fees | 2i(4) | | |
| (5) Investment advisory and investment management fees | 2i(5) | 110041 | |
| (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) | | 1533665 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 24911620 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 105597597 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 387189450 |
| (2) From this plan | 2l(2) | | 47178239 |

## 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: CBIZ CPAS P.C. **(2)** EIN: 43-1947695

**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 | | 861266 |
| **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** | X | | |

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [ ] 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) |
|---|---|---|
| 43 CHURCH STREET LLC 401(K) PLAN | 46-0853643 | 001 |
| ADP TOTALSOURCE RETIREMENT SAVINGS PLAN | 59-2452823 | 001 |
| ARCHI REALTY LLC 401(K) PLAN | 87-1775411 | 001 |
| ARDENT AI, INC. 401(K) PLAN | 99-2000722 | 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) |
|---|---|---|
| ASPEN HR PEO LLC | 85-3188438 | 001 |
| ASRA 401(K) PLAN | 81-3378696 | 333 |
| BESTICA 401(K) PLAN | 16-1721345 | 001 |
| COREBRIDGE, INC | 84-5040066 | 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) |
|---|---|---|
| DEEL 401(K) PLAN | 61-1852855 | 001 |
| DOLOMA INVESTMENTS OF NORTH BRUNSWICK | 26-1828831 | 001 |
| ENCAPSULITE INTERNATIONAL INC. 401(K) PLAN | 04-2963126 | 001 |
| EXTENSIS RETIREMENT SAVINGS PLAN | 86-1064991 | 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) |
|---|---|---|
| GWEN BROOKS INSURANCE AGENCY INC. 401(K) PLAN | 85-1331299 | 002 |
| INSPERITY 401(K) PLAN | 76-0178498 | 001 |
| JUSTWORKS RETIREMENT SAVINGS PLAN | 46-2283648 | 333 |
| LOYACONA&LOYACONA BUILDING CONSULTANTS 401(K) PLAN | 99-2160655 | 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) |
|---|---|---|
| PEA(K) UTAH'S POOLED EMPLOYER 401(K) PLAN | 20-5321813 | 001 |
| PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN | 87-1231461 | 333 |
| SEQUOIA ONE | 46-4716239 | 001 |
| TRINET 401(K) PLAN | 48-1304650 | 334 |

**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 SELECT 401(K) PLAN | 48-1304650 | 333 |
| VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN | 37-1508469 | 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
VENSURE RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 016

**C** Plan sponsor's name as shown on line 2a of Form 5500
SLAVIC INTEGRATED ADMINISTRATION INC.

**D** Employer Identification Number (EIN)
39-2377547

## 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

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

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

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

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

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

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

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

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

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

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

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

## Part III Amendments

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

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

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

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

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

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

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

---

**a** Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

## Part VII IRS Compliance Questions

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

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

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702352A .

**SCHEDULE MEP (Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

# MULTIPLE-EMPLOYER RETIREMENT PLAN 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<br>VENSURE RETIREMENT PLAN | **B** Three-digit Plan number (PN)..... ▶ 016 |
| **C** Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF<br>SLAVIC INTEGRATED ADMINISTRATION INC. | **D** Administrator's EIN<br>39-2377547 |

## 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 |
|---|---|---|---|
| 1313 JEFFREY | 88-4069167 | 0.21 | 242695 |
| **2a** Name of Participating Employer | **2b** EIN | **2c** Percentage of Total Contributions for the Plan Year | **2d** Aggregate Account Balances Attributable to Participating Employer |
| 1635 GUARDIAN SERVICES LLC | 81-4809308 | 0.03 | 346582 |

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| | | | |
|---|---|---|---|
| **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.**

**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 |
|---|---|---|---|
| 3D MATRIX INC | 04-3563924 | 0.36 | 286667 |
| 4 ELEMENTS PROPERTY MANAGEMENT | 26-3129328 | 0.01 | 5936 |
| 42 DEGREES PROCESSING LLC | 83-1757242 | 0.05 | 297100 |
| 503 COLLECTIVE INC | 47-2581874 | 0.04 | 142527 |
| 828 ADVISORS | 92-0807863 | 0.01 | 15128 |
| 831 STORIES INC | 92-1966547 | 0.01 | 7749 |
| A KID AGAIN INC | 31-1440073 | 0.10 | 2033559 |
| AA PAIN CLINIC INC DBA AA SPINE PAIN CLINIC INC | 92-0151789 | 0.16 | 4460176 |
| ABALONE BIO INC | 82-2303516 | 0.17 | 1392718 |

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## Part II Participating Employer Information (Continued).

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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 |
|---|---|---|---|
| ABILENE HOTEL PARTNERS LLC | 20-4741981 | 0.02 | 12154 |
| ABSOLENT AMERICAS INC | 74-3196019 | 0.23 | 706320 |
| ACCESS ADVANTAGE LLC | 20-8285914 | 0.06 | 719414 |
| ACT LABORATORIES INC | 30-0857299 | 0.41 | 1285437 |
| ADAPTIVE6 INC | 86-2406454 | 0.01 | 4051 |
| ADVAGEN PHARMA LTD | 82-1767291 | 0.06 | 45724 |
| ADVANCED BUSINESS LINK CORP | 91-1658423 | 0.03 | 24700 |
| AETOS IMAGING | 92-3016790 | 0.04 | 25531 |
| AEYE HEALTH INC | 32-0580486 | 0.03 | 26693 |

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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 |
|---|---|---|---|
| AFFIRMX LLC | 45-2517409 | 0.04 | 559942 |
| AFFORDABLE BODY SHOP INC | 02-0642647 | 0.02 | 11183 |
| AGW HOLDING LLC | 88-1173524 | 0.03 | 21294 |
| AHOC LLC | 35-2310641 | 0.01 | 844 |
| AIRFINITY INC | 87-4105355 | 0.05 | 112266 |
| AIRIS LABS INC | 93-3101249 | 0.01 | 6820 |
| AIRWAYS AUTO TAG LLC | 65-1148104 | 0.03 | 38949 |
| AISAP MEDICAL | 99-3462219 | 0.01 | 8656 |
| AIWORK INC | 99-4101494 | 0.02 | 15658 |

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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 |
|---|---|---|---|
| AJ FOYT ENTERPRISES INC | 74-1658798 | 0.08 | 338346 |
| AJK NOI LLC | 92-0557205 | 0.01 | 6082 |
| ALASKA SURGICAL GROUP LLC | 83-2151455 | 0.19 | 584127 |
| ALCP SERVICES | 27-1185898 | 0.02 | 63701 |
| ALIGNMENT SPECIALISTS NORTHWEST LLC | 82-3103003 | 0.03 | 19370 |
| ALLEATO LLC | 87-3987190 | 0.09 | 82658 |
| ALLEVIO CARE LLC PARTICIPATING EMPLOYERS | 99-2165155 | 1.63 | 1235548 |
| ALLIANCE WEALTH ADVISORS | 27-1017387 | 0.15 | 1433240 |
| ALLIUM RENEWABLE ENERGY LLC | 46-0521268 | 0.26 | 2156124 |

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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 |
|---|---|---|---|
| ALLWOOD STILLWELL STAIRS RAILINGS INC | 58-2564399 | 0.06 | 315590 |
| ALTA LOMA ENTERPRISES LLC | 81-3992814 | 0.17 | 2130310 |
| AM REALTY LLC | 45-5344955 | 0.07 | 151426 |
| AMERICAN ASSOCIATION OF SERVICE COORDINATORS | 31-1670185 | 0.03 | 647284 |
| ANIMAL CARE CENTER OF BARRINGTON PC | 85-2658285 | 0.19 | 1113501 |
| ANTHESIS GLOBAL INC | 30-1415971 | 0.01 | 5206 |
| APACHE STONE QUARRY LLC | 27-1825645 | 0.03 | 106347 |
| APEX BIOLOGIX | 46-5709415 | 0.17 | 607660 |
| APEX FIRE SYSTEMS INC | 20-1837563 | 0.12 | 2865474 |

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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 |
|---|---|---|---|
| APPLIED LUBRICATION TECHNOLOGY INC | 98-0418332 | 0.02 | 16495 |
| APPWRITE CODE INC | 30-1300970 | 0.16 | 119131 |
| AQUAPASS INC | 33-4433200 | 0.01 | 8264 |
| ARBORCARE WITH ROPES N SADDLES INC | 52-2386201 | 0.03 | 42855 |
| ARDAN STAFFING SOLUTIONS INC | 61-1612655 | 0.06 | 45135 |
| ARENE CAPITAL MANAGEMENT LP | 99-3713619 | 0.04 | 28380 |
| ARGO REAL ESTATE LLC | 27-1484920 | 1.12 | 6436236 |
| ARROWPOINT CAPITAL PARTNERS LLC | 33-1415840 | 0.04 | 31780 |
| ART RISK FINANCIAL AND INSURANCE SOLUTIONS INC | 27-4001611 | 0.04 | 29937 |

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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 |
|---|---|---|---|
| ASHTEAD TECHNOLOGY OFFSHORE INC | 26-3880287 | 0.62 | 1920705 |
| ASKABLE INC | 37-2088386 | 0.02 | 12311 |
| ATC ACQUISITION LP DBA CORVAER | 38-4090299 | 0.01 | 5625 |
| ATTESTABLE INC | 39-2439112 | 0.01 | 4546 |
| AURA SOS INC | 33-3114423 | 0.01 | 6294 |
| AVAZ MANAGEMENT LLC | 33-1744354 | 0.01 | 10123 |
| AVIATION CONSULTING EXPERTS INC | 47-1095142 | 0.27 | 190757 |
| AWAGER INC | 99-0539996 | 0.19 | 160821 |
| AWIN INC | 99-0360504 | 0.26 | 6618973 |

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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 |
|---|---|---|---|
| AZURIS CONSULTING LLC | 46-4752761 | 0.07 | 52003 |
| BABYARK INC | 35-2756327 | 0.03 | 25751 |
| BACKSLASH SECURITY INC | 30-1320139 | 0.04 | 92844 |
| BAKERY LORRAINE AUSTIN LP | 82-3961579 | 0.05 | 38004 |
| BALAJI GROUP LLC | 86-1055255 | 0.01 | 6393 |
| BALANCED BODY MD | 46-3678383 | 0.05 | 266727 |
| BARTSCH MANAGEMENT LLC | 47-1408420 | 0.01 | 126452 |
| BASIL COURT PARTNERS LLC | 81-4159465 | 0.02 | 10402 |
| BEACHPLACE ASSOCIATION INC | 59-1936363 | 0.06 | 41442 |

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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 |
|---|---|---|---|
| BEITEL CORP | 84-4031356 | 0.06 | 284059 |
| BENCHMARK MINERAL INTELLIGENCE INC | 36-5063279 | 0.07 | 494328 |
| BENNETT FAMILY DENTAL LLC | 47-2338965 | 0.05 | 35472 |
| BERKELEY COMMUNICATIONS LLC | 85-1221286 | 0.09 | 80226 |
| BETTER TECHNOLOGIES INC | 61-1964962 | 0.16 | 555215 |
| BEYOND OIL USA INC | 37-2160906 | 0.05 | 42403 |
| BIG 4 PROPERTIES LLC | 33-3056763 | 0.16 | 140650 |
| BIG CARTEL LLC | 20-1615057 | 0.71 | 6095061 |
| BISHOP BUTTERY INC | 59-3200739 | 0.06 | 419386 |

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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 |
|---|---|---|---|
| BISI SOLUTIONS LLC | 90-0890545 | 0.21 | 471424 |
| BLINQIO | 35-2804118 | 0.01 | 5720 |
| BLUE WIRE INC | 84-3062742 | 0.06 | 205081 |
| BLUELINE MEDIA PRODUCTIONS LLC | 46-4484658 | 0.13 | 288577 |
| BLYTHE SERVICING LLC | 93-2305987 | 0.06 | 46401 |
| BMI INSURANCE GROUP | 82-4929356 | 0.22 | 183898 |
| BOARDSCOM INC | 99-3459111 | 0.05 | 52032 |
| BOLTTAI INC | 33-3723889 | 0.01 | 7007 |
| BONITA SPRINGS ESTERO REALTORS INC | 59-1708371 | 0.01 | 157767 |

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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 |
|---|---|---|---|
| BORG PROPERTY SERVICES LLC | 26-1710794 | 0.04 | 26909 |
| BORO HOTEL PARTNERS LLC | 47-4074570 | 0.01 | 5890 |
| BP PRINT GROUP INC | 81-0898988 | 0.25 | 193832 |
| BPX TRANSPORTATION INC | 39-3722644 | 0.03 | 18417 |
| BRAGG USA INC | 35-2715684 | 0.09 | 63790 |
| BRAND METRICS INC | 99-4415454 | 0.13 | 265679 |
| BRENEMAN ADVISORS LLC | 82-2155041 | 0.17 | 753643 |
| BRIGHT SOLUTIONS LLC | 38-3846462 | 0.01 | 260582 |
| BRIM PROPERTIES | 27-3557924 | 0.07 | 177588 |

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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 |
|---|---|---|---|
| BROOKLYN SUPPLY INC | 26-1459675 | 0.10 | 70251 |
| BRUCE KOLTON MD LLC | 36-4408879 | 0.01 | 1472794 |
| BUILDING STUDIO ARCHITECTS | 13-3666422 | 0.14 | 155953 |
| BUSH BROTHERS PROVISION CO LLC | 59-1370103 | 0.57 | 2760273 |
| BUSINESS FITNESS INC | 72-1557414 | 0.01 | 20645 |
| CABLE SCOPE INC DBA CENTRIPLY | 13-3465626 | 0.01 | 4676 |
| CADWELL PRODUCTS CO INC | 04-2916304 | 0.06 | 793261 |
| CALAVISTA LP | 75-3011216 | 0.04 | 420496 |
| CALIFORNIA METRO TRANSIT INC | 45-5030063 | 0.02 | 12194 |

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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 |
|---|---|---|---|
| CALITII INC | 98-1820679 | 0.14 | 104020 |
| CAMBELT INTERNATIONAL CORPORATION | 87-0304695 | 0.29 | 1138294 |
| CAMELBACK FIDUCIARY LLC | 81-4193193 | 0.10 | 1383932 |
| CANSECO ELECTRICAL CONTRACTORS INC | 75-3049378 | 0.04 | 28673 |
| CAPACITY TRANSPORT INC COADOPTING COMPANIES | 36-4528800 | 0.19 | 138507 |
| CAPITAL MANAGEMENT ADVISORS CO INC | 81-2687412 | 0.03 | 241888 |
| CAPON SPRINGS AND FARMS LLC | 55-0560797 | 0.03 | 143514 |
| CATHEDRAL LAND SOLUTIONS LLC | 82-5349664 | 0.56 | 1675896 |
| CAVANAUGH PROPERTIES INC | 81-1237049 | 0.02 | 12665 |

