# 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:
- [X] the first return/report
- [ ] the final return/report
- [X] 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
PR SECURE RETIREMENT PEP

**1b** Three-digit plan number (PN) ▶ 319

**1c** Effective date of plan 01/01/2025

**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)
NPPG PLAN PROFESSIONALS, LLC

494 SYCAMORE AVENUE
SUITE 100
SHREWSBURY, NJ 07702

**2b** Employer Identification Number (EIN) 85-3213245

**2c** Plan Sponsor's telephone number 732-758-1577

**2d** Business code (see instructions) 561110

**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. | 10/16/2026 | JOHN SAMPLE |
| | **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:<br>**a** Sponsor's name<br>**c** Plan Name | **4b** EIN<br>**4d** PN | |

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 0 |
| **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)** | 0 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 1020 |
| **b** | Retired or separated participants receiving benefits | **6b** | 20 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 210 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 1250 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 3 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 1253 |
| **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)** | 789 |
| **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)** | 801 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested. | **6h** | 6 |
| **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 2G 2F 2S 2T 2W 3C

**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)** | [X] Insurance | **(1)** | [X] 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)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

**b General Schedules**

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

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

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

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

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

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

Receipt Confirmation Code_____

# SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Insurance Information

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

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

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

OMB No. 1210-0110

**2025**

**This Form is Open to Public Inspection**

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

**A** Name of plan
PR SECURE RETIREMENT PEP

**B** Three-digit plan number (PN) ▶ 319

**C** Plan sponsor's name as shown on line 2a of Form 5500
NPPG PLAN PROFESSIONALS, LLC

**D** Employer Identification Number (EIN)
85-3213245

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

**1** Coverage Information:

**(a)** Name of insurance carrier
TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY

| (b) EIN | (c) NAIC code | (d) Contract or identification number | (e) Approximate number of persons covered at end of policy or contract year | Policy or contract year | |
|---|---|---|---|---|---|
| | | | | (f) From | (g) To |
| 39-0989781 | 70688 | 987(299,320,570 | | 01/01/2025 | 12/31/2025 |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

## Part II Investment and Annuity Contract Information

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

| | | | |
|---|---|---|---|
| 4 | Current value of plan's interest under this contract in the general account at year end | 4 | 64960 |
| 5 | Current value of plan's interest under this contract in separate accounts at year end | 5 | |

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☒ other (specify) ▶ STABLE VALUE OPTION

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

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

## Part III Welfare Benefit Contract Information

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

**8** Benefit and contract type (check all applicable boxes)

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

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

Specify nature of costs.

## Part IV Provision of Information

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

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

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<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
PR SECURE RETIREMENT PEP

**B** Three-digit plan number (PN) ▶ 319

**C** Plan sponsor's name as shown on line 2a of Form 5500
NPPG PLAN PROFESSIONALS, LLC

**D** Employer Identification Number (EIN)
85-3213245

## 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

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

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

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

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

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

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

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

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

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

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

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

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

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

FUTURE CAPITAL

1110 MARKET STREET, SUITE 402
CHATTANOOGA, TN 37402

| (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? |
|---|---|---|---|---|---|---|
| 26 | INVESTMENT ADVISOR | 32453 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

NPPG RECORD KEEPING SOLUTIONS

494 SYCAMORE AVENUE SUITE 100
SHREWSBURY, NJ 07702

| (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 | RECORDKEEPER | 25105 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

TRANSAMERICA LIFE INSURANCE COMPANY

39-0989781

| (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? |
|---|---|---|---|---|---|---|
| 51 | INVESTMENT MANAGER | 8937 | Yes [ ] No [X] | 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
PR SECURE RETIREMENT PEP

**B** Three-digit plan number (PN) ▶ 319

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
NPPG PLAN PROFESSIONALS, LLC

**D** Employer Identification Number (EIN)
85-3213245

**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: AEGON BALANCED RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-119 | P | 9618 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AEGON CASH RESERVE RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-060 | P | 25003 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AEGON US HIGH YIELD RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-508 | P | 14 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS EUROPACIFIC GROWTH R

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-068 | P | 53469 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS FUNDAMENTAL INVESTOR

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-009 | P | 570087 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS BALANCED INV OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-026 | P | 6735 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS GROWTH FUND OF AMERI

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE 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) |
|---|---|---|
| 39-0989781-250 | P | 379705 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS NEW PERSPECTIVE RET

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-259 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 25465 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FUNDS SMALLCAP WORLD RET O

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-069 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2077 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: BNY MELLON DYNAMIC VALUE INV OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-010 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18084 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY ADVISOR LEVERAGED COMPANY

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-247 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 302 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FRANKLIN MUTUAL SHARES INV OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-017 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 60686 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO AMERICAN VALUE RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-357 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7144 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO COMSTOCK RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-581 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 100794 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO DISCOVERY MID CAP GROWTH RE

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-253 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3127 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO MAIN STREET MID CAP RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-245 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3043 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: JANUS HENDERSON TRITON RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-583 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13258 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA ASSET ALLOCATION - CON

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-052 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 22377 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA ASSET ALLOCATION - MOD

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-054 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 148325 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA ASSET ALLOCATION - MOD

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-053 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 43875 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA INTL FOCUS RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-083 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 281133 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2035 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-050 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2040 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-112 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9620 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2045 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-051 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29296 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2050 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-113 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27095 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2055 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-505 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28364 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA LIFEGOAL 2060 WITH BLA

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-612 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES BOND RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-150 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES INVESTMENT GRADE BOND

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-086 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 355899 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MFS INTL DIVERSIFICATION

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-665 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 92507 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: NUVEEN REAL ESTATE SECURITIES RET O

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-075 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 314 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: ROYCE SMALL-CAP VALUE RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-479 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13386 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: STATE STREET RUSSELL SMALL CAP INDE

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-033 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 132326 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TA VANGUARD INTERNATIONAL VALUE RET

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-097 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54796 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TEMPLETON GLOBAL BOND RET OPT

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-313 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1008 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: THORNBURG SMALL MID/CAP GROWTH RET

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-095 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7378 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA ASSET ALLOCATION - GRO

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-055 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 76058 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA PARTNERS HIGH YIELD BO

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-434 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31235 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TRANSAMERICA SMALL/MID CAP VALUE RE

**b** Name of sponsor of entity listed in (a): TRANSAMERICA LIFE INSURANCE COMPANY

| **c** EIN-PN 39-0989781-093 | **d** Entity code P | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19870 |
|---|---|---|

**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
PR SECURE RETIREMENT PEP

**B** Three-digit plan number (PN) ▶ 319

**C** Plan sponsor's name as shown on line 2a of Form 5500
NPPG PLAN PROFESSIONALS, LLC

**D** Employer Identification Number (EIN)
85-3213245

## 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 | 0 | 2249742 |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | 0 | 140133 |
| **(2)** Participant contributions | 1b(2) | 0 | 61631 |
| **(3)** Other | 1b(3) | 0 | 6716 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | 498885 |
| **(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) | 0 | 261467 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 0 | 391265 |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | 0 | 2653285 |
| **(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) | | 26847639 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | 64960 |
| **(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 | 0 | 33175723 |
| **Liabilities** | | | |
| **1g** Benefit claims payable | 1g | 0 | 3820 |
| **1h** Operating payables | 1h | | |
| **1i** Acquisition indebtedness | 1i | | |
| **1j** Other liabilities | 1j | | |
| **1k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 0 | 3820 |
| **Net Assets** | | | |
| **1l** Net assets (subtract line 1k from line 1f) | 1l | 0 | 33171903 |

## 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) | 436801 | |
| **(B)** Participants | 2a(1)(B) | 521882 | |
| **(C)** Others (including rollovers) | 2a(1)(C) | 0 | |
| **(2)** Noncash contributions | 2a(2) | | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 958683 |
| **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) | 4394 | |
| **(F)** Other | 2b(1)(F) | 973 | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 5367 |
| **(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) | 360911 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 360911 |
| **(3)** Rents | 2b(3) | | |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 0 |
| **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | | |
| **(B)** Other | 2b(5)(B) | | |
| **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | 0 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | 865957 |
| c Other income | 2c | | 2603 |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 2193521 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 423602 | |
| (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) | | 423602 |
| f Corrective distributions (see instructions) | 2f | | 3820 |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | 589 |
| h Interest expense | 2h | | |
| i Administrative expenses: | | | |
| (1) Salaries and allowances | 2i(1) | | |
| (2) Contract administrator fees | 2i(2) | 25107 | |
| (3) Recordkeeping fees | 2i(3) | | |
| (4) IQPA audit fees | 2i(4) | | |
| (5) Investment advisory and investment management fees | 2i(5) | 44056 | |
| (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) | | 69163 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 497174 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 1696347 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 31475556 |
| (2) From this plan | 2l(2) | | |

## 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: TEMPLETON & COMPANY **(2)** EIN: 14-1918990

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

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

## Part IV Compliance Questions

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

During the plan year:

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

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

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

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

| **5b(1)** Name of plan(s) | **5b(2)** EIN(s) | **5b(3)** PN(s) |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

**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
PR SECURE RETIREMENT PEP

**B** Three-digit plan number (PN) ▶ 319

**C** Plan sponsor's name as shown on line 2a of Form 5500
NPPG PLAN PROFESSIONALS, LLC

**D** Employer Identification Number (EIN)
85-3213245

## 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** 0

**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): 66-0259436

**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 ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

| SCHEDULE MEP (Form 5500) | MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and Section 6058(a) of the Internal Revenue Code (the Code)<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<br>PR SECURE RETIREMENT PEP | **B** Three-digit Plan number (PN)..... ▶ 319 |
| **C** Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF<br>NPPG PLAN PROFESSIONALS, LLC | **D** Administrator's EIN<br>85-3213245 |

