FORM 2

ANNUAL REPORT FORM

Registered public accounting firms must provide their annual report and any amendments thereto to the PCAOB by completing and submitting this Form according to the instructions to Form 2.

It is important to refer to the instructions when completing each item of the Form. The Firm is responsible for completing each item according to those instructions, and should not merely rely on the Firm's own interpretation of the item descriptions appearing in this Form.

Terms that appear in italics have specific defined meanings that the Firm must apply in completing this Form. The definitions are found in PCAOB Rule 1001.

PART I - IDENTITY OF THE FIRM AND CONTACT PERSONS

In Part I, the Firm should provide information that is current as of the date of the certification in Part X.

ITEM 1.1 - NAME OF THE FIRM

a. Firm legal name

Forvis Mazars, LLP

b. Other names used in *audit reports*	
c. Former legal names	

ITEM 1.2 - CONTACT INFORMATION OF THE FIRM

a. Physical address of the Firm's headquarters office	Mailing address ☐ Same as physical address
Country: United States	Country: United States
Street address 1: 910 E. St Louis Street	Street address 1: P.O. Box 1900
Street address 2: Suite 400	Street address 2:
City: Springfield	City: Springfield
State/Province: Missouri	State/Province: Missouri
Non-U.S. State/Province:	Non-U.S. State/Province:
Zip/Postal code: 65806	Zip/Postal code: 65801-1900

b. Telephone number of the Firm's headquarters office (incl. country and area codes)

417-831-7283

Facsimile number of the Firm's headquarters office (incl. country and area codes)

417-831-4763

Website address of the Firm

forvismazars.us

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 1.3 - PRIMARY CONTACT WITH THE *BOARD*	
Name	
Family Name (last name) Cohen	Given name (first name) David
Business title National Audit Oversight Leader - SEC Practice	
Physical business address Country United States	Business mailing address ☑ Same as physical address Country
Street address 1 1201 Walnut Street	Street address 1
Street address 2 Suite 1700	Street address 2
City Kansas City	City
State/Province Missouri	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 64106	Zip/Postal code
Business telephone number (incl. country and area codes) 816-905-3628	
Business facsimile number (incl. country and area codes)	
Business e-mail address david.cohen@us.forvismazars.com	

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART II - GENERAL INFORMATION CONCERNING THIS REPORT

ITEM 2.1 - REPORTING PERIOD

State the reporting period covered by this report.

Note: The reporting period, which the Firm should enter in Item 2.1, is the period beginning on April 1 of the year before the year in which the annual report is required to be filed and ending March 31 of the year in which the annual report is required to be filed. That is the period referred to where this Form refers to the "reporting period." Note, however, the special instruction at the beginning of Part VIII concerning the first annual report filed by certain firms.

Start of reporting period (mm/dd/yyyy)	End of reporting period (mm/dd/yyyy)
4/1/2025	3/31/2026

ITEM 2.2 - AMENDMENTS

If this is an amendment to a report previously filed with the *Board* -

a. Indicate, by checking the box corresponding to this item, that this is an amendment. ☐

b. Identify the specific Part or Item numbers of this Form (other than this Item 2.2) as to which the Firm's response has changed from that provided in the most recent Form 2 or amended Form 2 filed by the Firm with respect to the reporting period.

- ☐ Part I, Identity of the Firm and Contact Persons
- Part III, General Information Concerning the Firm
  - ☐ Item 3.1, The Firm's Practice Related to the Registration Requirement
    - Item 3.2, Fees Billed to *Issuer Audit* Clients
      - ☐ Item 3.2.a.1, *Audit Services*
      - ☐ Item 3.2.a.2, *Other Accounting Services*
      - ☐ Item 3.2.a.3, *Tax Services*
      - ☐ Item 3.2.a.4, *Non-audit Services*
      - ☐ Item 3.2.b, Calculation Method
      - ☐ Item 3.2.c, Estimated Percentages
  - ☐ Item 3.3, *Foreign Registered Public Accounting Firm*'s Designation of U.S. Agent
  - ☐ Incomplete Responses Due to Asserted Non-US Legal Restrictions
- ☐ Part IV, *Audit* Clients and *Audit Reports*
- ☐ Part V, Offices and Affiliations
- Part VI, Personnel
  - Item 6.1, Number of Firm Personnel
    - ☐ Item 6.1.a, Total Number of *Accountants*
    - ☐ Item 6.1.b, Total Number of CPA's
    - ☐ Item 6.1.c, Total Number of Personnel
  - ☐ Incomplete Responses Due to Asserted Non-US Legal Restrictions
- Part VII, Certain Relationships
  - Item 7.1, Individuals with Certain Disciplinary or Other Histories
    - ☐ Item 7.1.a, Relationship Exists
    - ☐ Item 7.1.b, Individuals
  - Item 7.2, Entities with Certain Disciplinary or Other Histories
    - ☐ Item 7.2.a, Relationship Exists
    - ☐ Item 7.2.b, Entities
  - Item 7.3, Certain Arrangements to Receive Consulting or Other Professional Services
    - ☐ Item 7.3.a, Arrangement Exists
    - ☐ Item 7.3.b, Entities
  - ☐ Incomplete Responses Due to Asserted Non-US Legal Restrictions
- ☐ Part VIII, Acquisition of Another *Public Accounting Firm* or Substantial Portions of Another *Public Accounting Firm's Personnel*
- ☐ *Part IX, Affirmation of Consent*
- ☐ *Part X, Certification of Firm*