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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 |
|---|---|---|---|
| CB CO MANUFACTURING LLC | 99-2966363 | 0.02 | 16890 |
| CENTENNIAL STATE INSURANCE GROUP | 46-1683763 | 0.04 | 242328 |
| CENTRAL OHIO SURGICAL INSTITUTE INC | 74-3059062 | 0.01 | 1360592 |
| CETERIS PORTFOLIO SERVICES LLC | 83-2154217 | 0.04 | 724669 |
| CHARLES HALL CONSTRUCTION LLC | 36-4254813 | 0.04 | 2857619 |
| CHERRY PICK TALENT US CORP | 88-2177946 | 0.14 | 252031 |
| CIRCADIAN HEALTH INC | 99-2768763 | 0.40 | 297586 |
| CIRCLE SEAFOODS QALICB INC | 93-1513086 | 0.09 | 73279 |
| CIRRUS LAKE SOLUTIONS LLC | 93-1796472 | 0.11 | 86180 |

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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 |
|---|---|---|---|
| CITYSIDE NETWORKS LLC | 86-2127933 | 1.01 | 1278039 |
| CLARITY SKIN LLC | 45-0677511 | 0.20 | 18 |
| CLARKSVILLE HOTEL PARTNERS LLC DBA HOME2 SUITES BY HILTON | 46-3596154 | 0.02 | 11141 |
| CLEAR LAUNCH LLC | 46-4208867 | 0.01 | 276789 |
| CLEAR POINT GROUP LLC | 26-2636597 | 0.16 | 410481 |
| CLOVER SECURITY INC | 93-3442673 | 0.02 | 15855 |
| CLUTCH SECURITY INC | 93-4284131 | 0.10 | 218838 |
| CME LENDING GROUP LLC | 46-5385839 | 0.53 | 3074960 |
| COLLAR | 82-0637977 | 0.09 | 368838 |

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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 |
|---|---|---|---|
| COLUMBUS HOTEL PARTNERS LLC DBA EMBASSY SUITES COLUMBUS | 47-4857485 | 0.01 | 17810 |
| COMMON JUSTICE INC | 82-0993366 | 0.38 | 1540226 |
| COMMUNITY DEVELOPMENT ALLIANCE INC | 88-1669432 | 0.01 | 64694 |
| COMPETE HR INC | 35-2735271 | 0.01 | 7894 |
| CONCRETE MASONRY CHECKOFF | 92-2314664 | 0.11 | 98625 |
| CONNECTICUT ELECTRIC INC | 81-5313895 | 0.08 | 801794 |
| CONTENDER BICYCLES INC | 87-0626182 | 0.13 | 1068032 |
| CONVENIENT PAYMENTS LLC DBA INTELLIPAY | 27-3685152 | 0.92 | 6056969 |
| COOK INLET SOCCER CLUB | 94-3055547 | 0.03 | 75405 |

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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 |
|---|---|---|---|
| CORAL DESERT SURGERY CENTER LLC | 71-0875262 | 0.37 | 2955516 |
| CORKS AND BARRELS LLC | 86-3925812 | 0.03 | 55639 |
| CORPORATE AIRCRAFT HOLDINGS LLC | 87-1145444 | 0.03 | 74759 |
| COSMOS INTERNATIONAL CORPORATION | 91-1399236 | 0.06 | 880664 |
| COUGHLIN PROPERTY MANAGEMENT LLC | 94-3297508 | 0.03 | 650497 |
| COURT OF MASTER SOMMELIERS AMERICAS | 68-0398505 | 0.04 | 1392230 |
| COVENANT INDUSTRIES INC | 99-3638551 | 0.04 | 32648 |
| COVENANT LAW PLLC | 92-0828177 | 0.03 | 19714 |
| COVERT MILE HIGH CAPITAL LLC DBA COVERTNUTRA | 99-2708632 | 0.04 | 27842 |

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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 |
|---|---|---|---|
| CPL INDUSTRIES INC | 39-1099529 | 0.06 | 1481692 |
| CRANE INSTITUTE OF AMERICA LLC | 59-2822876 | 0.03 | 19904 |
| CREATIVE CUSTOM AUTO REPAIRS INC | 93-4742021 | 0.05 | 41392 |
| CRONOS CONTRACTORS LLC | 39-2057446 | 0.06 | 112883 |
| CROSS OCEAN PARTNERS MANAGEMENT LP | 38-4016186 | 0.89 | 4860138 |
| CROWDED TECHNOLOGIES INC | 38-4186232 | 0.02 | 38242 |
| CRYSTALLINE HEALTH BEAUTY INC | 83-2534042 | 0.03 | 11002 |
| CSI ENTERTAINMENT INC | 95-4641105 | 0.03 | 21674 |
| CURBS ENTERPRISE INC | 86-1284394 | 0.10 | 266159 |

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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 |
|---|---|---|---|
| CUSTOM CONTROLS OF ARIZONA INC | 03-0512728 | 0.34 | 1452139 |
| CUSTOM FLAG COMPANY INC | 26-0016883 | 0.18 | 1473796 |
| CYCLOPS SECURITY INC | 30-1430620 | 0.05 | 33643 |
| DAMON LISS INC | 30-0224699 | 0.09 | 118594 |
| DEALMED MEDICAL SUPPLIES LLC | 27-4406890 | 0.06 | 1124052 |
| DECARTAI INC | 32-0749715 | 0.05 | 36503 |
| DEEP TECH INC | 22-3745108 | 0.09 | 1301861 |
| DEFINITY AI INC | 93-3240361 | 0.01 | 10217 |
| DELTA SIGMA AUTOMATION INC DBA STOVIL | 26-1606350 | 0.02 | 18798 |

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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 |
|---|---|---|---|
| DELTA SIGMA LLC | 46-1586071 | 0.49 | 2982206 |
| DENCITYWORKS ARCHITECTURE PLLC | 81-3400765 | 0.03 | 394468 |
| DESERT RIDGE SURGERY PC | 93-1649186 | 0.06 | 587610 |
| DG CONSULTING LLC | 82-5303842 | 0.05 | 485926 |
| DIABLO VALLEY SWEEPING SERVICE LLC | 47-1977688 | 0.02 | 25505 |
| DIAGNOSTIC ROBOTICS USA INC | 83-4719938 | 0.13 | 298777 |
| DIFFBLUE | 99-3999889 | 0.05 | 39990 |
| DIGITALJ2 LLC | 46-4542273 | 0.01 | 132871 |
| DISTYL AI INC | 92-1141444 | 1.06 | 1044525 |

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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 |
|---|---|---|---|
| DLH INC | 91-1576336 | 0.15 | 3937314 |
| DOC LAB INC | 92-0648585 | 0.07 | 98212 |
| DOCHAS SERVICES LLC | 88-4043446 | 0.08 | 316340 |
| DOHMEN COMPANY FOUNDATION INC | 35-2317921 | 0.02 | 284050 |
| DOUBLE D WINERY LLC DBA ROCKY POND ESTATE WINERY | 46-0798927 | 0.09 | 204334 |
| DOVER STAFFING | 58-2254612 | 0.10 | 70322 |
| DR ELINOR BOCK PSYCHOLOGIST PC | 47-4525654 | 0.12 | 90276 |
| DRIVE MY WAY INC | 81-3186692 | 0.03 | 361375 |
| DRIZZLEX INC | 84-3652129 | 0.02 | 17940 |

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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 |
|---|---|---|---|
| DRY CREEK PHYSICAL THERAPY AND WELLNESS PLLC | 20-2367847 | 0.41 | 1923585 |
| DUALITY SYSTEMS | 85-0500664 | 0.04 | 34731 |
| DXTERITY DIAGNOSTICS INCORPORATED | 20-5016368 | 0.08 | 4683163 |
| DYNAMIC THERAPY AND CONSULTING LLC | 99-2065568 | 0.05 | 36903 |
| E5A FUNDS LLC | 30-0636825 | 0.01 | 58822 |
| EAGLE COMMUNITY CREDIT UNION | 95-1068549 | 0.26 | 8557053 |
| EAGLE LEATHER | 91-1951288 | 0.01 | 341889 |
| EAGLES BLUFF CLUB LLC | 47-1113318 | 0.07 | 107717 |
| EAR NOSE THROAT | 84-1752057 | 0.02 | 32381 |

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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 |
|---|---|---|---|
| EAST ATLANTA PAINTING COMPANY COADOPTING COMPANY | 20-5344581 | 0.22 | 1128368 |
| EDGE EXPONENTIAL LLC DBA AGAPE AUTOMATION | 84-3711237 | 0.07 | 49526 |
| EDISON47 INC | 47-3104932 | 0.28 | 1507317 |
| EKABEL LLC | 46-1429681 | 0.02 | 317540 |
| EL TORO LOCO MARKETS | 46-3286331 | 0.03 | 18091 |
| ELECTRICODE LLC | 82-1401451 | 0.02 | 31678 |
| ELEGRAN LLC | 26-1876585 | 0.05 | 141378 |
| ELEMENT LABS USA INC | 32-0791997 | 0.04 | 29006 |
| ELEV8 RESIDENTIAL LLC | 99-4670908 | 0.05 | 33850 |

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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 |
|---|---|---|---|
| ELEVATE ASSET MANAGEMENT LLC | 83-2084122 | 0.04 | 766395 |
| ELEVATE CLINICAL RESEARCH SOLUTIONS LLC | 33-1429356 | 0.04 | 22925 |
| ELEVATION INDIVIDUAL AND FAMILY THERAPY PLLC | 85-2240519 | 0.01 | 8257 |
| ELITE CUSTOM BUILDERS LLC | 20-5951829 | 0.04 | 987479 |
| ELMWOOD ASSET MANAGEMENT LLC | 83-0587597 | 0.13 | 5734529 |
| ELSER ENTERPRISES INC | 39-1399292 | 0.02 | 962894 |
| EMERGENTMEDTECH CORP | 99-4313310 | 0.06 | 40477 |
| EMPLOY INTELLIGENCE INC DBA TALENTEI | 83-2788065 | 0.59 | 2799047 |
| ENACT SYSTEMS INC | 30-0766412 | 0.14 | 406259 |

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|---|---|---|---|
| ENDOVASCULAR CONSULTANTS OF COLORADO PC | 84-2825773 | 0.03 | 654606 |
| ENSIGHTS AI INC | 33-1671760 | 0.02 | 12902 |
| ENVIROSAFE CONSULTING LLC | 01-0755807 | 0.10 | 3747145 |
| EQUINOM INC | 83-3316389 | 0.02 | 126697 |
| ERIC DALE HUNLEY DBA HUNLEY REALTY GROUP | 33-4567684 | 0.02 | 11990 |
| ESL VISION LLC | 27-3848747 | 0.18 | 1131609 |
| ESP GROUP INC | 39-1827089 | 0.02 | 634290 |
| ET TECHNOLOGIES INC | 84-0943270 | 0.15 | 3885989 |
| ETHOS SERVICES | 46-3521329 | 0.01 | 241556 |

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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 |
|---|---|---|---|
| EVAL DOCS INC | 47-4052633 | 0.11 | 114304 |
| EVERYDAY BLESSINGS INC | 30-2578702 | 0.08 | 323961 |
| EZDUCK LLC | 61-2202225 | 0.01 | 11692 |
| EZRA LEE DESIGN BUILD | 27-1926756 | 0.54 | 1978676 |
| FAMILY SUPPORT CENTER | 87-0359719 | 0.01 | 34419 |
| FANTASY ADVANTAGE INC | 35-2753126 | 0.05 | 38177 |
| FEARFREE LLC | 81-4630654 | 0.23 | 653054 |
| FEELBETTER US INC | 88-1283754 | 0.04 | 35077 |
| FELDMAN KODSI PLLC | 87-1449346 | 0.14 | 122953 |

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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 |
|---|---|---|---|
| FIELDS CORNER COMMUNITY DEVELOPMENT CORPORATION | 04-2716728 | 0.02 | 14519 |
| FIG SECURITY INC | 33-4240796 | 0.01 | 9727 |
| FILM MOVEMENT LLC | 46-4076413 | 0.04 | 1769888 |
| FIRMUS AI INC | 36-5090463 | 0.06 | 58397 |
| FISCAL CARE SERVICES LLC | 46-2905738 | 0.10 | 204302 |
| FISHBAIT SOLUTIONS LLC | 86-1349364 | 0.05 | 32886 |
| FITNESS BROKERS USA INC | 27-3662184 | 0.01 | 1105945 |
| FLEET LEASE DISPOSAL INC | 59-1951844 | 0.46 | 4981545 |
| FLORIDA WASTE SOLUTIONS LLC | 99-1260316 | 0.21 | 240566 |

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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 |
|---|---|---|---|
| FNJ SUMMIT INC | 84-3688419 | 0.03 | 21102 |
| FOOTHOLD AMERICA INC | 82-1808434 | 1.47 | 4256121 |
| FORDEFI INC | 87-3244997 | 0.06 | 318236 |
| FORM MED SPA LLC | 81-2573952 | 0.04 | 325843 |
| FORT JACKSON HOTEL PARTNERS | 82-1659373 | 0.02 | 11320 |
| FORTUNES ROCKS PARTNERS LLC | 33-3161771 | 0.03 | 25322 |
| FOX FODDER FARM INC | 81-3749884 | 0.02 | 179205 |
| FRESH GRILL LLC | 48-1268681 | 0.46 | 345969 |
| FRIESLANDCAMPINA INGREDIENTS NORTH AMERICA INC COMPANIES | 80-0004006 | 2.21 | 20599872 |

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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 |
|---|---|---|---|
| FUGATE INDUSTRIAL SALES INC | 87-0235200 | 0.04 | 425627 |
| FUSION RECOVERY CENTERS LLC | 87-4027886 | 0.21 | 400311 |
| GAPPS | 81-4625437 | 0.08 | 614148 |
| GAR VENTURES LLC DBA GAR PRODUCTS | 92-0937333 | 0.19 | 691846 |
| GCCP II LLC | 83-2937155 | 0.11 | 8184935 |
| GEDIA USA HOLDINGS INC | 84-4722309 | 0.07 | 2837107 |
| GEN LABS INC | 99-2014616 | 0.24 | 240271 |
| GEOX ANALYTICS INC | 88-1611548 | 0.02 | 14851 |
| GIVING HOPE DBA ALPENGLOW PAIN WELLNESS | 81-4590074 | 0.22 | 595631 |