## 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 |
|---|---|---|---|
| PRS/3RD MILLENNIUM GENETICS, LLC. | 66-0660553 | 0.92 | 288939 |
| **2a** Name of Participating Employer | **2b** EIN | **2c** Percentage of Total Contributions for the Plan Year | **2d** Aggregate Account Balances Attributable to Participating Employer |
| PRS/FONDO PARA EL FOMENTO DE LA INDUSTRIA LECHERA | 66-0220036 | 5.44 | 5139275 |

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

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

## Part II Participating Employer Information (Continued).

**Use this page for additional participating employer information.**

**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 |
|---|---|---|---|
| PRS/INDUSTRIA LECHERA DE PUERTO RICO UNION | 66-0211588 | 10.47 | 2156867 |
| PRS/INDUSTRIA LECHERA DE PUERTO RICO NON-UNION | 66-0211588 | 14.36 | 5054400 |
| PRS/PEP, LLC | 27-2338605 | 0.02 | 261590 |
| PRS/BOGART CAPITAL SERVICES, LLC | 66-0862286 | 2.12 | 368419 |
| PRS/GENCO GENERAL CONTRACTORS OF PUERTO RICO CORP. | 66-0672388 | 1.08 | 340664 |
| PRS/SAN PABLO DEVELOPERS, INC. | 66-0493660 | 2.82 | 1635721 |
| PRS/CCALA CORP. | 66-0714742 | 0.84 | 164695 |
| PRS/CORPORACION LA FONDITA DE JESUS | 66-0426787 | 0.80 | 427072 |
| PRS/DDD GROUP, LLC | 66-0559319 | 1.51 | 835087 |

**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 |
|---|---|---|---|
| PRS/EAGLE TRUCK & PART, INC. | 66-0520747 | 0.40 | 668275 |
| PRS/EMI EQUITY MORTGAGE, INC. | 66-0427030 | 5.92 | 2361960 |
| PRS/FACEBANK INTERNATIONAL CORP. | 66-0677267 | 5.80 | 1392917 |
| PRS/HISPANIC FEDERATION, INC. | 13-3573852 | 2.10 | 375654 |
| PRS/ITA INTERNATIONAL FINANCIAL SERVICES CORP. | 66-0901562 | 1.39 | 179534 |
| PRS/J C AUTOMATION, CORP. | 66-0646003 | 17.15 | 1530223 |
| PRS/MANAGEMENT AND TECHNICAL CONSULTING GROUP, INC. | 66-0390448 | 0.35 | 124699 |
| PRS/MANHEIM CARIBBEAN SUBASTA DE AUTOS | 58-2584571 | 3.14 | 752693 |
| PRS/MARTEL COMMUNICATIONS CONTRACTORS, INC. | 66-0371699 | 3.94 | 896312 |

**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 |
|---|---|---|---|
| PRS/PM SOLUTIONS, LLC | 66-0920035 | 0.66 | 44641 |
| PRS/ORISE INC. | 06-1617908 | 2.49 | 2742460 |
| PRS/R & H PRODUCTS OF PUERTO RICO, INC. | 66-0432232 | 0.58 | 432491 |
| PRS/REFRIGERAMA, INC. | 66-0228816 | 8.52 | 1127710 |
| PRS/SAGENT PHARMACEUTICALS | 20-5522946 | 0.11 | 995309 |
| PRS/SAINT FRANCIS SCHOOL | 66-0327985 | 2.54 | 952849 |
| PRS/STAR ELECTRICAL SERVICES & GENERAL SUPPLIES, INC. | 92-0086879 | 1.98 | 604347 |
| PRS/UCB HOLDINGS, INC | 13-3010020 | 0.00 | 616533 |
| PRS/GLOBAL CAPITAL CONSULTING LLC | 66-0914092 | 1.90 | 694545 |

**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 |
|---|---|---|---|
| PRS/EVENT NETWORK | 66-0220116 | 0.39 | 3594 |
| PRS/APTIMA, INC. | 04-3281859 | 0.24 | 1896 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

**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 R36LI2UFI

# PR SECURE RETIREMENT PEP

## REPORT ON AUDIT OF FINANCIAL STATEMENTS

### AS OF AND FOR THE YEAR ENDED DECEMBER 31, 2025

# PR SECURE RETIREMENT PEP

## Table of Contents


| | Page |
|---|---|
| Independent auditor's report | 1–3 |
| Financial statements: | |
| Statement of net assets available for benefits | 4 |
| Statement of changes in net assets available for benefits | 5 |
| Notes to financial statements | 6 –13 |
| Supplemental schedules: | |
| Schedule H, line 4i – schedule of assets (held at end of year) | 14 –19 |

# Independent Auditor's Report

To the Plan Administrator and Those Charged with Governance
PR Secure Retirement PEP
Shrewsbury, New Jersey

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

We have performed an audit of the accompanying financial statements of PR Secure Retirement PEP (the PEP), 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 statement of net assets available for benefits as of December 31, 2025, and the related statement of changes in net assets available for benefits for the year then ended, 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 (qualified institution), provided that the statements or information regarding assets so held are prepared and certified to by the qualified institution, in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained certifications from qualified institutions as of 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 on the Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report:

- The amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).
- The information in the accompanying financial statements related to assets held by and certified to by the qualified institutions 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 on the Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our 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 U.S. GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

## Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of U.S. GAAP.

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 U.S. GAAP.

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

## Supplemental Information Required by ERISA

The supplemental information of Schedule H, line 4i – schedule of assets (held at end of year), as of December 31, 2025, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental information, 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 information 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 information, we evaluated whether the supplemental information, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

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

Templeton & Company, LLP

Fort Lauderdale, Florida
October 15, 2026

# PR SECURE RETIREMENT PEP

## STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
## December 31, 2025

### ASSETS

| | |
|---|---|
| Non interest-bearing cash | $ 2,249,742 |
| Investments: | |
| Investments, at fair value | 30,391,074 |
| Investment, at contract value | 64,960 |
| Total investments | 30,456,034 |
| Receivables: | |
| Notes receivable from participants | 261,467 |
| Participant contributions | 61,631 |
| Employer contributions | 140,133 |
| Other receivables | 6,714 |
| Total receivables | 469,945 |
| Total assets | 33,175,721 |

### LIABILITIES AND NET ASSETS AVAILABLE FOR BENEFITS

| | |
|---|---|
| Liabilities: | |
| Refunds payable for excess contributions | 3,820 |
| Net assets available for benefits | $ 33,171,901 |

See accompanying notes to financial statements.

## PR SECURE RETIREMENT PEP

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

| | |
|---|---|
| Additions to net assets attributed to: | |
| Investment income: | |
| Net appreciation in fair value of investments | $ 865,955 |
| Dividends, interest and other income | 364,487 |
| Total investment income | 1,230,442 |
| Interest income on notes receivable from participants | 4,394 |
| Contributions: | |
| Participants | 521,882 |
| Employer | 436,801 |
| Total contributions | 958,683 |
| Total additions | 2,193,519 |
| Deductions from net assets attributed to: | |
| Benefits paid to participants | 428,011 |
| Administrative expenses | 69,163 |
| Total deductions | 497,174 |
| Change in net assets before plan transfers | 1,696,345 |
| Plan transfers: | |
| Transfers in from other qualified plans | 31,475,556 |
| Change in net assets | 33,171,901 |
| Net assets available for benefits: | |
| Beginning of year | - |
| End of year | $ 33,171,901 |

See accompanying notes to financial statements.

# PR SECURE RETIREMENT PEP

# NOTES TO FINANCIAL STATEMENTS

## Note 1 – Description of Plan

The following description of the PR Secure Retirement PEP (the Plan or PEP) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was established on January 1, 2025 as a pooled employer plan (PEP) defined contribution plan administered by NPPG Plan Professionals, LLC as the pooled plan provider (PPP). The PEP was established to provide retirement benefits to eligible employees of unrelated employers in Puerto Rico that adopt the Plan (Participating Employers). covering eligible employees of the Participating Employers and is intended to qualify under Section 1081.01 of the Puerto Rico Internal Revenue Code of 2011, as amended (the PR Code). The PEP allows any affiliated or unaffiliated employer, as defined, to participate in the PEP. Each Participating Employer elects its own provisions related to eligibility, contributions, notes receivable from participants, and payment of benefits. The PEP is subject to the applicable provisions of the Employee Retirement Security Income Act of 1974 (ERISA).

The Plan is administered as a pooled employer plan (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 with the Department of Labor (DOL) and the Department of Treasury. The PPP has overall responsibility for the operation and administration of the Plan.

Participating Employers in a PEP 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 dates coinciding with or following the date on which those employees meet eligibility requirements outlined within their respective Participating Employer's adoption agreement.

Oriental Bank, San Juan, Puerto Rico, serves as Trustee under a master trust agreement. Plan assets are held by Mid Atlantic Trust Company (MATC) and Transamerica Life Insurance Company (Transamerica) are the Custodians of the Plan's investment assets, process transactions and maintained participant records. NPPG serves as the third-party administrator and handles the recordkeeping for the PEP.

Eligibility

Only employees specifically designated as eligible by their Participating Employers in its adoption agreement are eligible to participate in the PEP. Participating Employers may define eligibility requirements based on factors such as age, service or employee type. Eligible employees shall be eligible to make participant contributions and receive allocations of employer contributions if and to the extent specified in the applicable adoption agreement or otherwise provided by the PEP.