  If you check this box, use the text field below to describe the error or omission in Part X as previously filed and to supply the information as it should have been provided in the previous submission. Use Part X of this amended form only to certify the amended form, not to supply corrections to the previous form.

- Part XI, Exhibits
  - ☐ Exhibit 3.2, Description of Methodology Used to Estimate Components of Calculation in Item 3.2 and Reason for Using Estimates
  - ☐ Exhibit 99.1, Request for Confidential Treatment

☐ Exhibit 99.3, Materials Required by Rule 2207(c)(2)-(4)

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART III - GENERAL INFORMATION CONCERNING THE FIRM

ITEM 3.1 - THE FIRM'S PRACTICE RELATED TO THE REGISTRATION REQUIREMENT

a. Indicate whether the Firm issued any *audit report* with respect to an *issuer* during the reporting period.	(•) Yes ( ) No
b. In the event of an affirmative response to Item 3.1.a, indicate whether the *issuers* with respect to which the Firm issued *audit reports* during the reporting period were limited to employee benefit plans that file reports with the *Commission* on Form 11-K.	[ ] Yes [x] No
c. In the event of a negative response to Item 3.1.a, indicate whether the Firm *played a substantial role in the preparation or furnishing of an audit report* with respect to an *issuer* during the reporting period.	[ ] Yes [ ] No
d. Indicate whether the Firm issued any *audit report* with respect to any *broker* or *dealer* during the reporting period.	[x] Yes [ ] No
e. In the event of a negative response to Item 3.1.d, indicate whether the Firm *played a substantial role in the preparation or furnishing of an audit report* with respect to a *broker* or *dealer* during the reporting period.	[ ] Yes [ ] No

ITEM 3.2 - FEES BILLED TO *ISSUER AUDIT* CLIENTS

The option to request confidential treatment for information provided in Item 3.2 is available only to *foreign registered public accounting firms*.

a. Of the total fees billed by the Firm to all clients for services that were rendered in the reporting period, state the percentage (which may be rounded, but no less specifically than to the nearest five percent) attributable to fees billed to *issuer audit* clients for–

	CA	CR		CA	CR
1. *Audit services*	[ ]	[ ]	2. *Other accounting services*	[ ]	[ ]
3			0		
3. *Tax services*	[ ]	[ ]	4. *Non-audit services*	[ ]	[ ]
0			0		

b. Indicate, by checking the appropriate box, which of the following two methods the Firm used to calculate the percentages reported in Item 3.2.a – CA [ ] CR [ ]

( ) 1. The Firm used as a denominator the total fees billed to all clients for services rendered during the reporting period and used as numerators (for each of the four categories) total fees billed to *issuer audit* clients for the relevant services rendered during the reporting period.

(•) 2. The Firm used as a denominator the total fees billed to all clients in the Firm's fiscal year that ended during the reporting period and used as numerators (for each of the four categories) total *issuer audit* client fees as determined by reference to the fee amounts disclosed to the *Commission* by those clients for each client's fiscal year that ended during the reporting period (including, for clients who have not made the required *Commission* filings, the fee amounts required to be disclosed).

c. If the Firm has used a reasonable method to estimate the components of the calculations described in Item 3.2.b, rather than using the specific data, check this box and attach Exhibit 3.2 briefly describing the reasons for doing so and the methodology used in making those estimates. CA [ ] CR [ ] [ ]