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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 |
|---|---|---|---|
| GIZMODO | 99-2737198 | 0.18 | 198367 |
| GOBE | 46-1407573 | 0.01 | 175279 |
| GOLOGIX LLC | 82-5035046 | 0.15 | 116563 |
| GOPINATH LLCBALAJI LLC | 20-2844726 | 0.02 | 26769 |
| GOTHAM SURGICAL SOLUTIONS DEVICES INC | 46-1172289 | 0.19 | 136022 |
| GRACE AND GLORY HOSPICE INC | 82-4386502 | 0.13 | 222659 |
| GRASSHOPPER INTERNATIONAL TRADING INC | 83-1372152 | 0.14 | 366804 |
| GRAW BEAUTY INC | 87-4541369 | 0.04 | 106969 |
| GRAY DAWES TRAVEL INC | 92-3125761 | 0.13 | 174070 |

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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 |
|---|---|---|---|
| GRAYMATTERS MEDICAL PRACTICE PC | 81-4169080 | 0.04 | 28432 |
| GREAT FALLS GLASS AND SHOWER | 92-2333321 | 0.03 | 498138 |
| GREAT LAKES ESSENTIAL POWER | 46-4413486 | 0.04 | 2193778 |
| GREAT LAKES HOUSING SERVICES | 27-2296093 | 0.09 | 75447 |
| GREAT LAKES WEALTH LLC | 47-4672827 | 0.02 | 240329 |
| GREATER COLUMBUS CHAMBER OF COMMERCE | 31-4152950 | 0.09 | 2056452 |
| GREEN DELIVERY INC | 83-3215101 | 0.01 | 10259 |
| GREENHAM USA INC | 61-2054818 | 0.13 | 270363 |
| GREENSCREENS AI LLC | 85-1279104 | 0.10 | 100487 |

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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 |
|---|---|---|---|
| GRIFFIN RESIDUALS LLC | 88-3527504 | 0.01 | 5228 |
| HACOATLANTIC INC DBA ATLANTIC MACHINE TOOLS INC | 76-0035707 | 0.11 | 796764 |
| HALLMARK YOUTHCARE RICHMOND COADOPTING COMPANY | 58-2156548 | 0.41 | 1606205 |
| HALO DREAM INC | 32-0287095 | 0.11 | 78848 |
| HANEY FREIGHTWAYS LLC | 47-2779870 | 0.03 | 21661 |
| HANSCHS ACE HARDWARE | 20-0983876 | 0.05 | 439328 |
| HARI HOSPITALITY LLC COADOPTING COMPANIES | 46-3127499 | 0.03 | 117696 |
| HARMONYA INC | 86-2197625 | 0.27 | 318814 |
| HARRISON EUROSPORTS LLC | 26-4787485 | 0.17 | 760922 |

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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 |
|---|---|---|---|
| HARRISON PLUMBING | 81-1659569 | 0.09 | 69432 |
| HATTIESBURG HP LLC | 46-4110565 | 0.03 | 29526 |
| HC INTELLECT LLC | 81-3251405 | 0.03 | 155555 |
| HEG SECURITIES LLC | 93-4744906 | 0.03 | 34225 |
| HELIX LLC | 35-2760482 | 0.12 | 532505 |
| HELP ME SEE INC | 27-3207754 | 0.37 | 1438121 |
| HIGH END LABOR POOL | 51-0648765 | 0.13 | 19424 |
| HIGH STAKES LEAFERY LLC | 93-2259720 | 0.04 | 29629 |
| HIGHER LEVEL EMPLOYMENT SERVICES LLC | 92-1570831 | 0.22 | 392102 |

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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 |
|---|---|---|---|
| HIGHLAND PROPERTIES | 46-4516389 | 0.02 | 16935 |
| HILLS POINT INDUSTRIES LLC DBA GORILLA COMMERCE | 47-1573043 | 0.07 | 51947 |
| HIRAM POWER ELECTRIC LLC | 20-1669343 | 0.07 | 1091903 |
| HISA | 86-1940818 | 0.67 | 1785045 |
| HM SOLUTIONS INCORPORATED | 46-1490348 | 0.22 | 168485 |
| HOLE SPECIALIST INC | 76-0494153 | 0.07 | 1170129 |
| HONDO ADVISORS LLC | 93-4397811 | 0.14 | 83335 |
| HPS CHICAGO | 84-3272712 | 0.03 | 618927 |
| HUGHES AND COMPANY INVESTMENT PARTNERS LP | 85-2724012 | 0.06 | 1153928 |

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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 |
|---|---|---|---|
| HYRO AI INC | 83-0771813 | 0.02 | 11018 |
| IBIO INSTITUTE | 32-0092551 | 0.01 | 928100 |
| ICON REAL ESTATE SERVICES INC | 47-4476212 | 0.12 | 838496 |
| IMAGE STUDIOS FRANCHISE LLC | 99-1386887 | 0.14 | 333121 |
| IME CIVIL SURVEYING LLC | 81-2346453 | 0.09 | 145865 |
| IMPACT WINDOWS GROUP LLC | 84-2454851 | 0.02 | 66830 |
| IMPERAI INC | 36-5110603 | 0.03 | 18716 |
| IN4ALL | 93-0900111 | 0.03 | 60024 |
| INDOOR WEATHER HEATING AIR REFRIGERATION INC | 86-1600969 | 0.04 | 31683 |

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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 |
|---|---|---|---|
| INNOVATION MEDICAL GROUP | 83-4232881 | 0.81 | 1346045 |
| INNOVATIVE FIRE PROTECTION LLC DBA ALLIANCE FIRE SAFETY | 47-3205908 | 0.09 | 402784 |
| INSIGHT TECHNOLOGY INC | 58-2263028 | 0.05 | 603726 |
| INTEGRATED HR SERVICES LLC | 93-2808472 | 0.03 | 61215 |
| IRON BLOCK HOLDINGS LLC | 39-1965399 | 0.01 | 1225002 |
| ISM RESTAURANT SERVICES LLC | 26-3854317 | 0.09 | 750694 |
| ISTITUTO MARANGONI MIAMI INC | 81-3271756 | 0.10 | 99927 |
| JED R BINDRUP MD PC | 87-0547521 | 0.09 | 2312673 |
| JENSEN SURGICAL ADVANTAGE INC DBA MARK JENSEN PLASTIC SURG | 84-1798173 | 0.12 | 402309 |

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|---|---|---|---|
| JIGSAW TECH US INC | 87-3100683 | 0.06 | 156040 |
| JLF EMPLOYMENT LLC | 93-4207065 | 0.01 | 20913 |
| JODA ABSTRACT LLC | 81-1346104 | 0.01 | 5344 |
| JOLIE MEDICAL LLC | 99-3008226 | 0.07 | 46432 |
| JONES JONES MANAGEMENT GROUP INC | 95-2754836 | 0.36 | 2339645 |
| JOOL PRODUCTS LLC DBA JOOL BABY | 82-1269311 | 0.01 | 10150 |
| JR HEALD BUILDERS LLC | 04-3676554 | 0.02 | 85965 |
| JUNCTION HARDWARE INC | 91-0929467 | 0.06 | 1055226 |
| JUST A COOKIE BREA LLC COADOPTING COMPANIES | 33-1420204 | 0.03 | 23968 |

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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 |
|---|---|---|---|
| KANA HOTELS INC | 62-1587057 | 0.40 | 2917511 |
| KEOSYS CORP | 37-1768672 | 0.01 | 222164 |
| KEY KLEAN LLC | 92-1783184 | 0.24 | 336348 |
| KEYSTONE DIGITAL SERVICES LLC | 92-1208364 | 0.01 | 672022 |
| KINGS BAY PROPERTIES LLC | 83-1619374 | 0.01 | 8086 |
| KISHAN ASSOCIATES LLC | 62-1548531 | 0.01 | 7368 |
| KNOXVILLE HOTEL HOSPITALITY LLC | 11-3642309 | 0.03 | 18025 |
| KNOXVILLE HOTEL PARTNERS LLC | 82-2509845 | 0.04 | 39930 |
| KONG ACADEMY LLC | 82-3123908 | 0.02 | 13742 |

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|---|---|---|---|
| KUSTOM HR | 88-3540943 | 0.02 | 166950 |
| LAKEWOOD GROWTH PARTNERS LLC | 82-2881285 | 0.03 | 158856 |
| LAS CRUCES HOTEL PARTNERS LLC | 47-4469849 | 0.01 | 2980 |
| LATITUDE PROPERTY MANAGEMENT REAL ESTATE SERVICES | 83-4491145 | 0.13 | 587714 |
| LAWRENCE ENV LLC | 46-5427488 | 0.26 | 905768 |
| LBISAT LLC | 80-0107569 | 0.03 | 1638412 |
| LEE ASSOCIATES HOLDINGS CORP | 13-2782294 | 0.18 | 3908459 |
| LEGACY PAPER AND PACKAGING LLC | 81-1253498 | 0.77 | 1954063 |
| LEGACY ROOFING PROS LLC | 87-1680548 | 0.02 | 11358 |

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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 |
|---|---|---|---|
| LEMOKO MANAGEMENT | 36-8369830 | 0.14 | 245194 |
| LEOMINSTER MEDICAL ASSOCIATES LP | 04-2720606 | 0.01 | 7186 |
| LETTERPRESS SOFTWARE | 87-0633885 | 0.01 | 472159 |
| LEWISBURG PIZZA LLC | 20-2602162 | 0.36 | 320680 |
| LIGHTSOURCE ASO LLC | 84-3392683 | 0.01 | 7861 |
| LIGHTSOURCE HR GLOBAL III LLC | 85-1790805 | 0.57 | 408971 |
| LIGHTSOURCE SPA LLC | 84-3403608 | 0.11 | 79967 |
| LIGHTSPRING CAPITAL PARTNERS | 83-1544378 | 0.04 | 821688 |
| LIN HEALTH INC | 86-1512570 | 0.13 | 99016 |

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|---|---|---|---|
| LINX SECURITY | 92-1990836 | 0.18 | 137835 |
| LIS TECHNOLOGIES INC | 93-3676104 | 0.14 | 376859 |
| LIST FUNDING INC DBA LIST SETTLEMENTS | 85-0915960 | 0.01 | 4724 |
| LIVEHAPPY | 93-4615962 | 0.03 | 23529 |
| LONGEVITY AI TECHNOLOGY INC | 33-3384891 | 0.04 | 24701 |
| LOUISVILLE HOTEL PARTNERS LLC DBA HAMPTONHOME2 | 47-1677378 | 0.01 | 10524 |
| LOVING AIR INC | 46-4469121 | 0.05 | 742238 |
| LPDC LLC | 93-4530452 | 0.01 | 5285 |
| LUMIA SECURITY INC | 99-4462432 | 0.09 | 437075 |

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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 |
|---|---|---|---|
| LYNROCK LAKE LP | 82-3471564 | 0.09 | 65473 |
| M CARR ENTERPRISES INC DBA EXTREME TOWING 401K PLAN | 90-1006112 | 0.02 | 24146 |
| M10N LLC | 99-4237793 | 0.01 | 7481 |
| MACKA FAMILY ENTERPRISES LLC | 27-3904625 | 0.09 | 69429 |
| MADRE INC | 13-3280194 | 0.40 | 2022903 |
| MAGENTA MEDICAL INC | 99-2604994 | 0.28 | 213429 |
| MAJESTIC LABS INC | 93-4166286 | 0.32 | 356905 |
| MANUFACTURE 2030 INC | 92-3154923 | 0.02 | 12779 |
| MARBISNITRADO USA INC | 82-1952346 | 0.08 | 61595 |

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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 |
|---|---|---|---|
| MARYLAND COMMUNITY INVESTMENT CORPORATION | 99-4075500 | 0.05 | 34803 |
| MASCHIOGASPARDO NORTH AMERICA INC | 30-0243168 | 0.05 | 38520 |
| MATRIX EVENTS | 83-2917635 | 0.03 | 100984 |
| MATRIX REAL ESTATE LLC | 27-1407472 | 0.13 | 899246 |
| MATSU VALLEY PLANNING FOR TRANSPORT | 33-1271929 | 0.02 | 14032 |
| MATTR TRADING US INC | 99-3708500 | 0.06 | 8803 |
| MATTY SMITH AGENCY LLC | 33-3851172 | 0.03 | 467992 |
| MBL PARTNERS LLC | 93-4408883 | 0.03 | 161630 |
| MD PLUMBING AND MECHANICAL LLC | 47-2675157 | 0.18 | 142512 |

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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 |
|---|---|---|---|
| MEDICAL GROUP OF ALASKA LLC | 47-3568350 | 0.23 | 1679861 |
| MEDICO CX INC | 85-3421297 | 0.05 | 46989 |
| MEDONE HEALTHCARE LLC | 52-2325035 | 0.02 | 30648 |
| MEDSPA HOLDINGS LLC | 99-4233521 | 0.01 | 5571 |
| METROPOLITAN MEDICAL CENTER LLC | 20-2804280 | 0.01 | 610731 |
| MICHAEL WERNER INC | 13-3546772 | 0.26 | 552189 |
| MICHIGAN REGIONAL INFORMATION CENTER LLC | 38-3297312 | 0.02 | 17742 |
| MIDTOWN HOTEL PARTNERS LLC | 81-3587663 | 0.01 | 8567 |
| MIGGO SECURITY INC | 99-0882227 | 0.02 | 31112 |

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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 |
|---|---|---|---|
| MILK DIVA LLC | 83-2435334 | 0.03 | 32142 |
| MINT GREEN GROUP USA INC | 36-5079693 | 0.03 | 24465 |
| MMR RESEARCH WORLDWIDE INC PARTICIPATING EMPLOYER | 01-0788273 | 1.33 | 7428813 |
| MOBILTEX DATA INC | 30-1164135 | 0.06 | 42450 |
| MODULIGHT BIO | 61-2032833 | 0.03 | 24081 |
| MONROE RESTORATION AND CLEANING INC | 35-1910360 | 0.01 | 406717 |
| MONTEREY STRUCTURAL STEEL INC | 71-0895591 | 0.13 | 119909 |
| MONTO PAY INC | 38-4320650 | 0.01 | 6323 |
| MOORESVILLE HOTEL PARTNERS LLC | 20-4932460 | 0.01 | 4086 |

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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 |
|---|---|---|---|
| MOTOS AMERICA INC | 39-2060052 | 0.85 | 1380798 |
| MOUNTAINVIEW STEEL DETAIL INC | 87-0482868 | 0.11 | 593142 |
| MPLICIT INC DBA AUST MANUFACTURING | 46-4387089 | 1.19 | 2197064 |
| MPREST INC | 61-1790693 | 0.01 | 3843 |
| MPUT HOLDINGS LLC | 47-1485826 | 0.10 | 186541 |
| MSP IT PARTNERS LLC | 81-4446989 | 0.12 | 358548 |
| MSQUASH CORP | 81-3564353 | 0.04 | 640610 |
| MURFREESBORO HOTEL PARTNERSHIP LLC | 38-3902819 | 0.01 | 5360 |
| MW PANEL LLC | 82-4548065 | 0.02 | 16141 |