SECURE Act 2.0

In December 2022, the Securing a Strong Retirement Act (SECURE Act 2.0) was passed into law. The provisions of SECURE Act 2.0 continue the reforms that began with the 2019 SECURE Act. Most of the SECURE Act 2.0 provisions became effective in 2024 and subsequent years. Since the provisions include both required and optional elements, the Plan Administrator will determine the optional SECURE Act 2.0 provisions to elect.

## Note 1 – Description of Plan, Continued

Contributions

Each year, participants may voluntarily contribute an amount of annual eligible compensation, as elected by their Participating Employer, within the limits prescribed by the PR Code. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan.

The Participating Employers in the Plan may elect automatic enrollment and escalation features. Accordingly, the Participating Employer will automatically withhold a defined percentage of an eligible participant's compensation based on the Participating Employer's adoption agreement, unless the participant affirmatively opts out. A Participating Employer may make safe harbor matching, discretionary profit-sharing, and discretionary matching contributions at an amount determined in accordance with the formula specified in the adoption agreement, if so elected. Participating Employer contributions, if any, are recorded in the year for which the contributions apply. Aggregate Participating Employer contributions for the year ended December 31, 2025 totaled $436,801. Participating Employer contributions are allocated only to participants of the contributing employer.

Participant accounts

Each participant's account is credited with the participant's contributions, the respective Participating Employer's contributions, if any, and Plan earnings or losses. Participants are charged with an allocation of administrative expenses. Participants may direct their account balance into various investment options offered by the PEP. Allocations are based on participant earnings or losses, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their elective deferrals, catch-up contributions, voluntary employee contributions and rollover contributions, plus actual earnings thereon. Vesting in Participating Employer nonelective and matching contributions is based on years of service under the schedule elected in the adoption agreement. A participant becomes 100% vested upon attaining normal retirement age (the later of age 65 or the fifth anniversary of Plan participation) or early retirement age (age 55) while employed, and upon death or disability while employed. Vesting schedules range from immediate to five-year graded vesting schedules. Participants become fully vested upon reaching normal retirement age (65), death, or disability.

Forfeitures

Forfeited nonvested accounts can be used to pay administrative expenses and to reduce future employer contributions. During the year ended December 31, 2025, forfeitures totaling $3,314 were used to offset Participating Employer contributions and pay administrative expenses. At December 31, 2025, forfeited nonvested accounts totaled $104,198.

Notes receivable from participants

Plan participants are permitted to borrow from their account a minimum of $1,000 and up to a maximum equal to the lesser of $50,000 or 50% of the participant's vested account balance. Loan terms range from one to five years unless the loan is used to acquire a principal residence of the participant which must be repaid in a reasonable period of time not to exceed thirty years. Loans are secured by the vested account balance in the participant's account, and bear interest at the prime rate plus 1%. A participant may only have one (1) loan outstanding at any time. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the Plan document. Principal and interest are repaid through regular payroll deductions.

## Note 1 – Description of Plan, Continued

Payment of benefits

Upon termination of employment, retirement, disability or death, a participant or beneficiary may elect to receive the vested account balance as a single lump-sum cash payment, in substantially equal installments over a period not exceeding the participant's life expectancy or the joint life expectancy of the participant and beneficiary, or in partial withdrawals. Distributions are made in cash only. Vested balances of $7,000 or less are distributed in a lump sum without participant consent. Participants who have attained age 59½, have participated in the Plan for at least five years and are fully vested may take in-service distributions of amounts that have accumulated in the Plan for at least two years. Hardship distributions of pre-tax elective deferrals are permitted for the immediate and heavy financial needs defined in the Plan, and a participant who receives a hardship distribution may not make elective deferrals or voluntary contributions for the following 12 months. Distributions to Puerto Rico residents are subject to Puerto Rico income tax withholding at the rates prescribed by the PR Code. Direct rollovers are permitted to qualified retirement plans and individual retirement accounts maintained in Puerto Rico.

Plan administration

The PPP has registered with the appropriate regulatory authorities to act as the pooled plan provider of the Plan and retained National Professional Planning Group, Inc. (NPPG) to serve as third-party administrator and record-keeper. Additionally, certain Participating Employers may utilize their own investment advisory firms, as defined and approved by the PPP. The Plan's Oriental Bank and has arrangements with Transamerica Life Insurance Company (Transamerica) for custodial services and Mid Atlantic Trust Company (MATC).

## Note 2 – Summary of Significant Accounting Policies

Basis of accounting

The accompanying financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Investment valuation and income recognition

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

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

Non-interest-bearing cash

The Plan's short-term investments consist of uninvested cash held by the Trustee and are considered to be cash equivalents, recorded at cost, which approximates fair value.

Contributions

Contributions from Plan participants are recorded when withheld from compensation. Employer contributions are recorded in the period in which they become obligations of the respective Participating Employer.

## Note 2 – Summary of Significant Accounting Policies, Continued

Use of estimates

The preparation of financial statements in accordance with U.S. GAAP requires the PPP management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and changes in net assets and disclosure of contingent assets and liabilities. Actual results could differ from those estimates, and those differences may be material.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual method. Related fees are charged directly to the borrowing participants' accounts and included as administrative expenses when incurred. No allowance for doubtful collection has been recorded as of December 31, 2025. If a participant ceases to make scheduled repayments and the Plan Administrator deems the participant note receivable to be in default, the note receivable is reduced and a benefit payment recorded.

Payment of benefits

The Plan records benefits when paid.

Risks and uncertainties

The Plan provides for various investment options. Investment securities are exposed to various risks, such as interest rate risk, market risk, liquidity risk and credit risk. Due to the level of risk associated with certain investment securities, including the uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in such risks in the near term would materially affect participants' account balances and the amounts reported in the financial statements.

Concentrations

For the year ended December 31, 2025, 3 Participating Employers individually comprised more than 10% of total contributions and in the aggregate comprised approximately 42% of total contributions.

Administrative expenses

Reasonable expenses of the Plan, including custodian, attorneys, advisors, fiduciaries, and service providers are paid by the Plan, unless otherwise paid by the PPP or the Participating Employers. Expenses that are paid by the PPP or the Participating Employers are excluded from these financial statements. Investment advisor fees are paid from the Plan. Expenses paid by the Plan are included in administrative expenses on the accompanying statement of changes in net assets available for benefits. Fees related to the administration of notes receivable from participants are charged directly to participants' accounts and are also included in administrative expenses. Additionally, certain investment-related expenses are included in net appreciation in fair value of investments.

Uncertain tax positions

U.S. GAAP requires the Plan to assess its uncertain tax positions for the likelihood they would be overturned upon examination by taxing authorities. In accordance with this guidance, the Plan has determined it does not have any positions at December 31, 2025, that it would be unable to substantiate.

## Note 3 – Certified Investment Information

The PEP Administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Transamerica Life Insurance Company, Oriental Bank, and Mid Atlantic Trust Company, qualified institutions, have certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental information is complete and accurate:

- Investments, non-interest bearing cash, and notes receivable from participants as shown on the statement of net assets available for benefits as of December 31, 2025;
- Net investment activity and interest income on notes receivable from participants as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025; and
- Investment information included in the Schedule H, line 4i – schedule of assets (held at end of year) as of December 31, 2025, as shown on the ERISA-required supplemental schedule.

At the request of the Plan's Administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified information to the related investment information included in the financial statements, including reading the disclosures related to the investment information to assess whether they are in accordance with the presentation and disclosure requirements of U.S. GAAP, and in the ERISA-required supplemental information, including assessing whether the supplemental information is in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

## Note 4 – Fair Value Measurements

Accounting guidance provides a framework for measuring fair value and 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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

| | |
|---|---|
| Level 1 | Unadjusted quoted prices for identical, unrestricted assets or liabilities in active markets that a plan has the ability to access. |
| Level 2 | 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; and inputs that are derived principally from or corroborated by observable market data by correlation or other means for substantially the full term of the assets or liabilities. |
| Level 3 | Significant unobservable inputs. |

A financial investment 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. There have been no changes in the methodology used at December 31, 2025. During the year ended December 31, 2025, there were no transfers of financial instruments into or out of Level 3.

## Note 4 – Fair Value Measurements, Continued

Following is a description of the value methodology used for assets measured at fair value:

*Pooled separate accounts* – valued at net asset value (NAV) based upon the units of such pooled separate accounts held by the Plan at year-end multiplied by the respective unit value. The unit values of the pooled separate accounts are based upon significant observable inputs but are not based upon quoted market prices in an active market and are therefore considered Level 2 investments within the fair value hierarchy.

*Money market funds* – valued at the NAV of $1. This NAV is a quoted price in an active market; thus these investments are classified within Level 1 of the fair value hierarchy.

*Mutual funds* – valued at quoted market prices, which represent their daily net asset value (NAV) reported by the fund. Mutual funds held by the PEP are open-end mutual funds that are traded on national exchanges (active markets).

*Exchange trade funds* – valued at quoted market prices, which represent their daily net asset value (NAV) reported by the fund.

*Collective investment trust funds (CIT)* – valued daily at the net asset value (NAV) of units held. The NAV, as provided by the trustee of the CIT, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the CIT less its liabilities. This practical expedient would not be used when it is determined to be probable that the CIT will sell for an amount different from the reported NAV. The CIT provides for daily redemptions by the Plan at reported NAV with no advance notice. There are no unfunded commitments related to this investments. Participant transactions (purchases and sales) may occur daily at NAV. This is a direct filing entity.