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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 |
|---|---|---|---|
| MY FORTUNA INC | 93-4353375 | 0.10 | 68893 |
| N2CON INC | 27-0790042 | 0.01 | 71299 |
| NANI LITHOGRAPHY INC | 33-3471861 | 0.02 | 17356 |
| NANO NUCLEAR ENERGY INC | 88-0861977 | 0.24 | 529782 |
| NAS INVESTMENTS OF GEORGIA INC | 47-4219122 | 0.64 | 1638968 |
| NATURAL BUILT ENVIRONMENTS LLC | 81-0679252 | 0.08 | 154511 |
| NATURAL RELAXED SALON INC | 46-0761451 | 0.03 | 24639 |
| NATURALIKE DENTAL | 84-4433988 | 0.08 | 189660 |
| NCW STAFFING INC | 81-1237793 | 0.04 | 29286 |

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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 |
|---|---|---|---|
| NEPHRON NITRILE | 86-2850552 | 0.16 | 111120 |
| NEUROVERSION INC | 81-3907096 | 0.55 | 3612376 |
| NEUROVIRT INC | 33-3641786 | 0.01 | 6628 |
| NEW AGE ENGINEERING PLLC | 85-0966831 | 0.13 | 303697 |
| NEW HOPE TREATMENT CENTER | 82-5415966 | 0.07 | 62836 |
| NEWELL MEDIA LLC | 82-4268172 | 0.05 | 35160 |
| NEXGEN AERO LLC | 45-3215097 | 0.39 | 281727 |
| NEXT STAGE MANAGEMENT | 88-2951098 | 0.02 | 12805 |
| NIGHT VISION LIGHTING ELECTRIC | 87-0651996 | 0.02 | 124356 |

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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 |
|---|---|---|---|
| NILUS INC | 92-0747091 | 0.01 | 10585 |
| NKJGB INC | 99-3530970 | 0.11 | 101273 |
| NOKOD SECURITY INC | 32-0769333 | 0.01 | 167884 |
| NOMA SECURITY INC | 93-2296196 | 0.06 | 40956 |
| NORTH CENTRAL STAFFING INC | 46-3804534 | 0.72 | 522404 |
| NORTH MONSEN COMPANY | 87-0259323 | 0.01 | 319758 |
| NORTHPOINTE SURGICAL CENTER LLC | 46-1487986 | 0.07 | 734492 |
| NORTHSHORE SENIOR CENTER | 91-1184432 | 0.10 | 757213 |
| NUTRITION RESULTS | 81-5053504 | 0.03 | 22847 |

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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 |
|---|---|---|---|
| NXT HOLDINGS LLC DBA NEXTAFF | 87-3116446 | 0.05 | 390517 |
| OASIS SECURITY INC | 93-1695950 | 0.03 | 24731 |
| ODYSIGHTAI INC | 47-4257143 | 0.01 | 3783 |
| OFFICE FURNITURE SOLUTIONS | 71-1051807 | 0.06 | 743217 |
| OHIO UNITED HOSPITALITY LLC | 88-2739063 | 0.02 | 13226 |
| OIL AND GAS SOLUTIONS LLC | 82-3309247 | 0.25 | 841723 |
| OKEECHOBEE FEED | 65-0859588 | 0.05 | 39958 |
| OM HOSPITALITY 150 LLC | 84-2499272 | 0.01 | 11111 |
| OMASS THERAPEUTICS INC | 33-1439053 | 0.07 | 53336 |

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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 |
|---|---|---|---|
| OMNI LENDING | 82-4360081 | 0.02 | 108690 |
| ONBOARD LOGISTICS USA INC | 47-3912776 | 0.13 | 249447 |
| ONEOHIO RECOVERY FOUNDATION | 88-0647873 | 0.12 | 172578 |
| ONEREDMOND | 46-0535220 | 0.06 | 840268 |
| ONYX SECURITY INC | 99-3359779 | 0.02 | 13584 |
| OPMED INC | 88-2601034 | 0.19 | 153083 |
| OPTIMUM MEDICAL MANAGEMENT LLC | 99-0670816 | 0.02 | 76092 |
| ORANGE COUNTY POTTYS INC | 47-1277897 | 0.02 | 16756 |
| OREGON EXPANDED LEARNING PARTNERSHIP | 33-1863320 | 0.03 | 107092 |

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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 |
|---|---|---|---|
| OSHI INC | 37-2111725 | 0.03 | 17757 |
| OWNAHEALTH INC | 92-3965287 | 0.02 | 12805 |
| PACKETFABRIC INC | 84-2861672 | 0.25 | 6804655 |
| PALLADIUM REAL ESTATE SERVICES LLC | 27-4950889 | 0.61 | 2010623 |
| PAN PACIFIC PROPERTIES INC | 91-1574271 | 0.15 | 881431 |
| PANGEA VENTURES LLC | 26-3740239 | 0.18 | 4739552 |
| PARALLEL SOLUTIONS INC | 11-3843736 | 0.25 | 2219227 |
| PARKSIDE HOTEL PARTNERS LLC | 45-3971663 | 0.02 | 22212 |
| PATELMANG LLC | 46-2577823 | 0.01 | 40418 |

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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 |
|---|---|---|---|
| PATHID INC | 99-4217214 | 0.04 | 38011 |
| PATHWISE LLC | 81-4948038 | 0.04 | 757585 |
| PAUL DERAMO PLASTIC SURGERY PC | 88-4354991 | 0.09 | 362256 |
| PEERSOURCE PARTNERS LLC COADOPTING COMPANIES | 45-3024054 | 0.33 | 1846314 |
| PELANOR INC | 93-3127650 | 0.01 | 1278 |
| PENSACOLA HOTEL DOWNTOWN LLC | 47-5132569 | 0.04 | 20681 |
| PERFECT CIRCLE INC | 27-1052519 | 0.04 | 212028 |
| PFARMEE INC | 86-1497779 | 0.01 | 102306 |
| PHASE II CENTER FOR WOMENS HEALTH | 87-0583479 | 0.02 | 1212097 |

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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 |
|---|---|---|---|
| PHASEV TRIALS INC | 93-3002511 | 0.12 | 96989 |
| PHCC PLUMBING HEATING COOLING CONTRACTORS ASSOCIATTION | 74-0490845 | 0.01 | 198088 |
| PHILHARMONIC SOCIETY OF ORANGE COUNTY | 95-1805452 | 0.06 | 242800 |
| PHYSICIANS SURGERY CENTER | 68-0591196 | 0.04 | 312449 |
| PICARDIA INC | 35-2837190 | 0.30 | 282870 |
| PINCH MED INC | 87-3444889 | 0.05 | 39406 |
| PINNACLE VALLEY ORGANICS INC | 86-1424615 | 0.05 | 36013 |
| PIT MANAGEMENT LLC | 82-3868712 | 0.14 | 221739 |
| PMG MANAGEMENT LLC | 87-3290571 | 0.07 | 540974 |

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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 |
|---|---|---|---|
| PNS HOTEL PARTNERS I LLC | 99-2639925 | 0.02 | 10748 |
| PNS HOTEL PARTNERS II LLC | 99-2664718 | 0.02 | 11920 |
| POMA FERTILITY LLC | 45-5175545 | 0.35 | 2395052 |
| PORTER RENTS LLC | 33-0856191 | 0.41 | 5329306 |
| PP TEMPORARIES INC | 22-3296808 | 0.05 | 36147 |
| PPH PROPERTY MANAGEMENT LLC | 93-4138020 | 0.03 | 30724 |
| PQ SHIELD INC | 88-0530893 | 0.13 | 148441 |
| PRECISION MEDICAL LAB LLC | 93-2212104 | 0.01 | 16839 |
| PRECISION SPECIALTY RESTORATION INC | 39-4918488 | 0.01 | 5350 |

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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 |
|---|---|---|---|
| PREMIERE PROPERTY GROUP LLC | 26-3953401 | 0.06 | 46208 |
| PRETTY AWESOME POST LLC | 88-1418074 | 0.01 | 7381 |
| PRIZMAH CENTER FOR JEWISH DAY SCHOOLS | 81-1750864 | 0.63 | 3446482 |
| PROCACCI DEVELOPMENT CORPORATION | 59-1890272 | 0.53 | 2744930 |
| PROLION INC | 85-2558323 | 0.18 | 199930 |
| PROMISE BIO US INC | 33-4224781 | 0.02 | 13822 |
| PROMPT SECURITY INC | 93-3078880 | 0.07 | 52975 |
| PROPERTY TECHNICA INC | 84-1442016 | 0.05 | 91004 |
| PROVIDENCE HOTEL PARTNERS LLC | 45-3120801 | 0.01 | 92743 |

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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 |
|---|---|---|---|
| PROVIDER HEALTHCARE LLC | 46-3663241 | 0.24 | 416897 |
| PROVISION HEALTH INSURANCE SERVICES LLC | 33-4774058 | 0.03 | 37785 |
| PROXIMA INC | 99-2903749 | 0.11 | 127322 |
| PUGET SOUND COLLECTIONS | 91-1278690 | 0.13 | 1576652 |
| Q CUE INC | 99-0507324 | 0.29 | 230283 |
| QUANTUM MOTION TECHNOLOGIES INC | 37-2147133 | 0.05 | 45913 |
| QUARK ENTERPRISES DBA SPROUT KIDS | 45-2752291 | 0.08 | 52723 |
| RABBIT TRUCKING INC | 83-4439652 | 0.04 | 349905 |
| RACON CAPITAL PARTNERS LLC | 45-4938052 | 0.01 | 1565802 |

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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 |
|---|---|---|---|
| RADAR HEALTHCARE INC | 92-3736507 | 0.03 | 79454 |
| RANCH MARKET MARYSVILLE INC | 92-1335939 | 0.02 | 11784 |
| RAVENDB INC | 35-2877590 | 0.01 | 5291 |
| REACH FOR THE STARS LEARNING CENTER INC | 20-3042280 | 0.01 | 10732 |
| REAL HOSPITALITY INC | 85-3628250 | 0.01 | 4482 |
| REAL YOU PLASTIC SURGERY AND WELLNESS LLC | 88-1238837 | 0.10 | 307351 |
| REBEL PAYMENTS MOBILITY INSIGHTS | 87-1084554 | 0.27 | 557997 |
| RECEIVE CORP | 92-0887948 | 0.03 | 19801 |
| RECEPTIVE BIO INC | 93-3374453 | 0.14 | 1260082 |

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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 |
|---|---|---|---|
| RECROMAX LLC | 90-0827860 | 0.04 | 135261 |
| REDMOND FAMILY COSMETIC DENTISTRY | 91-1875786 | 0.33 | 2507896 |
| REECO TM INC | 61-2028278 | 0.15 | 129727 |
| REEVES WEISS LLP | 93-4914195 | 0.12 | 92091 |
| REFQUEST LLC | 83-0963956 | 0.03 | 400633 |
| REIN SECURITY INC | 99-3614657 | 0.02 | 12976 |
| RELIABLE ENERGY PARTNERS | 39-4752841 | 0.01 | 8917 |
| RENEWABLES F8 EMPLOYEE SERVICES LLC | 33-1711157 | 0.34 | 496814 |
| REP AI TECHNOLOGIES INC | 32-0771539 | 0.06 | 36276 |

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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 |
|---|---|---|---|
| RESILIENT ENTERPRISES INC | 99-3730024 | 0.01 | 5905 |
| RESOLUTION THERAPEUTICS US LLC | 33-2202732 | 0.05 | 35645 |
| RESTAURANT ACAPULCO LLC | 81-2568175 | 0.02 | 19201 |
| REVOLUTION RESOURCES EMPLOYEECO LLC | 82-4168589 | 0.23 | 2889652 |
| RIDGELAND HOTEL PARTNERS LLC | 20-8307962 | 0.01 | 44302 |
| RIVES CONSULT LLC | 40-0030228 | 0.04 | 41055 |
| ROCK AND SOUL FOREVER FOUNDATION INC | 20-5397606 | 0.12 | 429462 |
| ROCK SOLID EXCAVATING LAWN SERVICES LLC | 46-3799203 | 0.03 | 20586 |
| ROCKFORD COMMERCIAL WAREHOUSE INC | 01-0703702 | 0.01 | 917463 |

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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 |
|---|---|---|---|
| ROCKSTEADY CLOUD INC | 33-3113576 | 0.02 | 11010 |
| ROCKY MOUNTAIN EYE CARE ASSOCIATES LLC | 87-0544230 | 0.35 | 5043738 |
| ROCKY MOUNTAIN MEDICAL CLINIC | 99-0699257 | 0.11 | 506114 |
| ROCKY MOUNTAIN OILS LLC | 20-1441083 | 0.04 | 1174858 |
| RSC INTERNATIONAL | 27-2893233 | 0.03 | 150793 |
| RTD CONSTRUCTION INC | 59-3223426 | 0.03 | 1704378 |
| RUBY HEALTH INC | 99-3595821 | 0.01 | 8343 |
| RYFT DATA INC | 99-3989092 | 0.02 | 17040 |
| SAGES INC | 99-1600774 | 0.09 | 63397 |

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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 |
|---|---|---|---|
| SALESG LLC | 93-4339127 | 0.03 | 20852 |
| SALT LAKE FILM SOCIETY | 87-0677001 | 0.03 | 461501 |
| SALUHALL SF INC DBA SALUHALL MARKET | 92-2514194 | 0.02 | 16154 |
| SALV AI INC | 93-2459926 | 0.06 | 42089 |
| SAN ANTONIO COLLISION CENTER LLC | 82-1546298 | 0.07 | 124744 |
| SARANAC AUTO SERVICES LLC | 85-4208931 | 0.06 | 49870 |
| SATORI RAMEN BAR LTD | 83-2222926 | 0.02 | 52206 |
| SAVANNAH HOTEL PARTNERS LLC | 81-2262268 | 0.01 | 6695 |
| SEAFOLLY US LLC | 27-1078649 | 0.01 | 5086 |

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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 |
|---|---|---|---|
| SELECT SAVVY LLC | 87-0849020 | 0.09 | 78856 |
| SHAFTER MEDICAL PHARMACY LLC | 83-0485973 | 0.07 | 44727 |
| SHIFT CYBER SECURITY INC | 99-4287323 | 0.01 | 3932 |
| SHREE JALARAM BAPA ASSOCIATES LLC | 27-1314348 | 0.01 | 5797 |
| SILOBREAKER INC | 35-2844830 | 0.11 | 43845 |
| SILVER LAKE DIGITAL INC | 82-3833659 | 0.02 | 28227 |
| SITKA CREATIONS LLC | 47-5391713 | 0.01 | 11804 |
| SKY MANAGEMENT CORP | 13-3796721 | 0.07 | 403012 |
| SKYFLOW INC | 83-2138764 | 0.83 | 4403173 |

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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 |
|---|---|---|---|
| SMART BUILDING INTEGRATORS LLC | 87-1877132 | 0.06 | 54323 |
| SMARTER SYSTEMS LLC | 75-3264371 | 0.17 | 834400 |
| SMARTSCRIPT PHARMACY LLC | 46-5478128 | 0.04 | 28032 |
| SNOQUALMIE RIDGE ROA | 91-1909244 | 0.11 | 742520 |
| SOFTRAX INC | 33-2495657 | 0.57 | 1006142 |
| SOFTWARE PUBLISHERS ASSOCIATION DBA SIIA | 52-1329859 | 0.07 | 52455 |
| SOLAR WINDOW DOOR INC | 87-0484116 | 0.02 | 618555 |
| SOMERSET ADVISORY LLC | 33-3534985 | 0.05 | 138527 |
| SOUND PAIN ALLIANCE PLLC | 82-3663428 | 1.17 | 6636967 |

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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 |
|---|---|---|---|
| SOUNDINGS CONNECT LLC | 82-5019153 | 0.06 | 211806 |
| SOVEREIGN PLASTICS LLC | 84-3961456 | 0.03 | 29170 |
| SPECTRUM DYNAMICS MEDICAL INC | 46-2771701 | 0.79 | 3763315 |
| SPIRADRILL INC | 33-0080516 | 0.11 | 559193 |
| SPLASH POOLS CONSTRUCTION INC | 33-0922790 | 0.06 | 45310 |
| SPORTSMED ASSOCIATES LLC DBA ADVANCED ORTHOPEDICS | 47-2950693 | 0.10 | 2892667 |
| ST LAW OFFICE | 87-4207839 | 0.02 | 16269 |
| STAR LINE TRUCKING CORPORATION | 39-1301404 | 0.09 | 290338 |
| STEALTH TALENT SOLUTIONS INC | 99-2742306 | 0.11 | 84531 |

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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 |
|---|---|---|---|
| STEEL JAW FABRICATORS LLC | 85-1703022 | 0.01 | 58468 |
| STIGG INC | 87-1629136 | 0.10 | 214475 |
| STRATEGIC VALUE GROUP LLC | 38-3707729 | 0.03 | 502758 |
| STRIVE 2 WORK LLC | 83-1787816 | 0.01 | 6275 |
| STRUCT PRODUCTIONS LLC | 88-3034293 | 0.02 | 16506 |
| SUGARLOAF HOTEL PARTNERS LLC | 47-2509484 | 0.02 | 109666 |
| SUITE 1 ENTERPRISES | 81-3723528 | 0.04 | 81984 |
| SUMMER AESTHETICS LLC | 99-3897902 | 0.03 | 157457 |
| SUMMIT PACKAGING SOLUTIONS LLC | 81-0806773 | 0.08 | 55016 |

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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 |
|---|---|---|---|
| SUMMIZE INC | 38-4286498 | 0.17 | 133423 |
| SUNFLOWER TECHNOLOGY INC | 92-2080883 | 0.01 | 7206 |
| SUNUP SOLAR TECH SERVICES | 47-1387427 | 0.24 | 237245 |
| SUPERIOR RECRUITING AGENCY LLC | 20-4210042 | 0.08 | 390711 |
| SWEET SECURITY INC | 99-1433865 | 0.12 | 90418 |
| SWIRL WOODCRAFT INC | 84-1375636 | 0.05 | 532185 |
| T M PARTNERS LLC | 33-1732399 | 0.07 | 49445 |
| TACTICAL MARKETING AUTOMATION LLC | 82-1248284 | 0.01 | 53704 |
| TAGGART TRUCKING INC DBA TAGGART TRANSPORTATION COMPANY | 47-1620973 | 0.02 | 285830 |

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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 |
|---|---|---|---|
| TAKE CHARGE AMERICA INC | 86-0593598 | 0.15 | 5231759 |
| TALLAHASSEE HOTEL PARTNERS LLC | 81-1585666 | 0.02 | 12029 |
| TALNUA LLC DBA TALNUA DISTILLERY | 82-1945777 | 0.02 | 13963 |
| TAYLOR BUILT HOMES LLC | 81-3681972 | 0.11 | 328097 |
| TC ACQUISITION INC | 39-2912059 | 0.05 | 129864 |
| TECOSIM INC | 37-1993574 | 0.11 | 98529 |
| TEEMA INC | 01-0873614 | 0.44 | 314941 |
| TERROGENCE INC | 93-4082996 | 0.01 | 10022 |
| THE ARTEMIS CENTER FOR GUIDANCE LLC | 46-1939858 | 0.07 | 615962 |

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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 BRAND ASSEMBLY LLC | 46-2586605 | 0.09 | 585342 |
| THE COMMUNITY COMPANY INC | 46-2432443 | 0.04 | 27749 |
| THE COURTYARD OF LOVELAND LLC | 81-1437651 | 0.03 | 20317 |
| THE FELINE FIX | 26-3781322 | 0.04 | 62967 |
| THE FIRST TEE OF CHICAGO FOUNDATION | 31-1746890 | 0.01 | 241615 |
| THE FULL PICTURE LLC | 37-1606310 | 0.62 | 5778070 |
| THE GEORGIA WELLNESS GROUP INC | 46-5456475 | 0.02 | 10982 |
| THE HUSMAN GROUP DBA THE PHOENIX INSURANCE | 27-1894666 | 0.06 | 121266 |
| THE LAW OFFICES OF PATRICK J MULLANEY PC | 45-1477354 | 0.15 | 118120 |

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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 NEW TESORO CLUB | 87-2695499 | 0.02 | 40679 |
| THE SAFETY TEAM INC | 87-0598958 | 0.44 | 3648588 |
| THE SUSSMAN AGENCY | 38-2882896 | 0.03 | 24400 |
| THENELL LAW GROUP PC | 45-4378288 | 0.15 | 878298 |
| THERMOTEK SERVICES INC | 83-4597079 | 0.08 | 56951 |
| THORNTON PLUMBING AND HEATING INC | 87-0578641 | 0.27 | 1370285 |
| THRESHER ENERGY INC | 84-4801657 | 0.09 | 1254179 |
| TIESTA TEA COMPANY | 27-2523438 | 0.03 | 1471251 |
| TIMBERLANE ASSET MANAGEMENT LLC | 32-0433444 | 0.30 | 1882005 |

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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 |
|---|---|---|---|
| TIMPVIEW ASC LLC | 87-2314348 | 0.05 | 675803 |
| TITAN CEO LLC | 83-3757843 | 0.04 | 26143 |
| TMB HOLDINGS LLC | 90-0395887 | 0.03 | 319336 |
| TOKEN SECURITY INC | 92-3140605 | 0.13 | 90295 |
| TOOLS4EVER | 13-4113695 | 0.07 | 896413 |
| TOWN CENTER HOTEL PARTNERS LLC | 81-3438490 | 0.01 | 4633 |
| TOWNSHIP HOSPITALITY PARTNERS LLC | 26-2513241 | 0.01 | 5567 |
| TRACKCAM LLC | 84-3235130 | 0.08 | 61537 |
| TRIO MANAGEMENT LLC | 33-1245932 | 0.01 | 7147 |

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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 |
|---|---|---|---|
| TRISKA PSYCHOTHERAPY LCSW PLLC | 93-4777151 | 0.02 | 16621 |
| TRISTATE PAIN INSTITUTE | 26-1827801 | 0.01 | 192422 |
| TRU HOTEL PARTNERS LLC | 81-4236960 | 0.01 | 7657 |
| TS ELECTRIC INC | 87-0450180 | 0.24 | 4514149 |
| TUSCALOOSA HOTEL PARTNERS LLC DBA SPRINGHILL SUITES MARRIOTT | 46-5092913 | 0.01 | 21405 |
| TWIN RIVER GROUP | 83-2299195 | 0.04 | 57168 |
| TWINE SECURITY INC | 99-3097909 | 0.05 | 41183 |
| UCP SEGUIN OF GREATER CHICAGO FOUNDATION | 46-4332754 | 0.01 | 480927 |
| ULTRA USA INC | 33-3507609 | 0.01 | 7112 |

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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 |
|---|---|---|---|
| ULTRASIGHT INC | 30-1161961 | 0.18 | 176937 |
| ULTRASOUND SOLUTIONS CORP | 01-0785069 | 0.01 | 7004 |
| ULYSSES DEVELOPMENT GROUP LLC | 86-1382479 | 0.14 | 1780370 |
| UNFRAME INC | 99-2023774 | 0.10 | 116947 |
| UNITED GLASS SERVICE INC | 33-4770571 | 0.01 | 3673 |
| UNITED HOSPITALITY SERVICES LLC | 81-2892475 | 0.12 | 95387 |
| UPPER KEYS MARINE CONSTRUCTION LLC | 83-2241335 | 0.06 | 433603 |
| URBAN ARTS PARTNERSHIP | 13-3554734 | 0.04 | 1692680 |
| US WELLNESS INC | 52-2341882 | 0.45 | 7476977 |

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|---|---|---|---|
| USECURE INC | 61-2196818 | 0.04 | 35050 |
| UTAH TIRE HOLDINGS DBA HILLSIDE TIRE SERVICE | 87-2632832 | 0.18 | 880518 |
| VADOR VENTURES INC DBA TOTAL QUALITY BUILDING SERVICES | 52-1854495 | 0.43 | 2343880 |
| VALLEY TECHNOLOGY LLC DBA COMPLETE HEALTHCARE BUSINESS CONS | 26-3863996 | 0.09 | 271998 |
| VANTAGE POINT LOGISTICS LLC | 46-2190696 | 0.30 | 4281861 |
| VC US SERVICES LLC | 38-4322379 | 0.05 | 41674 |
| VECTA LABS | 82-1719787 | 0.06 | 56937 |
| VECTOR ENGINEERING | 20-0942400 | 0.10 | 1194942 |
| VECTOR STRUCTURAL ENGINEERING | 80-0028183 | 1.39 | 13936178 |

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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 |
|---|---|---|---|
| VECTOR STRUCTURAL ENGINEERING OF ARIZONA LLP | 81-5047429 | 0.07 | 506673 |
| VECTOR STRUCTURAL ENGINEERING OF SC LLP | 47-4322793 | 0.03 | 186109 |
| VEE INC | 36-5013512 | 0.14 | 112975 |
| VEGA SECURITY INC | 93-4645647 | 0.09 | 68386 |
| VENSICA INC | 93-4770614 | 0.04 | 51611 |
| VENTURE NORTH FUNDING DEVELOPMENT | 38-2857500 | 0.07 | 501034 |
| VERIPARK SOFTWARE US INC | 37-2088427 | 0.29 | 224180 |
| VESTECO REAL ESTATE MANAGEMENT | 82-1565221 | 0.08 | 58224 |
| VIDA MANAGEMENT TYH LLC | 92-2765035 | 0.21 | 372687 |

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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 |
|---|---|---|---|
| VIRNICH CORPORATION | 45-4357965 | 0.09 | 642915 |
| VITAL HOUSING LLC | 93-2212214 | 0.03 | 26639 |
| WA MULTIFAMILY HOUSING ASSOCIATION | 90-0077585 | 0.05 | 1424237 |
| WATER DESIGN INC | 87-0622007 | 0.24 | 2403017 |
| WAZEE STREET CAPITAL MANAGEMENT LLC | 27-3713829 | 0.04 | 895365 |
| WEFI TECHNOLOGY GROUP LLC | 83-2338819 | 0.57 | 1551915 |
| WELLGUIDE HEALTH LLC | 99-4589162 | 0.08 | 60295 |
| WESTERN STATES AUTOMATION LLC | 27-1117357 | 0.06 | 100644 |
| WESTERN STATES CRANE CONSULTING LLC | 45-3856202 | 0.01 | 134454 |

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|---|---|---|---|
| WESTLAND BATH SALES INC | 87-0340319 | 0.06 | 74457 |
| WHITE BEAR TRANSPORTATION INC | 82-1050915 | 0.01 | 30113 |
| WHW ENGINEERING LLC | 87-0423194 | 0.38 | 2674394 |
| WILKA DOWNTOWN LLC | 46-5695097 | 0.01 | 10509 |
| WINDSOR HOTEL PARTNERS LLC | 81-4010051 | 0.01 | 10365 |
| WINDY HILL HOTEL PARTNERS | 46-3562173 | 0.01 | 5443 |
| WING SECURITY INC | 35-2754861 | 0.04 | 31773 |
| WINNAI LABS INC | 51-6481595 | 0.02 | 15392 |
| WISE BUTTERFLY INC | 35-2733653 | 0.02 | 12408 |

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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 |
|---|---|---|---|
| WISHING STAR FOUNDATION | 94-3163746 | 0.03 | 32265 |
| WIZER INC | 84-2891230 | 0.05 | 39035 |
| WSC SPORTS TECHNOLOGIES INC | 83-3057835 | 0.87 | 2631776 |
| YOGI HOTEL GROUP LLC | 81-1241938 | 0.02 | 16149 |
| YSDS ART INC | 93-4542915 | 0.08 | 57917 |
| ZARAGOZA HOTEL PARTNERS LLC | 46-3793173 | 0.01 | 3930 |
| ZEBRA YOUTH INC | 27-1645847 | 0.01 | 30021 |
| ZENITY INC | 88-3040790 | 0.73 | 797700 |
| ZESTY TECH INC | 86-1806950 | 0.25 | 150984 |

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|---|---|---|---|
| ZO FINANCIAL | 85-0588816 | 0.01 | 135026 |
| ZRS WINES LLC | 84-4004925 | 0.01 | 4628 |
| 240 TECH LLC | 82-1007877 | 0.00 | 0 |
| A43 CHURCH STREET LLC | 46-0853643 | 0.00 | 0 |
| ALTITUDE CONTROL TECHNOLOGY LLC | 86-3969559 | 0.00 | 0 |
| ARDENT AI | 99-2000722 | 0.00 | 0 |
| CLASSIC FOOTBALL COMPANY US INC | 99-2640698 | 0.00 | 0 |
| GETRESPONSE INC | 81-5277653 | 0.00 | 0 |
| NCOMPASS TECHNOLOGIES INC | 36-5091911 | 0.00 | 0 |

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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 |
|---|---|---|---|
| SB SIGNS LLC | 92-1459077 | 0.00 | 0 |
| STOIC TECHNOLOGY CORPORATION DBA FORMDR | 83-1405532 | 0.00 | 0 |
| STRONG COMPUTE SERVICES CORPORATION | 99-1629329 | 0.00 | 0 |
| UNIONBRANDS LLC | 92-4015464 | 0.00 | 0 |
| VINTAGE MANAGEMENT US INC | 99-2638390 | 0.00 | 0 |
| 1MONEY TECHNOLOGIES INC | 99-3891782 | 0.10 | 0 |
| 4G44 ESPORTS INC | 83-2619226 | 0.01 | 0 |
| AMIUS AMERICAS CORP | 38-4042827 | 0.03 | 0 |
| AQUA BALANCE INC | 87-0558204 | 0.23 | 0 |