The preceding method described may produce a fair value calculation which may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation method is appropriate and consistent with other market participants, the use of a different methodology or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's investments measured at fair value, on a recurring basis, as of December 31, 2025.

| | Level 1 | Level 2 | Level 3 | Total |
|---|---|---|---|---|
| Mutual funds | $ 26,777,842 | $ - | $ - | $ 26,777,842 |
| Pooled separate accounts | - | 2,653,285 | - | 2,653,285 |
| Money market funds | 494,520 | - | - | 494,520 |
| Exchange trade funds | 74,162 | - | - | 74,162 |
| Collective investment trust funds* | - | - | - | 391,265 |
| Investments, at fair value | $ 27,346,524 | $ 2,653,285 | $ - | $ 30,391,074 |

## Note 5 – Guaranteed Investment Contract with Insurance Company

The PEP invests in a fully benefit-responsive investment contract issued by Transamerica (the issuer). The contract is guaranteed by Transamerica with a reported contract value of $64,960 at December 31, 2025. The contributions are maintained in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Transamerica is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the PEP. The effective rate of interest is set semi-annually and effective as of the first day of the semi-annual period.

## Note 5 – Guaranteed Investment Contract with Insurance Company, Continued

The effective rate of interest is established every January 1 and July 1 and is based on the daily balance, at a rate that is the daily equivalent of the effective annual rate of interest applicable for the six-month period. There is no stated minimum or maximum interest rate. The contract does not permit Transamerica to terminate the agreement prior to the scheduled maturity date.

The contract meets the fully benefit-responsive investment criteria and, therefore, is reported at contract value. Contract value is the relevant measurement for fully benefit-responsive investment contracts because it is the amount received by participants if they were to initiate permitted transactions under the terms of the PEP. Contract value, as reported to the PEP by Transamerica, represents contributions made under the contract, plus earnings, less participant withdrawals and expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

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

Certain events limit the ability of the PEP to transact at contract value with Transamerica. Such events include amendments to the PEP documents (including complete or partial plan termination or merger with another plan), changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, bankruptcy of the plan sponsor or other plan sponsor events that cause a significant withdrawal from the Plan, the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA or premature termination of the contract. PEP management does not believe any events are probable of occurring that might limit the ability of the PEP to transact at contract value with the contract issuer and that also would limit the ability of the PEP to transact at contract value with the participants. In addition, certain events allow the issuer to terminate the contract with the PEP and settle at an amount different from contract value. Such events include an uncured violation of the PEP's investment guidelines, a breach of a material obligation under the contract, a material misrepresentation or a material amendment to the agreement without consent of the issuer.

## Note 6 – Party-In-Interest Transactions

Parties-in-interest are defined under DOL Regulations as any fiduciary of the PEP, any party rendering service to the PEP, the Pooled Plan Provider (PPP), Participating Employers and certain others. The PEP's investments are managed, held, administered and/or issued by Transamerica and MATC. The PEP operates under a Master Trust Agreement with Oriental Bank, the Trustee. Therefore, transactions with Oriental Bank, Transamerica and MATC are considered party-in-interest transactions. The PEP also issues notes to participants, which are secured by the balances in the participants' accounts, which also qualify as party-in-interest transactions. Such transactions are exempt from the prohibited transaction rules under ERISA.

NPPG is an affiliate of the PPP and provides record-keeping and third-party administrative services . Therefore, transactions with the PPP and NPPG qualify as party-in-interest transactions. The PEP compensates NPPG and the PPP directly for such services which are included in administrative expenses for the period ended December 31, 2025 in the accompanying statement of changes in net assets available for benefits.

## Note 7 – Refunds Payable for Excess Contributions

During 2025, the Plan received contributions from participants in excess of Plan and IRS limitations. Such excess contributions were refunded to participants in the subsequent year with a liability recorded and corresponding reduction in contributions recorded in the year the excess contribution were received.

## Note 8 – PEP Termination

Although it has not expressed any intent to do so, the Pooled Plan Provider 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. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the PPP may determine. Additionally, Participating Employers have the right to transfer the assets attributable to their participants to another plan should the PPP terminate the Plan.

## Note 9 – Plan Transfers

In the normal course of business, the Plan adds Participating Employers, and assets from the individual qualified plans that the added employers previously sponsored are transferred into the Plan, in conjunction with the Participating Employer's adoption of the Plan. Likewise, Participating Employers may terminate their arrangement with the Plan and transfer out of the Plan through mergers with, or creation of other qualified plans.

## Note 10 – Tax Status

The Plan is intended to qualify under Section 1081.01(a) of the Puerto Rico Internal Revenue Code of 2011, as amended (the PR Code), and the related trust is intended to be exempt from Puerto Rico income tax under Section 1081.01(a). The Plan covers only employees who are bona fide residents of Puerto Rico and is not intended to be qualified under Section 401(a) of the U.S. Internal Revenue Code. Under Section 1022(i)(1) of ERISA, a plan that is exempt under the PR Code, whose trust is created or organized in Puerto Rico, and all of whose participants are residents of Puerto Rico is treated for U.S. federal income tax purposes as a trust exempt under Section 501(a) of the U.S. Internal Revenue Code.

The Puerto Rico Department of the Treasury (Hacienda) issued a favorable determination letter dated January 30, 2024, stating that the Plan, as then designed, satisfies the requirements of Section 1081.01(a) of the PR Code. The Plan has been amended since receiving the determination letter [and the amendment has been submitted to Hacienda / and the Plan Administrator has concluded the amendment does not require a new filing]. The Plan Administrator believes the Plan is designed and is being operated in compliance with the applicable requirements of the PR Code and ERISA, and that the Plan and related trust continue to be tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate uncertain tax positions taken by the Plan. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset or disclosure in the financial statements. The Plan is subject to routine examination by taxing authorities; however, no examination is currently in progress.

## Note 11 – Fidelity Bond Non-Compliance

For the year ended December 31, 2025, the Plan was not covered by an adequate fidelity bond in accordance with regulations and requirements under ERISA.

## Note 12 – Subsequent Events

Subsequent to December 31, 2025, the Plan approved and appointed Empower Trust Company, LLC and Empower Life & Annuity Insurance Company as the new Trustee and Custodian of the PEP.

The PEP evaluated events occurring subsequent to December 31, 2025 through October 15, 2026, the date on which the financial statements were available to be issued, for matters that should be recorded in the financial statements or disclosed in the footnotes thereto.