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|---|---|---|---|
| ARCHTIS US INC | 83-2038058 | 0.01 | 0 |
| ATLAS VMS INC | 92-0944878 | 0.03 | 0 |
| ATREIDES CASERI US INC | 93-1986666 | 0.04 | 0 |
| AUTIFY INC | 81-3777944 | 0.01 | 0 |
| AVIDITY EVENTS LLC | 99-4437042 | 0.04 | 0 |
| AXILION SMART MOBILITY INC | 85-3019800 | 0.01 | 0 |
| BAILEYS FURNITURE OUTLET INC | 92-0146665 | 0.19 | 0 |
| BELLROY OPERATIONS AMERICAS INC | 30-1256945 | 0.05 | 0 |
| BEREAL INC | 87-2503004 | 0.05 | 0 |

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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 |
|---|---|---|---|
| BESTICA | 16-1721345 | 0.25 | 0 |
| BRACELET USA LLC | 61-2213402 | 0.02 | 0 |
| BUILT ENVIRONMENT OPTIMISATION LLC | 30-1364668 | 0.01 | 0 |
| CACHENETWORKS LLC | 37-1488462 | 0.13 | 0 |
| CAKEWALK ENTERTAINMENT LLC | 82-2146389 | 0.02 | 0 |
| CAPITAL LINK GREEN HOLDING INC | 99-3179666 | 0.01 | 0 |
| CEM MAINTENANCE INC | 87-0389710 | 0.25 | 0 |
| CHAIZ INC | 38-4232558 | 0.01 | 0 |
| CHECKBOX SOFTWARE INC | 93-4623997 | 0.02 | 0 |

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|---|---|---|---|
| CHEQROOM USA LLC | 92-1661369 | 0.05 | 0 |
| COREBRIDGE | 84-5040066 | 0.12 | 0 |
| CORTANIX INC | 99-3726290 | 0.01 | 0 |
| CRADLE TO CRADLE PRODUCTS INNOVATION INSTITUTE INC | 27-1832830 | 0.04 | 0 |
| DALET DIGITAL MEDIA SYSTEMS USA INC | 13-3771154 | 0.22 | 0 |
| DEALCATALYST INC | 87-3613241 | 0.02 | 0 |
| DENSITRON CORPORATION COADOPTION COMPANY | 33-0222740 | 0.05 | 0 |
| DOLOMA INVESTMENT OF NORTH BRUNSWICK | 26-1828831 | 0.01 | 0 |
| DREADNODE INC | 93-3906695 | 0.11 | 0 |

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|---|---|---|---|
| DUENDE SOFTWARE LLC | 85-2486343 | 0.03 | 0 |
| ECO STOR INC | 92-3882903 | 0.01 | 0 |
| ENCAPSULITE INTERNATIONAL INC | 04-2963126 | 0.08 | 0 |
| ENTRO SECURITY INC | 92-3003203 | 0.11 | 0 |
| ENVISICS INC | 85-2845745 | 0.08 | 0 |
| EQUDIGITAL INC DBA JUMPR | 93-2235506 | 0.01 | 0 |
| ERB MANAGEMENT SERVICES | 83-3357563 | 0.24 | 0 |
| EXTRAYEAR AI | 99-2733557 | 0.08 | 0 |
| EYEPOPAI INC | 92-1905090 | 0.08 | 0 |

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|---|---|---|---|
| FIREBIRD PRODUCTS LLC | 46-1335103 | 0.03 | 0 |
| FITXR USA INC | 85-4177437 | 0.01 | 0 |
| FLASHOVER MAINTENANCE LLC | 82-0702465 | 0.01 | 0 |
| FLUID STACK INC | 36-5007834 | 0.06 | 0 |
| FORM FACTORY | 82-5178433 | 0.02 | 0 |
| FREE2MOVE NORTH AMERICA INC | 82-4806319 | 0.06 | 0 |
| FUSION SPECIALTY AMERICAS INSURANCE SERVICES LLC | 85-0829272 | 0.07 | 0 |
| GENBIOAI INC | 99-2788760 | 0.08 | 0 |
| GETTHERE LLC | 30-1010950 | 0.14 | 0 |

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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 |
|---|---|---|---|
| GITPOD INC | 85-2446507 | 0.09 | 0 |
| GLOBAL RESILIENT CITIES NETWORK | 85-0990988 | 0.03 | 0 |
| GOMBOC AI INC | 88-2277252 | 0.07 | 0 |
| GRAN INC | 91-1692888 | 0.20 | 0 |
| GRAVITY CLIMATE CO | 87-4076403 | 0.21 | 0 |
| GWEN BROOKS INSURANCE AGENCY INC | 85-1331299 | 0.03 | 0 |
| HAMINA WIRELESS INC | 93-1672560 | 0.01 | 0 |
| HAMSTER GARAGE LLC | 83-4476003 | 0.01 | 0 |
| HEADPHONES INC | 82-0658925 | 0.01 | 0 |

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## Part II Participating Employer Information (Continued).

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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 |
|---|---|---|---|
| HEIDI HEALTH CORP | 30-1414237 | 0.03 | 0 |
| HOSTAWAY US LLC | 99-4869267 | 0.21 | 0 |
| ID5 TECHNOLOGY INC | 86-3236779 | 0.19 | 0 |
| INTERMOUNTAIN LOCK AND SECURITY SUPPLY CO | 87-0283190 | 3.00 | 0 |
| JACQUEMUS LAMERIQUE LLC | 37-2121229 | 0.03 | 0 |
| JEWISH BOOK COUNCIL | 13-3737760 | 0.01 | 0 |
| KOYAL REALTY LLC OR ARCHI REALTY LLC | 87-1775411 | 0.01 | 0 |
| KUBERNETES INNOVATION LABS LLC | 86-2933032 | 0.02 | 0 |
| LAETRO INC | 85-2270431 | 0.02 | 0 |

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|---|---|---|---|
| LAUNDRYSUCKSIO INC | 83-1547288 | 0.11 | 0 |
| LAYERX SECURITY | 99-1653391 | 0.05 | 0 |
| LIGHTNING STEP TECHNOLOGIES LLC | 81-1718416 | 0.11 | 0 |
| LIMBIC INC | 38-4311296 | 0.05 | 0 |
| LOYACONA LOYACONA BUILDING CONSULTANTS | 99-2160655 | 0.01 | 0 |
| MALBEC LABS LLC | 99-4818335 | 0.06 | 0 |
| MALTEGO US INC | 30-1408625 | 0.01 | 0 |
| MAXHUB US INC | 36-5007713 | 0.07 | 0 |
| MEDIAMAX NETWORK LLC | 14-1890020 | 0.29 | 0 |

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|---|---|---|---|
| MEDIS MEDICAL IMAGING SYSTEMS INC | 43-1997910 | 0.11 | 0 |
| MEERO CORP | 35-2834683 | 0.03 | 0 |
| METHODICAL SERVICES LLC | 86-3778860 | 0.03 | 0 |
| MIDSUMMER STUDIOS INC | 93-1724996 | 0.08 | 0 |
| MISTRAL AI INC | 99-0657949 | 0.68 | 0 |
| NEAR ONE US CORP | 99-1530567 | 0.03 | 0 |
| NETSOFT HOLDINGS LLC DBA HUBSTAFF | 46-1176221 | 0.16 | 0 |
| NIX USA INC | 32-0487125 | 0.05 | 0 |
| OTTO DMS INC | 99-0679076 | 0.06 | 0 |

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|---|---|---|---|
| PAGE TECHNOLOGY INC | 99-3891094 | 0.03 | 0 |
| PAT MCGRATH COSMETICS LLC DBA PAT MCGRATH LABS | 47-3833615 | 0.05 | 0 |
| PAVE FINANCE INC | 87-1515154 | 0.01 | 0 |
| PHINYXAI | 99-0554584 | 0.01 | 0 |
| PREMIER PLASTIC SURGERY GROUP OF UTAH LLC | 20-0685493 | 0.04 | 0 |
| PRIME MOVER LLC | 99-4717728 | 0.12 | 0 |
| PURPLE APPLE LLC | 99-3558729 | 0.14 | 0 |
| QWILR INC | 36-4962615 | 0.05 | 0 |
| RATIONAL ANIMATIONS INC | 99-1838037 | 0.01 | 0 |

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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 |
|---|---|---|---|
| REDSNACK TECHNOLOGIES INC | 93-1623549 | 0.01 | 0 |
| REMO HEALTH INC PARTICIPATING EMPLOYERS | 84-2729300 | 0.19 | 0 |
| RISK LABS USA INC | 83-1325649 | 0.06 | 0 |
| RIVER RUN SOLUTIONS LLC | 88-4379442 | 0.03 | 0 |
| RUNNA | 37-2144360 | 0.05 | 0 |
| SAFE ARTIFICIAL INTELLIGENCE FORUM INSTITUTE | 93-4950919 | 0.02 | 0 |
| SCOUTBEE INC | 83-3152008 | 0.06 | 0 |
| SELECT PROPERTIES INC DBA SELECT ROW | 85-0388553 | 0.22 | 0 |
| SEM USA CORP | 30-1397815 | 0.01 | 0 |

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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 |
|---|---|---|---|
| SEQERA INC | 36-5106046 | 0.27 | 0 |
| SILENT PUSH INC | 35-2689252 | 0.10 | 0 |
| SILVER LAKE DIGITAL INC | 82-3833659 | 0.01 | 0 |
| SOURCEAG LLC | 99-4797571 | 0.01 | 0 |
| SOUTHWEST PEDIATRIC DENTISTRY AND ORTHODONTICS PC | 84-1327385 | 0.23 | 0 |
| SUMMA ADVISERS LLC | 98-1811273 | 0.06 | 0 |
| SUPERFILIATE INC | 86-2104557 | 0.02 | 0 |
| SUPERNORMAL TECHNOLOGIES INC | 85-0622629 | 0.06 | 0 |
| SWINGVISION INC | 47-4406128 | 0.08 | 0 |

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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 |
|---|---|---|---|
| SYNEX INC | 85-1393374 | 0.02 | 0 |
| SYRE INC | 47-4589510 | 0.03 | 0 |
| TANTALUM LABS LLC | 99-0972929 | 0.01 | 0 |
| TAYLOR NICOLE PROFESSIONALS INC | 46-4473966 | 0.01 | 0 |
| THE CARPENTRIES INC | 92-1581581 | 0.01 | 0 |
| THE TEA HOUSE LLC | 87-3639984 | 0.01 | 0 |
| THE WALL STREET EXPERIENCE LLC | 90-0491695 | 0.02 | 0 |
| THIRTEEN23 CORP | 22-3944732 | 0.01 | 0 |
| TOUTON USA | 75-3269092 | 0.02 | 0 |

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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 |
|---|---|---|---|
| TROOP TRAVEL INC | 87-3169821 | 0.08 | 0 |
| TYPEFORM US LLC | 82-2393796 | 0.47 | 0 |
| VAIRE COMPUTING INC | 99-1291609 | 0.07 | 0 |
| VICTOR CAPITAL PARTNERS MANAGEMENT COMPANY LP | 93-1573126 | 0.18 | 0 |
| WALR USA INC | 86-3866856 | 0.02 | 0 |
| WAYTRADE US LLC | 99-1584316 | 0.02 | 0 |
| WILDBOOM CORPORATION | 81-1119069 | 0.05 | 0 |
| XMISSION LLC | 87-0522774 | 0.18 | 0 |
| YOTTA AUTOMATED SOFTWARE SOLUTIONS INC | 87-1631475 | 0.03 | 0 |

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|---|---|---|---|
| 2077 TENANTS CORP | 22-2377986 | 0.00 | 127834 |
| 247 PACKAGING CORP | 92-0895014 | 0.00 | 31 |
| 609 PADEL LLC | 92-3998629 | 0.00 | 1163 |
| ACACIA GLASS LLC | 46-2894081 | 0.00 | 163999 |
| ADVANCED CONSTRUCTION SYSTEMS LLC | 83-4028262 | 0.00 | 11666 |
| AMERICAN PAVING | 47-2763986 | 0.00 | 26659 |
| ANUJ ASSOCIATES TN | 26-2119241 | 0.00 | 43056 |
| APT COWORK LLC | 87-3277516 | 0.00 | 2250 |
| AUTOMATED MACHINERY INC | 31-1109411 | 0.00 | 359247 |

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|---|---|---|---|
| AXIA SECURITY INC | 39-3179021 | 0.00 | 999 |
| BLANKENBAKER HOTEL PARTNERS LLC | 81-3929675 | 0.00 | 2898 |
| BNA PREMIER LODGING LLC | 99-1839514 | 0.00 | 259 |
| BRANDLIGHT INC | 37-2156974 | 0.00 | 3116 |
| BRAVO ELECTRO COMPONENTS INC | 77-0435463 | 0.00 | 408 |
| BURNT MOUNTAIN SERVICES LLC | 84-4512095 | 0.00 | 626621 |
| CASIXTY INC | 33-2786324 | 0.00 | 297 |
| CJS TACOS LLC | 82-3834134 | 0.00 | 3258 |
| CLIMATE ANALYTICS INC | 30-0795021 | 0.00 | 4427 |

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|---|---|---|---|
| CLINTON HOTEL PARTNERS LLC | 35-2418459 | 0.00 | 7918 |
| COINIS LTD | 87-2694193 | 0.00 | 5370 |
| COLORADO REGIONAL CENTER LLC | 27-0522269 | 0.00 | 190193 |
| CONSCIENCE COMMUNITY NETWORK LLC | 90-0952780 | 0.00 | 96027 |
| COVSAUGUS B LLC | 87-3063357 | 0.00 | 269 |
| CTI PROPERTIES LLC | 82-3604468 | 0.00 | 3406 |
| DAYLIGHT SECURITY INC | 33-1343409 | 0.00 | 2088 |
| DEVOTED CAREGIVERS INC | 85-2015818 | 0.00 | 742 |
| DIEL US LLC | 92-2324294 | 0.00 | 3071 |

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|---|---|---|---|
| DIGITAL ASSETS SECURITY INC | 92-3764855 | 0.00 | 336 |
| DUNPHYS EXTERMAPEST | 33-0828091 | 0.00 | 1809 |
| DWELL COMMUNITIES LLC | 47-1921574 | 0.00 | 2669 |
| ELEMENTS LANDSCAPE INC | 27-1376968 | 0.00 | 1596 |
| ELEVATION TALENT GROUP LLC | 87-4570633 | 0.00 | 115654 |
| EXECTRAS INC | 27-1846223 | 0.00 | 43555 |
| FARNSWORTH ORTHOPEDIC PHYSICAL THERAPY LLC | 86-0984365 | 0.00 | 1934 |
| FRAME INC | 33-2616644 | 0.00 | 381 |
| GLOW SECURITY INC | 33-3182329 | 0.00 | 1056 |