# SUPPLEMENTAL INFORMATION

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Pooled separate accounts: | | | |
| * | Transamerica | AEGON Balanced Retirement Option | ** | $ 9,616 |
| * | Transamerica | AEGON Cash Reserve Retirement Option | ** | 25,001 |
| * | Transamerica | AEGON US High Yield Retirement Option | ** | 14 |
| * | Transamerica | American Funds EuroPacific Growth Retirement Option | ** | 53,469 |
| * | Transamerica | American Funds Fundamental Investors Investment Option | ** | 438,491 |
| * | Transamerica | American Funds Balanced Retirement Option | ** | 6,735 |
| * | Transamerica | American Funds Fundamental Investors Retirement Option | ** | 131,597 |
| * | Transamerica | American Funds The Growth Fund of America Investment Option | ** | 259,804 |
| * | Transamerica | American Funds The Growth Fund of America Retirement Option | ** | 119,901 |
| * | Transamerica | American Funds New Perspective Retirement Option | ** | 25,465 |
| * | Transamerica | American Funds Small Cap World Retirement Option | ** | 2,077 |
| * | Transamerica | BNY Mellon Dynamic Value Investment Option | ** | 18,084 |
| * | Transamerica | Fidelity Advisor Leveraged Company Stock Fund | ** | 301 |
| * | Transamerica | Franklin Mutual Shares Investment Option | ** | 60,689 |
| * | Transamerica | Invesco American Value Retirement Option | ** | 7,144 |
| * | Transamerica | Invesco Comstock Retirement Option | ** | 100,794 |
| * | Transamerica | Invesco Discovery Mid Cap Growth Retirement Option | ** | 3,127 |
| * | Transamerica | Invesco Main Street Mid Cap Retirement Option | ** | 3,043 |
| * | Transamerica | Janus Henderson Triton Retirement Option | ** | 13,258 |
| * | Transamerica | Loomis Sayles Bond Retirement Option | ** | 1 |
| * | Transamerica | Loomis Sayles Investment Grade Bond Retirement Option | ** | 355,652 |
| * | Transamerica | MFS International Diversification Retirement Option | ** | 92,507 |
| * | Transamerica | Nuveen Real Estate Securities Retirement Option | ** | 314 |
| * | Transamerica | Royce Value Retirement Option | ** | 13,386 |
| * | Transamerica | State Street Russell Small Cap Index Retirement Option | ** | 132,326 |
| * | Transamerica | Asset Allocation - Moderate Portfolio Retirement Option | ** | 43,875 |
| * | Transamerica | Vanguard International Value Retirement Option | ** | 54,796 |
| * | Transamerica | Templeton Global Bond Retirement Option | ** | 1,008 |
| * | Transamerica | Thornburg Core Growth Retirement Option | ** | 7,378 |
| * | Transamerica | Asset Allocation - Conservative Portfolio Retirement Option | ** | 22,377 |
| * | Transamerica | Asset Allocation - Growth Portfolio Retirement Option | ** | 76,058 |
| * | Transamerica | Asset Allocation - Moderate Growth Portfolio Retirement Option | ** | 148,325 |
| * | Transamerica | International Growth Retirement Option | ** | 281,133 |
| * | Transamerica | LifeGoal 2035 with BlackRock Retirement Option | ** | 51 |
| * | Transamerica | LifeGoal 2040 with BlackRock Retirement Option | ** | 9,620 |
| * | Transamerica | LifeGoal 2045 with BlackRock Retirement Option | ** | 29,296 |
| * | Transamerica | LifeGoal 2050 with BlackRock Retirement Option | ** | 27,095 |
| * | Transamerica | LifeGoal 2055 with BlackRock Retirement Option | ** | 28,364 |
| * | Transamerica | LifeGoal 2060 with BlackRock Retirement Option | ** | 8 |
| * | Transamerica | Partners High Yield Bond Retirement Option | ** | 31,235 |
| * | Transamerica | Small/Mid Cap Value Retirement Option | ** | 19,870 |
| | Total pooled separate accounts | | | 2,653,285 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Mutual funds: | | | |
| | AllianceBernstein | Large Cap Growth Fund Class I | ** | 509,967 |
| | AllianceBernstein | Large Cap Growth Fund Advisor Class | ** | 592,621 |
| | Alger | Capital Appreciation Institutional Fund Class I | ** | 275,652 |
| | Alger | Small Cap Focus Fund Class I | ** | 14,672 |
| | Allspring | High Yield Bond Fund Class A | ** | 16,898 |
| | Allspring | Core Plus Bond Fund Institutional Class | ** | 1,161,670 |
| | American Century | Strategic Allocation: Moderate Fund | ** | 293,987 |
| | American Century | One Choice 2030 Portfolio | ** | 123,650 |
| | American Century | One Choice 2045 Portfolio | ** | 92,577 |
| | American Century | One Choice In Retirement Portfolio | ** | 257,679 |
| | American Century | One Choice 2040 Portfolio | ** | 277,052 |
| | American Century | One Choice 2055 Portfolio | ** | 18,060 |
| | American Century | One Choice 2050 Portfolio | ** | 1,663 |
| | American Century | One Choice 2060 Portfolio | ** | 97 |
| | American Century | One Choice 2065 Portfolio | ** | 90 |
| | American Century | One Choice 2035 Portfolio | ** | 226,166 |
| | American Century | Ultra Fund Class R6 | ** | 1,319,668 |
| | American Century | Equity Income Fund | ** | 120,881 |
| | American Funds | New World Fund Class F-1 | ** | 43,806 |
| | American Funds | The Bond Fund of America Class R-6 | ** | 99,259 |
| | American Funds | 2020 Target Date Retirement Fund Class R-3 | ** | 73,299 |
| | American Funds | 2025 Target Date Retirement Fund Class R-3 | ** | 76,838 |
| | American Funds | 2030 Target Date Retirement Fund Class R-3 | ** | 441,666 |
| | American Funds | 2035 Target Date Retirement Fund Class R-3 | ** | 45,965 |
| | American Funds | 2045 Target Date Retirement Fund Class R-3 | ** | 538 |
| | American Funds | 2050 Target Date Retirement Fund Class R-3 | ** | 199,603 |
| | American Funds | 2015 Target Date Retirement Fund Class R-3 | ** | 49,912 |
| | American Funds | 2040 Target Date Retirement Fund Class R-3 | ** | 278,167 |
| | American Funds | 2055 Target Date Retirement Fund Class R-3 | ** | 544 |
| | American Funds | 2015 Target Date Retirement Fund Class R-4 | ** | 719 |
| | American Funds | 2020 Target Date Retirement Fund Class R-4 | ** | 12,309 |
| | American Funds | 2025 Target Date Retirement Fund Class R-4 | ** | 4,272 |
| | American Funds | 2030 Target Date Retirement Fund Class R-4 | ** | 101,132 |
| | American Funds | 2035 Target Date Retirement Fund Class R-4 | ** | 253,741 |
| | American Funds | 2040 Target Date Retirement Fund Class R-4 | ** | 112,570 |
| | American Funds | 2045 Target Date Retirement Fund Class R-4 | ** | 226,671 |
| | American Funds | 2050 Target Date Retirement Fund Class R-4 | ** | 311,549 |
| | American Funds | 2055 Target Date Retirement Fund Class R-4 | ** | 83,150 |
| | American Funds | 2060 Target Date Retirement Fund Class R-4 | ** | 30,565 |
| | American Funds | EuroPacific Growth Fund Class R-6 | ** | 51,593 |
| | American Funds | Fundamental Investors Class R-5 | ** | 661,573 |
| | American Funds | American Balanced Fund Class R-4 | ** | 220,151 |
| | American Funds | American Balanced Fund | ** | 16,190 |
| | American Funds | New World Fund Class R-6 | ** | 363,183 |
| | American Funds | Washington Mutual Investors Fund | ** | 216,468 |
| | Artisan | International Fund Investor Class | ** | 836 |
| | Baird | Core Plus Bond Fund Institutional Class | ** | 70,121 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | BlackRock | High Yield Portfolio Institutional Shares | ** | 100,463 |
| | BlackRock | High Yield Portfolio Class K | ** | 319,795 |
| | BlackRock | LifePath Index 2045 Fund Class K | ** | 131 |
| | BlackRock | LifePath Index 2040 Fund Class K | ** | 1,241 |
| | BlackRock | LifePath Index 2030 Fund Class K | ** | 602 |
| | BlackRock | LifePath Index 2050 Fund Class K | ** | 401 |
| | BlackRock | LifePath Index 2065 Fund Class K | ** | 218 |
| | BNY Mellon | International Equity Fund Class I | ** | 22,168 |
| | BNY Mellon | SmallCap Stock Index Fund Investor Shares | ** | 66,613 |
| | Brandes | Small Cap Value Fund | ** | 90 |
| | Buffalo | Discovery Fund | ** | 42,958 |
| | Cohen & Steers | Real Estate Securities Fund Class Z | ** | 224,111 |
| | Columbia | Quality Income Fund Institutional Class | ** | 72,929 |
| | Columbia | Mid Cap Index Fund Institutional Class | ** | 42,278 |
| | Dodge & Cox | International Stock Fund | ** | 164,867 |
| | Dodge & Cox | Stock Fund Class I | ** | 107,017 |
| | Dodge & Cox | Income Fund Class I | ** | 71,776 |
| | Eaton Vance | Emerging Markets Local Income Fund Class I | ** | 16,752 |
| | Eaton Vance | Atlanta Capital SMID-Cap Fund Class R6 | ** | 36,188 |
| | Federated Hermes | International Leaders Fund Institutional Class | ** | 482,306 |
| | Federated Hermes | Max-Cap Index Fund | ** | 35 |
| | Federated Hermes | International Strategic Value Dividend Fund | ** | 72,238 |
| | Federated Hermes | MDT Small Cap Core Fund Institutional Class | ** | 29,753 |
| | Fidelity | Capital & Income Fund | ** | 133,070 |