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|---|---|---|---|
| GNOMICA BIOTHERAPY INC | 39-2589892 | 0.00 | 5839 |
| GREENVILLE SBS HOTEL PARTNERS LLC | 20-4371440 | 0.00 | 2149 |
| HAVWOODS INTERNATIONAL INC | 35-2557770 | 0.00 | 3502 |
| HI AUTO INC | 86-3222263 | 0.00 | 1084 |
| HIO AI INC | 39-4486306 | 0.00 | 1515 |
| HUDSON CALLEJA LLC | 37-1635439 | 0.00 | 6598 |
| INGENIOUS GENERAL CONSTRUCTION CORP | 92-3371057 | 0.00 | 1705 |
| J29 7 PLANNING AND DEVELOPMENT CORPORATION | 88-4167016 | 0.00 | 1779 |
| JAZZ INC | 33-1683328 | 0.00 | 484 |

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|---|---|---|---|
| JEEN AI TECHNOLOGIES US LLC | 39-4364799 | 0.00 | 1651 |
| LENOIR CITY HOTEL PARTNERS LLC | 20-1014299 | 0.00 | 9214 |
| LINDLYS POOLS OF CALIFORNIA INC | 27-0086003 | 0.00 | 1994 |
| MARTIN PARK APARTMENTS LLC | 87-2574213 | 0.00 | 2097 |
| MATTESON HOTEL PARTNERS LLC | 35-2310640 | 0.00 | 8510 |
| MFE HOLDINGS INC DBA MOUNTAIN VIEW STEEL DETAILING | 39-3591872 | 0.00 | 3125 |
| MOBILE HOTEL PARTNERS LLC | 26-1381441 | 0.00 | 390 |
| MONTACHUSETT QUALITY MANAGEMENT LLC | 92-0615207 | 0.00 | 664 |
| MOON BLUE LLC | 93-4444785 | 0.00 | 5916 |

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|---|---|---|---|
| MORGAN HILL BOWL INC | 20-5371014 | 0.00 | 2160 |
| MOSAIC THERAPEUTICS INC | 39-4337135 | 0.00 | 2056 |
| NEWNAN HOTEL PARTNERS II LLC DBA HOLIDAY INN EXPRESS NEWNAN | 46-4928893 | 0.00 | 1531 |
| NEXTLEVEL PETCARE PLLC DBA AUBURN ANIMAL HOSPITAL | 39-2154161 | 0.00 | 1526 |
| NEXUS AI TECHNOLOGIES INC | 33-4479024 | 0.00 | 421 |
| NNP ALPHARETTA SPE LLC | 83-2367004 | 0.00 | 1021 |
| NOVARIS ENTERPRISES LLC | 33-1434994 | 0.00 | 2273 |
| NYCECITY CORP DBA SOCIETY HOUSE | 92-2988308 | 0.00 | 2673 |
| OIL AND GAS MEASUREMENT EQUIPMENT INC | 76-0574043 | 0.00 | 18159 |

**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.

## 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 |
|---|---|---|---|
| PEOPLE PLACES LLC | 90-0934263 | 0.00 | 2280 |
| PHYTOLON INC | 39-4393455 | 0.00 | 335 |
| PROPER LLC | 30-0969685 | 0.00 | 814 |
| PROVIDENCE HOTEL PARTNERS II LLC DBA HAMPTON INN HUNTSVILLE | 47-2932699 | 0.00 | 1098 |
| PUNTA GORDA HOTEL PARTNERS LLC | 81-4381683 | 0.00 | 901 |
| REDMOND RIDGE ROA | 91-2024472 | 0.00 | 2604 |
| RIGHT TOUCH DENTAL LLC | 90-0139132 | 0.00 | 85367 |
| RIPPLE CREDIT UNION | 39-0992061 | 0.00 | 39835 |
| RIVER TRACE LLC | 82-4007423 | 0.00 | 3227 |

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## Part II Participating Employer Information (Continued).

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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 |
|---|---|---|---|
| ROSS BROTHERS CONSTRUCTION | 33-0935782 | 0.00 | 2607 |
| RSIP VISION INC | 35-2622565 | 0.00 | 938 |
| SALT LAKE HOME BUILDERS ASSOCIATION | 87-0203085 | 0.00 | 16286 |
| SANFORD AND SONS MECHANICAL SERVICES | 47-4006278 | 0.00 | 632 |
| SERLIO SOFTWARE DEVELOPMENT | 73-1640392 | 0.00 | 816612 |
| SHETO | 88-2925519 | 0.00 | 161 |
| SHOEMAKER HOME SERVICES LLC | 85-0567931 | 0.00 | 1204 |
| SIMPLE A LLC | 61-1647960 | 0.00 | 618 |
| SIZZLY LLC | 99-3144529 | 0.00 | 2865 |

**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.

## 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 |
|---|---|---|---|
| SLAVIC INTEGRATED ADMINISTRATION INC | 65-0608221 | 0.00 | 51343 |
| SMART INSURANCE LLC | 84-4872681 | 0.00 | 2463 |
| STATEWAY SERVICES LLC | 80-0739271 | 0.00 | 62527 |
| STONEBROOKE EQUIPMENT INC DBA SUREFITTERS | 41-1281626 | 0.00 | 73302 |
| STRAWPLAINS HOTEL PARTNERS LLC | 20-3826029 | 0.00 | 2895 |
| TAURUS TECHNOLOGIES SOLUTIONS INC | 39-3619061 | 0.00 | 921 |
| THE ANSLEY CAPITAL GROUP | 90-1035114 | 0.00 | 238783 |
| TUPELO HOTEL ENTERPRISE DBA HAMPTON INN SUITES BARNES CROS | 26-1335004 | 0.00 | 1339 |
| UNIVERSAL BUSINESS TEAM LLC | 27-2896444 | 0.00 | 638 |

**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.

## 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 |
|---|---|---|---|
| VISUALLY LABS | 39-4133473 | 0.00 | 1271 |
| WAREHOUSE LABOR MANAGEMENT GROUP LLC | 85-1848522 | 0.00 | 2199 |
| WHITTARD OF CHELSEA INC | 38-4308573 | 0.00 | 2156 |
| WISCONSIN IPA INC | 82-0986237 | 0.00 | 96177 |
| WONDERSTRUCT LLC | 83-4499484 | 0.00 | 2715 |
| YR US MANAGEMENT LLC DBA YOUR REFORMER | 99-3945246 | 0.00 | 244 |
| | | | |
| | | | |
| | | | |

**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.

## 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 R55MBRFTU

# VENSURE RETIREMENT PLAN

## FINANCIAL STATEMENTS
## December 31, 2025 and 2024
## and for the Year Ended December 31, 2025

# VENSURE RETIREMENT PLAN

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CBIZ CPAs P.C.

3925 River Crossing Parkway Suite 100
Indianapolis, IN 46240

*P:* 317.472.2200

# Independent Auditors' Report

**Pooled Plan Provider**
**Vensure Retirement Plan**

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

We have performed the audits of the financial statements of Vensure 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 audit 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 audit need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 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 *Auditors' Responsibilities for the Audit of the Financial Statements* section:

- The amounts and disclosures in the accompanying financial statements, 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 accompanying financial statements 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 *Auditors' 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 audit. 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 within one year after the date that the financial statements are issued or available to be issued.

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

**Auditors' Responsibilities for the Audit of the Financial Statements**

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 these 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 certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

**Other Matter - Supplemental Schedules Required by ERISA**

The supplemental schedules of assets (held at end of year) and delinquent participant contributions as of and for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are 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 schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit 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 schedules 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 schedules, we evaluated whether the supplemental schedules, 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 schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are 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 schedules related to assets held by the trustee 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).

CBIZ CPAs P.C.

Indianapolis, Indiana
October 14, 2026

# VENSURE RETIREMENT PLAN
# STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
# December 31, 2025 and 2024

| | 2025 | 2024 |
|---|---|---|
| **ASSETS** | | |
| Investments, at fair value (Note 7) | $ 462,999,071 | $ 27,593,468 |
| Receivables | | |
| Notes receivable from participants | 6,716,064 | 202,767 |
| Employer contributions | 2,765,599 | 301,616 |
| Participant contributions | 1,607,633 | 411,274 |
| Other receivables | 31,289 | 1,723 |
| Total Receivables | 11,120,585 | 917,380 |
| Net Assets Available for Benefits | $ 474,119,656 | $ 28,510,848 |

See accompanying notes to financial statements.

# VENSURE RETIREMENT PLAN
# STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
# For the Year Ended December 31, 2025

| | |
|---|---|
| Additions to Net Assets Attributed to: | |
| Net appreciation in fair value of investments, including realized gains and losses | $ 32,383,636 |
| Investment income, including loan interest | 12,039,229 |
| Contributions | |
| Employer | 20,658,293 |
| Participants | 54,523,937 |
| Rollovers | 10,904,122 |
| Total Additions | 130,509,217 |
| Deductions from Net Assets Attributed to: | |
| Benefits paid to participants | 23,377,955 |
| Plan expenses | 1,533,665 |
| Total Deductions | 24,911,620 |
| Net Increase in Net Assets Available for Benefits before Transfers | 105,597,597 |
| Transfers from other qualified plans | 387,189,450 |
| Transfers to other qualified plans | (47,178,239) |
| Net Increase in Net Assets Available for Benefits | 445,608,808 |
| Net Assets Available for Benefits, Beginning of Period | 28,510,848 |
| Net Assets Available for Benefits, End of Period | $ 474,119,656 |

See accompanying notes to financial statements.

## NOTE 1 - DESCRIPTION OF PLAN

The following description of the Vensure Retirement Plan (the "Plan") provides only general information. Participants should refer to the Summary Plan Description for a more complete description of the Plan's provisions.

### General

The Plan is a pooled employer plan ("PEP") established and administered by Slavic Integrated Administration, Inc. ("Slavic" or "third-party administrator"), the Pooled Plan Provider ("PPP"), effective March 1, 2024. The Plan was established under the provisions of the Setting Every Community Up for Retirement Enhancement Act of 2019 (the "SECURE Act"). The Plan is a defined contribution plan covering eligible employees of participant employers, and is intended to qualify under Internal Revenue Code of 1986, as amended (the "IRC") sections 401(a) and 501(a). The Plan is intended to constitute a multiple employer plan, as described under IRC sections 410(a), 411, 413, and 415. Each participating employer elects their own provisions related to eligibility, contributions, notes receivable from participants, vesting, and payment of benefits. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan is administered as a PEP, as defined in section 3(43) of ERISA, in accordance with the requirements of Section 413(e) of the IRC, the regulations thereunder, and other applicable authority. A PEP allows numerous unrelated businesses of any size to participate in a single retirement plan that is managed by a PPP who must register as such with the Department of Labor ("DOL") and the Department of Treasury. The PPP is a named fiduciary of a PEP and acts as the plan administrator. The PPP has overall responsibility for the operation and administration of the Plan.

Participating employers in a PEP may have different plan provisions for their respective participating employees. Accordingly, each adopting employer executes an adoption agreement with terms and conditions specific to such employer. Employees of participating employers who are not excluded by certain provisions in the plan document may enter the Plan on various entry dates coinciding with or following the date on which those employees meet the eligibility requirements as outlined within their respective employer's adoption agreement.

### Plan Administration

Slavic has registered with the appropriate regulatory authorities to act as the PPP of the Plan and acts as the recordkeeper and third-party administrator of the Plan. Mid Atlantic Trust Company ("MATC" or "trustee") serves as the trustee of the Plan.

### Contributions

Eligible employees may contribute up to 100% of compensation of either their pre-tax or after-tax compensation, subject to the allowable limits established by the Internal Revenue Service ("IRS"). Employees may also contribute catch-up contributions upon obtaining age 50. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan and may change their fund allocation percentages at any time.

Participating employers can elect to make safe harbor contributions to the Plan on the employee's behalf, in which the employee is 100% vested in those contributions. Discretionary employer matching contributions may be made to the Plan on the employee's behalf. The match, if any, will be a discretionary percentage of the elective contributions made to the Plan by the employee. The employer will determine the amount of the discretionary matching contribution, or profit-sharing contribution, if any, that will be made to the Plan. Contributions are subject to certain limitations.

## NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

### Contributions (Continued)

Such contributions are excluded from the participant's taxable income for federal income tax purposes until received as a withdrawal from the Plan. Total participant contributions in any calendar year are limited to the applicable limit under the IRC Section 402(g). The Plan also provides that certain limitations may be imposed on participants' contributions in order to comply with statutory requirements.

### Forfeitures

Forfeited balances of terminated participants' nonvested accounts are used to reduce future employer contributions or pay Plan expenses. Forfeitures totaling $593,012 were used during the year ended December 31, 2025, to reduce employer contributions. Forfeitures available for future use were $298,926 and $6,684 as of December 31, 2025 and 2024, respectively.

### Participant Investment Account Options

The Plan currently offers various mutual funds and common collective trusts as investment options for participants. Each investment option has its own investment strategy, which can be obtained through the prospectus of the respective fund. Participants may change their investment options at any time.

### Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of (a) the participating employer's contributions and (b) Plan earnings. Allocations are based upon participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

### Notes Receivable from Participants

The plan includes provisions authorizing loans from the Plan to active eligible participants. The minimum amount of a loan shall be $1,000. The maximum amount of a participant's loan is determined by the available loan balance restricted to the lesser of $50,000 or 50% of the participant's vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined by the plan administrator. Principal and interest are paid ratably through payroll deductions.

### Vesting

Participants are immediately vested in their voluntary contributions and employer safe harbor contributions plus actual earnings thereon. Vesting of participating employer's matching contributions and discretionary contributions plus earnings thereon is based on various years of service. The vested portion of participant accounts containing discretionary employer contributions will be determined based on years of service with the employer through the date of termination of employment with the employer. The vesting schedule is determined by each adopting employer.

## NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

### Payment of Benefits

Upon termination of service, hardship, normal retirement date or age 59 1/2 a participant (or participant's beneficiary in the event of death) may elect to receive a lump-sum distribution equal to the value of the participant's vested balance or elect to have benefits paid in the form of a direct rollover to an individual retirement account or other qualified retirement plan described in Section 401(a) of the IRC. If a participant dies or terminates employment due to becoming disabled while still an employee of the Company, the full amount of the participant's account will become 100% vested.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

### Basis of Accounting

The Plan's policy is to prepare its financial statements on the accrual method of accounting.

### Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

### Investment Valuation and Income Recognition

Investments are reported at fair 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 trustee. See Note 7 for discussion of fair value measurements.

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 participating employers are recorded in the year which the employee contributions are withheld from compensation.

### Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus 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.

### Payment of Benefits

Benefits are recorded when paid.

## NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

### Administrative Expenses

Certain expenses of the Plan are paid by the PPP or participating employers and are not included in the statements of changes in net assets available for benefits. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net depreciation of fair value of investments.

## NOTE 3 - INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The PPP has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, MATC, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and supplemental schedules are complete and accurate with respect to investments:

- Investments at fair value
- Notes receivable from participants
- Net depreciation in fair value of investments
- Interest and dividends
- Interest income on notes receivable from participants
- Schedule of assets (held at end of year)

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedules.

## NOTE 4 - TAX STATUS

The PPP has adopted a volume submitter profit sharing plan with a cash or deferred arrangement ("CODA"). The volume submitter document has received an opinion letter from the IRS dated June 30, 2020, stating the Plan is qualified under Section 401(a) of the IRC. Although the Plan has not been issued an individual opinion letter and has been amended since receiving the opinion letter, the PPP believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

## NOTE 5 - PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds held by MATC. MATC, under terms of an investment contract, serves as the trustee and holds all the Plan's investment assets and executes transactions therein. MATC is the trustee as defined by the Plan and, therefore, the related transactions qualify as party-in-interest.

Slavic provides to the Plan certain accounting and administrative services for which the fees are charged to the Plan. Slavic also provides broker-related services to the Plan for which commissions are charged to the Plan.

## NOTE 6 - ADMINISTRATIVE EXPENSES

Administrative expenses paid from the Plan represent recordkeeping and professional fees, which amounted to $1,533,665 for the year ended December 31, 2025.

## NOTE 7 - 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 under Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") Topic 820 are described below:

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;
- 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 specified (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 used need to maximize the use of 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.

*Mutual funds*: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily Net Asset Value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

## NOTE 7 - FAIR VALUE MEASUREMENTS (CONTINUED)

*Common collective trusts*: Valued at the NAV of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. Participant transactions (purchases and sales) may occur daily. Were the plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

**Assets at Fair Value as of December 31, 2025**

| | Level 1 | Total |
|---|---|---|
| Mutual funds | $ 460,782,277 | $ 460,782,277 |
| Investments measured at NAV: | | |
| Common collective trust * | | 2,216,794 |
| Total assets at fair value | | $ 462,999,071 |

**Assets at Fair Value as of December 31, 2024**

| | Level 1 | Total |
|---|---|---|
| Mutual funds | $ 27,558,388 | $ 27,558,388 |
| Investments measured at NAV: | | |
| Common collective trust * | | 35,080 |
| Total assets at fair value | | $ 27,593,468 |

*In accordance with Subtopic 820-10, certain investments that were measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

## NOTE 8 - PLAN TERMINATION

Although it has not expressed any intent to do so, the PPP 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 participating employer contributions.

## NOTE 9 - RISKS, UNCERTAINTIES, AND CONCENTRATIONS

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits. At December 31, 2025 and 2024, approximately 10% and 18%, respectively, of the Plan's investments were invested in the Vanguard Total Stock Market Index Admiral Fund.

## NOTE 10 - NON-EXEMPT TRANSACTIONS

Defined contribution plans are required to remit employee contributions to the Plan as soon as they can be reasonably segregated from the employer's general assets but no later than the 15th business day of the month following the month in which the participant contributions are withheld by the employer.

Contributions amounting to $861,266 were not remitted timely to the trust during the years ended December 31, 2025 and 2024. Correction of the contributions for the year ended December 31, 2024, were completed subsequent to year-end, while corrections for the year ended December 31, 2025, were pending as of the date the audit report was available to be issued.

## NOTE 11 - SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through October 14, 2026, which is the date the financial statements were available to be issued. No significant matters were identified for disclosure during this evaluation.

# SUPPLEMENTAL SCHEDULES

# VENSURE RETIREMENT PLAN
# PLAN NUMBER 016, EIN 39-2377547
# SCHEDULE OF ASSETS (HELD AT END OF YEAR)
# FORM 5500, SCHEDULE H, LINE 4i
# December 31, 2025

| (a) | (b) Identity of issuer, borrower, lessor, or similar party | (c) Description of investments including maturity date, rate of interest, collateral, par, or maturity date | (d) Cost | (e) Current value |
|---|---|---|---|---|
| | iShares MSCI EAFE International Index K | Mutual Fund | (1) | $ 5,974,797 |
| | Fidelity International Bond Index Fund | Mutual Fund | (1) | 416,761 |
| | Franklin Small-Mid Cap Growth Fund Class | Mutual Fund | (1) | 1,933,996 |
| | Fidelity 500 Index | Mutual Fund | (1) | 37,605,536 |
| | Fidelity US Bond Index | Mutual Fund | (1) | 1,754,511 |
| | Mfs Mid Cap Value Fund CL R6 | Mutual Fund | (1) | 1,507,515 |
| | Invesco Oppenheimer Gold & Special Miner | Mutual Fund | (1) | 1,446,047 |
| | American Funds Bond Fund of America R6 | Mutual Fund | (1) | 5,147,186 |
| | American Funds Growth and Income Portfol | Mutual Fund | (1) | 7,106,409 |
| | American Funds Growth Portfolio Class R- | Mutual Fund | (1) | 4,831,743 |
| | American Funds Conservative Growth and I | Mutual Fund | (1) | 1,159,556 |
| | American Funds American Balanced R6 | Mutual Fund | (1) | 9,456,609 |
| | American Funds New Perspective R6 | Mutual Fund | (1) | 1,017,911 |
| | American Funds New World R6 | Mutual Fund | (1) | 3,283,517 |
| | Victory Nasdaq 100 Index Fund R6 Shares | Mutual Fund | (1) | 13,081,035 |
| | Vanguard Intermediate-Term Bond Index Ad | Mutual Fund | (1) | 14,001,982 |
| | Vanguard Consumer Staples Index | Mutual Fund | (1) | 4,435,333 |
| | Vanguard Explorer Adm | Mutual Fund | (1) | 714,812 |
| | Vanguard Financials Index Admiral | Mutual Fund | (1) | 862,474 |
| | Vanguard Target Retirement 2055 | Mutual Fund | (1) | 28,724,523 |
| | Vanguard Target Retirement 2050 | Mutual Fund | (1) | 35,710,673 |
| | Vanguard Target Retirement 2040 | Mutual Fund | (1) | 35,851,724 |
| | Vanguard Global Capital Cycles Fund Inve | Mutual Fund | (1) | 1,465,833 |
| | Vanguard Real Estate Index Admiral | Mutual Fund | (1) | 1,316,602 |
| | Vanguard Healthcare Index Admiral | Mutual Fund | (1) | 1,130,233 |
| | Vanguard Mid Cap Index Admiral | Mutual Fund | (1) | 3,849,045 |
| | Vanguard Information Technology Index Ad | Mutual Fund | (1) | 7,673,235 |
| | Vanguard Target Retirement 2065 Inv | Mutual Fund | (1) | 5,511,371 |
| | Vanguard Federal Money Market | Mutual Fund | (1) | 12,280,383 |
| | Vanguard Small Cap Value Index Adm | Mutual Fund | (1) | 978,769 |
| | Vanguard Small Cap Index Admiral | Mutual Fund | (1) | 5,098,195 |
| | Vanguard Target Retirement 2070 | Mutual Fund | (1) | 1,195,059 |
| | Vanguard Short-Term Inf Prot Index Admir | Mutual Fund | (1) | 48,724 |
| | Vanguard Target Retirement 2030 | Mutual Fund | (1) | 30,206,659 |
| | Vanguard Total Int'l Stock Index Admiral | Mutual Fund | (1) | 2,714,009 |
| | Vanguard Target Retirement Income | Mutual Fund | (1) | 5,827,523 |
| | Vanguard Target Retirement 2045 | Mutual Fund | (1) | 35,572,570 |
| | Vanguard Developed Market Index Adm | Mutual Fund | (1) | 5,155,981 |
| | Vanguard Total Stock Market Index Admira | Mutual Fund | (1) | 44,761,834 |
| | Vanguard Target Retirement 2035 | Mutual Fund | (1) | 27,756,717 |
| | Vanguard Target Retirement 2060 | Mutual Fund | (1) | 16,596,691 |
| | Vanguard Target Retirement 2025 | Mutual Fund | (1) | 18,642,130 |
| | Vanguard Target Retirement 2020 | Mutual Fund | (1) | 5,822,983 |
| | Vanguard Utilities Index Admiral | Mutual Fund | (1) | 1,220,808 |
| | Vanguard Value Index Admiral | Mutual Fund | (1) | 7,989,508 |
| | Vanguard High Yield Corporate Admiral | Mutual Fund | (1) | 1,942,765 |
| | Columbia Mgmt Trust Stable Govt. | Common Collective Trust | (1) | 908,713 |
| | Lincoln Stable Value Account | Common Collective Trust | (1) | 1,308,081 |
| | | | | 462,999,071 |
| * | Notes receivable from participants (interest rate range 4.25%-10.50%) | | | 6,716,064 |
| | | | | $ 469,715,135 |

* Party-in-interest as defined by ERISA

(1) Cost information may be omitted for plan assets which are participant-directed.

# VENSURE RETIREMENT PLAN
# PLAN NUMBER 016, EIN 39-2377547
# SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
# FORM 5500, SCHEDULE H, LINE 4a
# December 31, 2025

| | Participant Contributions Transferred Late to the Plan | Total That Constitute Nonexempt Prohibited Transactions | | | |
|---|---|---|---|---|---|
| | Check Here If Late Participant Loan Repayments are Included: | Contributions Not Corrected | Contributions Corrected Outside VFCP | Contribution Pending Correction in VFCP | Total Fully Corrected Under Voluntary Fiduciary Correction Program (VFCP) and Prohibited Transaction Exemption 2002-51 |
| 2025 | Yes | $ 824,372 | $ - | $ - | $ - |
| 2024 | Yes | 36,894 | - | - | - |
| | | $ 861,266 | $ - | $ - | $ - |

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

**VENSURE RETIREMENT PLAN** **PLAN # 016** **EIN # 39-2377547**

| (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 | BTMKX - iShares MSCI EAFE International Index K | | 5,974,796 |
| | Fidelity | FBIIX - Fidelity International Bond Index Fund | | 416,761 |
| | Franklin | FMGGX - Franklin Small-Mid Cap Growth Fund Class | | 1,933,996 |
| | Fidelity | FXAIX - Fidelity 500 Index | | 37,605,536 |
| | Fidelity | FXNAX - Fidelity US Bond Index | | 1,754,510 |
| | MFS | MVCKX - MFS MID CAP VALUE FUND CL R6 | | 1,507,515 |
| | Invesco | OGMIX - Invesco Oppenheimer Gold & Special Miner | | 1,446,047 |
| | Columbia | QELKQ - Columbia Mgmt Trust Stable Govt. 0 | | 908,713 |
| | Lincoln | QLSVQ - Lincoln Stable Value Account | | 1,308,081 |
| | American Funds | RBFGX - American Funds Bond Fund of America R6 | | 5,147,186 |
| | American Funds | RGNGX - American Funds Growth and Income Portfol | | 7,106,409 |
| | American Funds | RGWGX - American Funds Growth Portfolio Class R- | | 4,831,744 |
| | American Funds | RINGX - American Funds Conservative Growth and I | | 1,159,557 |
| | American Funds | RLBGX - American Funds American Balanced R6 | | 9,456,609 |
| | American Funds | RNPGX - American Funds New Perspective R6 | | 1,017,911 |
| | American Funds | RNWGX - American Funds New World R6 | | 3,283,520 |
| | Victory | URNQX - Victory Nasdaq 100 Index Fund R6 Shares | | 13,081,035 |
| | Vanguard | VBILX - Vanguard Intermediate-Term Bond Index Ad | | 14,001,982 |
| | Vanguard | VCSAX - Vanguard Consumer Staples Index | | 4,435,333 |
| | Vanguard | VEXRX - Vanguard Explorer Adm | | 714,813 |
| | Vanguard | VFAIX - Vanguard Financials Index Admiral | | 862,474 |
| | Vanguard | VFFVX - Vanguard Target Retirement 2055 | | 28,724,521 |
| | Vanguard | VFIFX - Vanguard Target Retirement 2050 | | 35,710,674 |
| | Vanguard | VFORX - Vanguard Target Retirement 2040 | | 35,851,723 |
| | Vanguard | VGPMX - Vanguard Global Capital Cycles Fund Inve | | 1,465,834 |
| | Vanguard | VGSLX - Vanguard Real Estate Index Admiral | | 1,316,602 |
| | Vanguard | VHCIX - Vanguard Healthcare Index Admiral | | 1,130,233 |
| | Vanguard | VIMAX - Vanguard Mid Cap Index Admiral | | 3,849,046 |
| | Vanguard | VITAX - Vanguard Information Technology Index Ad | | 7,673,237 |
| | Vanguard | VLXVX - Vanguard Target Retirement 2065 Inv | | 5,511,371 |
| | Vanguard | VMFXX - Vanguard Federal Money Market | | 12,280,383 |
| | Vanguard | VSIAX - Vanguard Small Cap Value Index Adm | | 978,769 |
| | Vanguard | VSMAX - Vanguard Small Cap Index Admiral | | 5,098,195 |
| | Vanguard | VSVNX - Vanguard Target Retirement 2070 | | 1,195,058 |
| | Vanguard | VTAPX - Vanguard Short-Term Inf Prot Index Admir | | 48,723 |
| | Vanguard | VTHRX - Vanguard Target Retirement 2030 | | 30,206,659 |
| | Vanguard | VTIAX - Vanguard Total Int'l Stock Index Admiral | | 2,714,008 |
| | Vanguard | VTINX - Vanguard Target Retirement Income | | 5,827,523 |
| | Vanguard | VTIVX - Vanguard Target Retirement 2045 | | 35,572,569 |
| | Vanguard | VTMGX - Vanguard Developed Market Index Adm | | 5,155,981 |
| | Vanguard | VTSAX - Vanguard Total Stock Market Index Admira | | 44,761,832 |
| | Vanguard | VTTHX - Vanguard Target Retirement 2035 | | 27,756,716 |
| | Vanguard | VTTSX - Vanguard Target Retirement 2060 | | 16,596,689 |
| | Vanguard | VTTVX - Vanguard Target Retirement 2025 | | 18,642,130 |
| | Vanguard | VTWNX - Vanguard Target Retirement 2020 | | 5,822,983 |
| | Vanguard | VUIAX - Vanguard Utilities Index Admiral | | 1,220,808 |
| | Vanguard | VVIAX - Vanguard Value Index Admiral | | 7,989,508 |
| | Vanguard | VWEAX - Vanguard High Yield Corporate Admiral | | 1,942,766 |
| | Loan | 4.25% - 10.50% | | 6,716,064 |

//classification/confidential