| | Fidelity | Balanced Fund | ** | 17,318 |
| | Fidelity | Advisor Freedom 2010 Fund Class T | ** | 7,001 |
| | Fidelity | Advisor Freedom 2020 Fund Class T | ** | 22,217 |
| | Fidelity | Advisor Freedom 2050 Fund Class T | ** | 156,500 |
| | Fidelity | Advisor Freedom 2045 Fund Class T | ** | 81,712 |
| | Fidelity | Fidelity Fund | ** | 15,477 |
| | Fidelity | Advisor Freedom 2015 Fund Class T | ** | 3,805 |
| | Fidelity | GNMA Fund | ** | 6,016 |
| | Fidelity | Advisor International Growth Fund Class I | ** | 17,684 |
| | Fidelity | Low-Priced Stock Fund | ** | 56,603 |
| | Fidelity | Mid Cap Index Fund | ** | 116 |
| | Fidelity | International Index Fund | ** | 916,294 |
| | Fidelity | Small Cap Index Fund | ** | 13,180 |
| | Fidelity | Advisor Freedom 2030 Fund Class T | ** | 86,198 |
| | Fidelity | Advisor Freedom 2040 Fund Class T | ** | 250,557 |
| | Fidelity | Advisor Freedom 2025 Fund Class T | ** | 4,065 |
| | Fidelity | Advisor Government Income Fund Class M | ** | 25,103 |
| | Fidelity | Worldwide Fund | ** | 3,740 |
| | Fidelity | 500 Index Fund | ** | 1,203,107 |
| | Fidelity | U.S. Bond Index Fund | ** | 1,585,660 |
| | Fidelity | Advisor Growth Opportunities Fund Class Z | ** | 65,697 |
| | FMI (Fiduciary Management Inc.) | Common Stock Fund | ** | 33,231 |
| | Frost | Total Return Bond Fund Investor Class | ** | 20,660 |
| | Goldman Sachs | Small/Mid Cap Growth Fund | ** | 48,004 |
| | Invesco | Growth and Income Fund Class A | ** | 1,774 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Invesco | Comstock Fund Class A | ** | 541,391 |
| | Invesco | EQV International Growth Fund | ** | 81,721 |
| | Invesco | EQV International Fund Class Y | ** | 18 |
| | Invesco | Core Plus Bond Fund Class Y | ** | 65,711 |
| | Invesco | Oppenheimer Global Opportunities Fund | ** | 6,988 |
| | Invesco | Oppenheimer International Diversified Fund | ** | 120,010 |
| | Invesco | Small Cap Value Fund Class R6 | ** | 115,126 |
| | Invesco | Equally-Weighted S&P 500 Fund Class A | ** | 297,705 |
| | JPMorgan | SmartRetirement 2045 Fund | ** | 171,388 |
| | JPMorgan | Small Cap Equity Fund Class R5 | ** | 71,165 |
| | JPMorgan | U.S. Value Fund Class R6 | ** | 1,469,935 |
| | Loomis Sayles | Investment Grade Bond Fund | ** | 34,330 |
| | Loomis Sayles | Global Allocation Fund Class Y | ** | 9,457 |
| | Lord Abbett | Short Duration Income Fund | ** | 2,562 |
| | Madison | Mid Cap Fund Class Y | ** | 9,169 |
| | MFS | Conservative Allocation Fund Class R4 | ** | 5,382 |
| | MFS | Growth Allocation Fund Class R4 | ** | 72,473 |
| | MFS | Moderate Allocation Fund Class R4 | ** | 129,020 |
| | MFS | International Diversification Fund Class R4 | ** | 108,746 |
| | MFS | International Diversification Fund Class R6 | ** | 98,094 |
| | MFS | Value Fund Class R4 | ** | 551,641 |
| | MFS | International Intrinsic Value Fund Class R4 | ** | 110,588 |
| | Nationwide | Mid Cap Market Index Fund Class A | ** | 130,554 |
| | Nomura | Small Cap Core Fund Class A | ** | 155,584 |
| | Nomura | Small Cap Value Fund Institutional Class | ** | 24 |
| | Nomura | Mid Cap Growth Fund Class R6 | ** | 164,836 |
| | Nomura | High Income Fund Class I | ** | 3,798 |
| | Northern Funds | Small Cap Value Fund | ** | 1,549 |
| | Nuveen | Small Cap Growth Opportunities Fund Class R6 | ** | 107,209 |
| | Nuveen | Inflation Linked Bond Fund Class R6 | ** | 7,703 |
| | NYLI (New York Life Investments) | Income Builder Fund Class I | ** | 75,258 |
| | Parnassus | Mid Cap Fund | ** | 86,033 |
| | PGIM | Global Real Estate Fund Class A | ** | 17,206 |
| | PIMCO | Income Fund Institutional Class | ** | 205,782 |
| | PIMCO | Global Advantage Strategy Bond Fund Institutional Class | ** | 2,357 |
| | PIMCO | Total Return Fund Class A | ** | 21,842 |
| | Principal | MidCap Value Fund I Class R-6 | ** | 207,797 |
| | Principal | LargeCap S&P 500 Index Fund Class R-3 | ** | 259,633 |
| | Principal | Short-Term Income Fund Institutional Class | ** | 74,732 |
| | Principal | SmallCap S&P 600 Index Fund Class R-5 | ** | 96,687 |
| | Putnam | Income Fund Class A | ** | 44,742 |
| | Russell Investments | Strategic Bond Fund | ** | 16,741 |
| | T. Rowe Price | Small-Cap Stock Fund | ** | 35,461 |
| | T. Rowe Price | Blue Chip Growth Fund Advisor Class | ** | 18,854 |
| | T. Rowe Price | Dividend Growth Fund | ** | 3,575 |
| | T. Rowe Price | Growth Stock Fund | ** | 39,215 |
| | T. Rowe Price | Global Multi-Sector Bond Fund Investor Class | ** | 25,919 |
| | T. Rowe Price | Global High Income Bond Fund | ** | 1,328 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | T. Rowe Price | Blue Chip Growth Fund | ** | 366,139 |
| | T. Rowe Price | Retirement 2030 Fund | ** | 81 |
| | T. Rowe Price | Retirement 2040 Fund | ** | 1,865 |
| | T. Rowe Price | Retirement 2035 Fund | ** | 1,744 |
| | T. Rowe Price | Retirement 2045 Fund | ** | 8,892 |
| | T. Rowe Price | Retirement 2050 Fund | ** | 24,979 |
| | T. Rowe Price | Value Fund | ** | 332,479 |
| | TCW | MetWest Total Return Bond Fund Class M | ** | 401,783 |
| | TCW | Securitized Bond Fund Class I | ** | 124,431 |
| | Vanguard | Short-Term Bond Index Fund Admiral Shares | ** | 35,507 |
| | Vanguard | Equity Income Fund | ** | 155,988 |
| | Vanguard | Explorer Fund Investor Shares | ** | 80,437 |
| | Vanguard | Target Retirement 2055 Fund | ** | 177,929 |
| | Vanguard | 500 Index Fund Admiral Shares | ** | 383,270 |
| | Vanguard | Intermediate-Term Investment-Grade Fund | ** | 43,690 |
| | Vanguard | Target Retirement 2050 Fund | ** | 90,197 |
| | Vanguard | Intermediate-Term Treasury Fund | ** | 17,958 |
| | Vanguard | Target Retirement 2040 Fund | ** | 269,007 |
| | Vanguard | Short-Term Investment-Grade Fund | ** | 29,554 |
| | Vanguard | Global Equity Fund | ** | 23,336 |
| | Vanguard | Mid-Cap Index Fund Admiral Shares | ** | 36,325 |
| | Vanguard | LifeStrategy Conservative Growth Fund | ** | 44,641 |
| | Vanguard | Small-Cap Value Index Fund Admiral Shares | ** | 15,683 |
| | Vanguard | Small-Cap Index Fund Admiral Shares | ** | 35,996 |
| | Vanguard | Target Retirement 2030 Fund | ** | 110,822 |
| | Vanguard | Target Retirement Income Fund | ** | 347,751 |
| | Vanguard | Target Retirement 2045 Fund | ** | 66,026 |
| | Vanguard | Total Stock Market Index Fund | ** | 88,937 |
| | Vanguard | Target Retirement 2035 Fund | ** | 31 |
| | Vanguard | Target Retirement 2025 Fund | ** | 51,752 |
| | Vanguard | Target Retirement 2020 Fund | ** | 127,433 |
| | Vanguard | Value Index Fund Admiral Shares | ** | 99,063 |
| | Vanguard | Wellington Fund Investor Shares | ** | 78,238 |
| | Vanguard | International Growth Fund | ** | 38,670 |
| | Vanguard | Windsor Fund Investor Shares | ** | 119,430 |
| | Vanguard | U.S. Growth Fund Investor Shares | ** | 104,069 |
| | Victory Pioneer | Select Mid Cap Growth Fund Class A | ** | 134,157 |
| | Victory Pioneer | International Equity Fund Class R6 | ** | 577,224 |
| | Victory Pioneer | Fundamental Growth Fund Class A | ** | 116,581 |
| | Victory Pioneer | Strategic Income Fund Class A | ** | 107,705 |
| | Virtus | Seix High Yield Fund Class R6 | ** | 21,062 |
| | Virtus | Tactical Allocation Fund Class I | ** | 6,417 |
| | Total mutual funds | | | 26,773,477 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Collective investment trust funds: | | | |
| | Galliard | Retirement Income Fund Fee Class F35 | ** | 283,072 |
| | Putnam | Stable Value Fund | ** | 108,108 |
| | Ivy | Mid Cap Growth Fund | ** | 85 |
| | Total collective investment trust funds | | | 391,265 |
| | Exchange traded funds: | | | |
| | iShares | International Dividend Active ETF | ** | 12,344 |
| | JPMorgan | Fundamental Data Science ETF | ** | 61,818 |
| | Total exchange traded funds | | | 74,162 |
| | Money market funds: | | | |
| | American Funds | Money Market Fund Class R-6 | ** | 186,348 |
| | DGI | U.S. Government Money Market Fund Class I | ** | 32 |
| | Fidelity | Government Cash Reserves | ** | 72,692 |
| | Fidelity | Treasury Money Market Fund Capital Reserves Class | ** | 115,660 |
| | Vanguard | Federal Money Market Fund Investor Shares | ** | 124,153 |
| | Total money market funds | | | 498,885 |
| | Guaranteed investment contract: | | | |
| * | Transamerica Financial Life Insurance Company | Stable Value Core Option Fund | ** | 64,960 |
| | Total investments | | | 30,456,034 |
| | Non interest-bearing cash | | | |
| * | Mid Atlantic Trust Company | Deposit Management Program I | ** | 2,249,742 |
| * | Notes receivable from participants | Loans to participants, interest ranging from 3.00% - 9.50%, various maturities. | - | 261,467 |
| | | Total assets held | | $ 32,967,243 |

** A party-in-interest, as defined by ERISA.*

*** The cost of participant-directed investments is not required to be disclosed.*

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Pooled separate accounts: | | | |
| * | Transamerica | AEGON Balanced Retirement Option | ** | $ 9,616 |
| * | Transamerica | AEGON Cash Reserve Retirement Option | ** | 25,001 |
| * | Transamerica | AEGON US High Yield Retirement Option | ** | 14 |
| * | Transamerica | American Funds EuroPacific Growth Retirement Option | ** | 53,469 |
| * | Transamerica | American Funds Fundamental Investors Investment Option | ** | 438,491 |
| * | Transamerica | American Funds Balanced Retirement Option | ** | 6,735 |
| * | Transamerica | American Funds Fundamental Investors Retirement Option | ** | 131,597 |
| * | Transamerica | American Funds The Growth Fund of America Investment Option | ** | 259,804 |
| * | Transamerica | American Funds The Growth Fund of America Retirement Option | ** | 119,901 |
| * | Transamerica | American Funds New Perspective Retirement Option | ** | 25,465 |
| * | Transamerica | American Funds Small Cap World Retirement Option | ** | 2,077 |
| * | Transamerica | BNY Mellon Dynamic Value Investment Option | ** | 18,084 |
| * | Transamerica | Fidelity Advisor Leveraged Company Stock Fund | ** | 301 |
| * | Transamerica | Franklin Mutual Shares Investment Option | ** | 60,689 |
| * | Transamerica | Invesco American Value Retirement Option | ** | 7,144 |
| * | Transamerica | Invesco Comstock Retirement Option | ** | 100,794 |
| * | Transamerica | Invesco Discovery Mid Cap Growth Retirement Option | ** | 3,127 |
| * | Transamerica | Invesco Main Street Mid Cap Retirement Option | ** | 3,043 |
| * | Transamerica | Janus Henderson Triton Retirement Option | ** | 13,258 |
| * | Transamerica | Loomis Sayles Bond Retirement Option | ** | 1 |
| * | Transamerica | Loomis Sayles Investment Grade Bond Retirement Option | ** | 355,652 |
| * | Transamerica | MFS International Diversification Retirement Option | ** | 92,507 |
| * | Transamerica | Nuveen Real Estate Securities Retirement Option | ** | 314 |
| * | Transamerica | Royce Value Retirement Option | ** | 13,386 |
| * | Transamerica | State Street Russell Small Cap Index Retirement Option | ** | 132,326 |
| * | Transamerica | Asset Allocation - Moderate Portfolio Retirement Option | ** | 43,875 |
| * | Transamerica | Vanguard International Value Retirement Option | ** | 54,796 |
| * | Transamerica | Templeton Global Bond Retirement Option | ** | 1,008 |
| * | Transamerica | Thornburg Core Growth Retirement Option | ** | 7,378 |
| * | Transamerica | Asset Allocation - Conservative Portfolio Retirement Option | ** | 22,377 |
| * | Transamerica | Asset Allocation - Growth Portfolio Retirement Option | ** | 76,058 |
| * | Transamerica | Asset Allocation - Moderate Growth Portfolio Retirement Option | ** | 148,325 |
| * | Transamerica | International Growth Retirement Option | ** | 281,133 |
| * | Transamerica | LifeGoal 2035 with BlackRock Retirement Option | ** | 51 |
| * | Transamerica | LifeGoal 2040 with BlackRock Retirement Option | ** | 9,620 |
| * | Transamerica | LifeGoal 2045 with BlackRock Retirement Option | ** | 29,296 |
| * | Transamerica | LifeGoal 2050 with BlackRock Retirement Option | ** | 27,095 |
| * | Transamerica | LifeGoal 2055 with BlackRock Retirement Option | ** | 28,364 |
| * | Transamerica | LifeGoal 2060 with BlackRock Retirement Option | ** | 8 |
| * | Transamerica | Partners High Yield Bond Retirement Option | ** | 31,235 |
| * | Transamerica | Small/Mid Cap Value Retirement Option | ** | 19,870 |
| | Total pooled separate accounts | | | 2,653,285 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Mutual funds: | | | |
| | AllianceBernstein | Large Cap Growth Fund Class I | ** | 509,967 |
| | AllianceBernstein | Large Cap Growth Fund Advisor Class | ** | 592,621 |
| | Alger | Capital Appreciation Institutional Fund Class I | ** | 275,652 |
| | Alger | Small Cap Focus Fund Class I | ** | 14,672 |
| | Allspring | High Yield Bond Fund Class A | ** | 16,898 |
| | Allspring | Core Plus Bond Fund Institutional Class | ** | 1,161,670 |
| | American Century | Strategic Allocation: Moderate Fund | ** | 293,987 |
| | American Century | One Choice 2030 Portfolio | ** | 123,650 |
| | American Century | One Choice 2045 Portfolio | ** | 92,577 |
| | American Century | One Choice In Retirement Portfolio | ** | 257,679 |
| | American Century | One Choice 2040 Portfolio | ** | 277,052 |
| | American Century | One Choice 2055 Portfolio | ** | 18,060 |
| | American Century | One Choice 2050 Portfolio | ** | 1,663 |
| | American Century | One Choice 2060 Portfolio | ** | 97 |
| | American Century | One Choice 2065 Portfolio | ** | 90 |
| | American Century | One Choice 2035 Portfolio | ** | 226,166 |
| | American Century | Ultra Fund Class R6 | ** | 1,319,668 |
| | American Century | Equity Income Fund | ** | 120,881 |
| | American Funds | New World Fund Class F-1 | ** | 43,806 |
| | American Funds | The Bond Fund of America Class R-6 | ** | 99,259 |
| | American Funds | 2020 Target Date Retirement Fund Class R-3 | ** | 73,299 |
| | American Funds | 2025 Target Date Retirement Fund Class R-3 | ** | 76,838 |
| | American Funds | 2030 Target Date Retirement Fund Class R-3 | ** | 441,666 |
| | American Funds | 2035 Target Date Retirement Fund Class R-3 | ** | 45,965 |
| | American Funds | 2045 Target Date Retirement Fund Class R-3 | ** | 538 |
| | American Funds | 2050 Target Date Retirement Fund Class R-3 | ** | 199,603 |
| | American Funds | 2015 Target Date Retirement Fund Class R-3 | ** | 49,912 |
| | American Funds | 2040 Target Date Retirement Fund Class R-3 | ** | 278,167 |
| | American Funds | 2055 Target Date Retirement Fund Class R-3 | ** | 544 |
| | American Funds | 2015 Target Date Retirement Fund Class R-4 | ** | 719 |
| | American Funds | 2020 Target Date Retirement Fund Class R-4 | ** | 12,309 |
| | American Funds | 2025 Target Date Retirement Fund Class R-4 | ** | 4,272 |
| | American Funds | 2030 Target Date Retirement Fund Class R-4 | ** | 101,132 |
| | American Funds | 2035 Target Date Retirement Fund Class R-4 | ** | 253,741 |
| | American Funds | 2040 Target Date Retirement Fund Class R-4 | ** | 112,570 |
| | American Funds | 2045 Target Date Retirement Fund Class R-4 | ** | 226,671 |
| | American Funds | 2050 Target Date Retirement Fund Class R-4 | ** | 311,549 |
| | American Funds | 2055 Target Date Retirement Fund Class R-4 | ** | 83,150 |
| | American Funds | 2060 Target Date Retirement Fund Class R-4 | ** | 30,565 |
| | American Funds | EuroPacific Growth Fund Class R-6 | ** | 51,593 |
| | American Funds | Fundamental Investors Class R-5 | ** | 661,573 |
| | American Funds | American Balanced Fund Class R-4 | ** | 220,151 |
| | American Funds | American Balanced Fund | ** | 16,190 |
| | American Funds | New World Fund Class R-6 | ** | 363,183 |
| | American Funds | Washington Mutual Investors Fund | ** | 216,468 |
| | Artisan | International Fund Investor Class | ** | 836 |
| | Baird | Core Plus Bond Fund Institutional Class | ** | 70,121 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | BlackRock | High Yield Portfolio Institutional Shares | ** | 100,463 |
| | BlackRock | High Yield Portfolio Class K | ** | 319,795 |
| | BlackRock | LifePath Index 2045 Fund Class K | ** | 131 |
| | BlackRock | LifePath Index 2040 Fund Class K | ** | 1,241 |
| | BlackRock | LifePath Index 2030 Fund Class K | ** | 602 |
| | BlackRock | LifePath Index 2050 Fund Class K | ** | 401 |
| | BlackRock | LifePath Index 2065 Fund Class K | ** | 218 |
| | BNY Mellon | International Equity Fund Class I | ** | 22,168 |
| | BNY Mellon | SmallCap Stock Index Fund Investor Shares | ** | 66,613 |
| | Brandes | Small Cap Value Fund | ** | 90 |
| | Buffalo | Discovery Fund | ** | 42,958 |
| | Cohen & Steers | Real Estate Securities Fund Class Z | ** | 224,111 |
| | Columbia | Quality Income Fund Institutional Class | ** | 72,929 |
| | Columbia | Mid Cap Index Fund Institutional Class | ** | 42,278 |
| | Dodge & Cox | International Stock Fund | ** | 164,867 |
| | Dodge & Cox | Stock Fund Class I | ** | 107,017 |
| | Dodge & Cox | Income Fund Class I | ** | 71,776 |
| | Eaton Vance | Emerging Markets Local Income Fund Class I | ** | 16,752 |
| | Eaton Vance | Atlanta Capital SMID-Cap Fund Class R6 | ** | 36,188 |
| | Federated Hermes | International Leaders Fund Institutional Class | ** | 482,306 |
| | Federated Hermes | Max-Cap Index Fund | ** | 35 |
| | Federated Hermes | International Strategic Value Dividend Fund | ** | 72,238 |
| | Federated Hermes | MDT Small Cap Core Fund Institutional Class | ** | 29,753 |
| | Fidelity | Capital & Income Fund | ** | 133,070 |
| | Fidelity | Balanced Fund | ** | 17,318 |
| | Fidelity | Advisor Freedom 2010 Fund Class T | ** | 7,001 |
| | Fidelity | Advisor Freedom 2020 Fund Class T | ** | 22,217 |
| | Fidelity | Advisor Freedom 2050 Fund Class T | ** | 156,500 |
| | Fidelity | Advisor Freedom 2045 Fund Class T | ** | 81,712 |
| | Fidelity | Fidelity Fund | ** | 15,477 |
| | Fidelity | Advisor Freedom 2015 Fund Class T | ** | 3,805 |
| | Fidelity | GNMA Fund | ** | 6,016 |
| | Fidelity | Advisor International Growth Fund Class I | ** | 17,684 |
| | Fidelity | Low-Priced Stock Fund | ** | 56,603 |
| | Fidelity | Mid Cap Index Fund | ** | 116 |
| | Fidelity | International Index Fund | ** | 916,294 |
| | Fidelity | Small Cap Index Fund | ** | 13,180 |
| | Fidelity | Advisor Freedom 2030 Fund Class T | ** | 86,198 |
| | Fidelity | Advisor Freedom 2040 Fund Class T | ** | 250,557 |
| | Fidelity | Advisor Freedom 2025 Fund Class T | ** | 4,065 |
| | Fidelity | Advisor Government Income Fund Class M | ** | 25,103 |
| | Fidelity | Worldwide Fund | ** | 3,740 |
| | Fidelity | 500 Index Fund | ** | 1,203,107 |
| | Fidelity | U.S. Bond Index Fund | ** | 1,585,660 |
| | Fidelity | Advisor Growth Opportunities Fund Class Z | ** | 65,697 |
| | FMI (Fiduciary Management Inc.) | Common Stock Fund | ** | 33,231 |
| | Frost | Total Return Bond Fund Investor Class | ** | 20,660 |
| | Goldman Sachs | Small/Mid Cap Growth Fund | ** | 48,004 |
| | Invesco | Growth and Income Fund Class A | ** | 1,774 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Invesco | Comstock Fund Class A | ** | 541,391 |
| | Invesco | EQV International Growth Fund | ** | 81,721 |
| | Invesco | EQV International Fund Class Y | ** | 18 |
| | Invesco | Core Plus Bond Fund Class Y | ** | 65,711 |
| | Invesco | Oppenheimer Global Opportunities Fund | ** | 6,988 |
| | Invesco | Oppenheimer International Diversified Fund | ** | 120,010 |
| | Invesco | Small Cap Value Fund Class R6 | ** | 115,126 |
| | Invesco | Equally-Weighted S&P 500 Fund Class A | ** | 297,705 |
| | JPMorgan | SmartRetirement 2045 Fund | ** | 171,388 |
| | JPMorgan | Small Cap Equity Fund Class R5 | ** | 71,165 |
| | JPMorgan | U.S. Value Fund Class R6 | ** | 1,469,935 |
| | Loomis Sayles | Investment Grade Bond Fund | ** | 34,330 |
| | Loomis Sayles | Global Allocation Fund Class Y | ** | 9,457 |
| | Lord Abbett | Short Duration Income Fund | ** | 2,562 |
| | Madison | Mid Cap Fund Class Y | ** | 9,169 |
| | MFS | Conservative Allocation Fund Class R4 | ** | 5,382 |
| | MFS | Growth Allocation Fund Class R4 | ** | 72,473 |
| | MFS | Moderate Allocation Fund Class R4 | ** | 129,020 |
| | MFS | International Diversification Fund Class R4 | ** | 108,746 |
| | MFS | International Diversification Fund Class R6 | ** | 98,094 |
| | MFS | Value Fund Class R4 | ** | 551,641 |
| | MFS | International Intrinsic Value Fund Class R4 | ** | 110,588 |
| | Nationwide | Mid Cap Market Index Fund Class A | ** | 130,554 |
| | Nomura | Small Cap Core Fund Class A | ** | 155,584 |
| | Nomura | Small Cap Value Fund Institutional Class | ** | 24 |
| | Nomura | Mid Cap Growth Fund Class R6 | ** | 164,836 |
| | Nomura | High Income Fund Class I | ** | 3,798 |
| | Northern Funds | Small Cap Value Fund | ** | 1,549 |
| | Nuveen | Small Cap Growth Opportunities Fund Class R6 | ** | 107,209 |
| | Nuveen | Inflation Linked Bond Fund Class R6 | ** | 7,703 |
| | NYLI (New York Life Investments) | Income Builder Fund Class I | ** | 75,258 |
| | Parnassus | Mid Cap Fund | ** | 86,033 |
| | PGIM | Global Real Estate Fund Class A | ** | 17,206 |
| | PIMCO | Income Fund Institutional Class | ** | 205,782 |
| | PIMCO | Global Advantage Strategy Bond Fund Institutional Class | ** | 2,357 |
| | PIMCO | Total Return Fund Class A | ** | 21,842 |
| | Principal | MidCap Value Fund I Class R-6 | ** | 207,797 |
| | Principal | LargeCap S&P 500 Index Fund Class R-3 | ** | 259,633 |
| | Principal | Short-Term Income Fund Institutional Class | ** | 74,732 |
| | Principal | SmallCap S&P 600 Index Fund Class R-5 | ** | 96,687 |
| | Putnam | Income Fund Class A | ** | 44,742 |
| | Russell Investments | Strategic Bond Fund | ** | 16,741 |
| | T. Rowe Price | Small-Cap Stock Fund | ** | 35,461 |
| | T. Rowe Price | Blue Chip Growth Fund Advisor Class | ** | 18,854 |
| | T. Rowe Price | Dividend Growth Fund | ** | 3,575 |
| | T. Rowe Price | Growth Stock Fund | ** | 39,215 |
| | T. Rowe Price | Global Multi-Sector Bond Fund Investor Class | ** | 25,919 |
| | T. Rowe Price | Global High Income Bond Fund | ** | 1,328 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | T. Rowe Price | Blue Chip Growth Fund | ** | 366,139 |
| | T. Rowe Price | Retirement 2030 Fund | ** | 81 |
| | T. Rowe Price | Retirement 2040 Fund | ** | 1,865 |
| | T. Rowe Price | Retirement 2035 Fund | ** | 1,744 |
| | T. Rowe Price | Retirement 2045 Fund | ** | 8,892 |
| | T. Rowe Price | Retirement 2050 Fund | ** | 24,979 |
| | T. Rowe Price | Value Fund | ** | 332,479 |
| | TCW | MetWest Total Return Bond Fund Class M | ** | 401,783 |
| | TCW | Securitized Bond Fund Class I | ** | 124,431 |
| | Vanguard | Short-Term Bond Index Fund Admiral Shares | ** | 35,507 |
| | Vanguard | Equity Income Fund | ** | 155,988 |
| | Vanguard | Explorer Fund Investor Shares | ** | 80,437 |
| | Vanguard | Target Retirement 2055 Fund | ** | 177,929 |
| | Vanguard | 500 Index Fund Admiral Shares | ** | 383,270 |
| | Vanguard | Intermediate-Term Investment-Grade Fund | ** | 43,690 |
| | Vanguard | Target Retirement 2050 Fund | ** | 90,197 |
| | Vanguard | Intermediate-Term Treasury Fund | ** | 17,958 |
| | Vanguard | Target Retirement 2040 Fund | ** | 269,007 |
| | Vanguard | Short-Term Investment-Grade Fund | ** | 29,554 |
| | Vanguard | Global Equity Fund | ** | 23,336 |
| | Vanguard | Mid-Cap Index Fund Admiral Shares | ** | 36,325 |
| | Vanguard | LifeStrategy Conservative Growth Fund | ** | 44,641 |
| | Vanguard | Small-Cap Value Index Fund Admiral Shares | ** | 15,683 |
| | Vanguard | Small-Cap Index Fund Admiral Shares | ** | 35,996 |
| | Vanguard | Target Retirement 2030 Fund | ** | 110,822 |
| | Vanguard | Target Retirement Income Fund | ** | 347,751 |
| | Vanguard | Target Retirement 2045 Fund | ** | 66,026 |
| | Vanguard | Total Stock Market Index Fund | ** | 88,937 |
| | Vanguard | Target Retirement 2035 Fund | ** | 31 |
| | Vanguard | Target Retirement 2025 Fund | ** | 51,752 |
| | Vanguard | Target Retirement 2020 Fund | ** | 127,433 |
| | Vanguard | Value Index Fund Admiral Shares | ** | 99,063 |
| | Vanguard | Wellington Fund Investor Shares | ** | 78,238 |
| | Vanguard | International Growth Fund | ** | 38,670 |
| | Vanguard | Windsor Fund Investor Shares | ** | 119,430 |
| | Vanguard | U.S. Growth Fund Investor Shares | ** | 104,069 |
| | Victory Pioneer | Select Mid Cap Growth Fund Class A | ** | 134,157 |
| | Victory Pioneer | International Equity Fund Class R6 | ** | 577,224 |
| | Victory Pioneer | Fundamental Growth Fund Class A | ** | 116,581 |
| | Victory Pioneer | Strategic Income Fund Class A | ** | 107,705 |
| | Virtus | Seix High Yield Fund Class R6 | ** | 21,062 |
| | Virtus | Tactical Allocation Fund Class I | ** | 6,417 |
| | Total mutual funds | | | 26,773,477 |

**PR SECURE RETIREMENT PEP**

**SPONSOR'S EIN: 85-3213245**

**PLAN NUMBER: 319**

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

**December 31, 2025**

| (a) | (b) Identity of issuer or similar party | (c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value | (d) Cost | (e) Current Value |
|---|---|---|---|---|
| | Collective investment trust funds: | | | |
| | Galliard | Retirement Income Fund Fee Class F35 | ** | 283,072 |
| | Putnam | Stable Value Fund | ** | 108,108 |
| | Ivy | Mid Cap Growth Fund | ** | 85 |
| | Total collective investment trust funds | | | 391,265 |
| | Exchange traded funds: | | | |
| | iShares | International Dividend Active ETF | ** | 12,344 |
| | JPMorgan | Fundamental Data Science ETF | ** | 61,818 |
| | Total exchange traded funds | | | 74,162 |
| | Money market funds: | | | |
| | American Funds | Money Market Fund Class R-6 | ** | 186,348 |
| | DGI | U.S. Government Money Market Fund Class I | ** | 32 |
| | Fidelity | Government Cash Reserves | ** | 72,692 |
| | Fidelity | Treasury Money Market Fund Capital Reserves Class | ** | 115,660 |
| | Vanguard | Federal Money Market Fund Investor Shares | ** | 124,153 |
| | Total money market funds | | | 498,885 |
| | Guaranteed investment contract: | | | |
| * | Transamerica Financial Life Insurance Company | Stable Value Core Option Fund | ** | 64,960 |
| | Total investments | | | 30,456,034 |
| | Non interest-bearing cash | | | |
| * | Mid Atlantic Trust Company | Deposit Management Program I | ** | 2,249,742 |
| * | Notes receivable from participants | Loans to participants, interest ranging from 3.00% - 9.50%, various maturities. | - | 261,467 |
| | | Total assets held | | $ 32,967,243 |

** A party-in-interest, as defined by ERISA.*

*** The cost of participant-directed investments is not required to be disclosed.*