Note: In responding to Item 3.2, careful attention should be paid to the definitions of the italicized terms, which are found in *Board Rules* 1001(i)(iii) (*issuer*), 1001(a)(v) (*audit*), 1001(a)(vii) (*audit services*), 1001(o)(i) (*other accounting services*), 1001(t)(i) (*tax services*), and 1001(n)(ii) (*non-audit services*). The definitions of the four categories of services correspond to the *Commission*'s descriptions of the services for which an *issuer* must disclose fees paid to its auditor. Compare the descriptions of services in Item 9(e) of *Commission* Schedule 14A (17 C.F.R. § 240.14a-101) under the headings "Audit Fees," "Audit-Related Fees," "Tax Fees," and "All Other Fees" with, respectively, the *Board*'s definitions of *Audit Services*, *Other Accounting Services, Tax Services*, and *Non-Audit Services*.

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 3.3 - *FOREIGN REGISTERED PUBLIC ACCOUNTING FIRM*'S DESIGNATION OF U.S. AGENT

a. If the Firm is a *foreign registered public accounting firm* that has designated to the *Commission* or *Board* an agent in the United States upon whom the *Commission* or the *Board* may serve any request to the Firm under Section 106 of the *Act* or any process, pleading, or other papers in any action against the Firm to enforce Section 106 of the *Act,* check here and enter the name and address of the designated agent. ☐

1. Agent Name	
2. Agent Address	
2a. Street Address 1	2d. State
2b. Street Address 2	2e. Zip Code
2c. City	

b. If the Firm is a *foreign registered public accounting firm* and did not check the box for Item 3.3.a, indicate by checking "yes" or "no" whether the Firm has, since July 21, 2010, (1) performed material services upon which another *registered public accounting firm* relied in the conduct of an audit or interim review, (2) issued an audit report, (3) performed audit work, or (4) performed interim reviews. ☐ Yes ☐ No

Note: If the Firm checks "yes" for Item 3.3.b, the Firm must immediately provide to the *Commission* or the *Board* the designation required by Section 106(d)(2) of the *Act*.

Note: If the Firm checks "no" for Item 3.3.b, and the Firm later performs any of the activities identified in Section 106(d)(2) of the Act, the Firm must immediately provide to the *Commission* or the *Board* the designation required by Section 106(d)(2) of the *Act*.

Note: If the Firm has previously designated an agent for service to the *Commission* or *Board* , the Firm must immediately communicate any change in the name or address of the agent to the *Commission* or *Board* .

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part III, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 3.1.c	☐ 3.1.e	☐ 3.2.a.1	☐ 3.2.a.2	☐ 3.2.a.3
☐ 3.2.a.4	☐ 3.2.b	☐ 3.2.c	☐ 3.3.a	☐ 3.3.b

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART IV - *AUDIT* CLIENTS AND *AUDIT REPORTS*

ITEM 4.1 - *AUDIT REPORTS* ISSUED BY THE FIRM FOR *ISSUERS*

a. Provide the following information concerning each *issuer* for which the Firm issued any *audit report*(s) during the reporting period -

1. *Issuer* name
1st Source Corporation

2. *Issuer* CIK (Central Index Key) number, if any
34782 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/17/2026

1. *Issuer* name
1st Source Corporation Employee Stock Ownership and Profit Sharing Plan

2. *Issuer* CIK (Central Index Key) number, if any
34782 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name
AIAI Holdings Corporation

2. *Issuer* CIK (Central Index Key) number, if any
2096362 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

11/22/2025 3/3/2026

1. *Issuer* name
American Integrity Insurance Group, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
2007587 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/26/2026

1. *Issuer* name
Ames National Corporation

2. *Issuer* CIK (Central Index Key) number, if any
1132651 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/12/2026

1. *Issuer* name
Ames National Corporation 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

1132651 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/24/2025

1. *Issuer* name

Aqua Metals, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1621832 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/31/2026

1. *Issuer* name

ArcBest 401(k) and DC Retirement Plan

2. *Issuer* CIK (Central Index Key) number, if any

894405 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name

AT&T Puerto Rico Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

732717 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/23/2025

1. *Issuer* name

AT&T Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

732717 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/23/2025

1. *Issuer* name

AT&T Savings and Security Plan

2. *Issuer* CIK (Central Index Key) number, if any

732717 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/23/2025

1. *Issuer* name

Atlantic American Corporation 401(k) Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

8177 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name

Autonomix Medical, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1617867 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

5/29/2025

1. *Issuer* name

BancFirst Corporation

2. *Issuer* CIK (Central Index Key) number, if any

760498 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/26/2026

1. *Issuer* name

BancPlus Corporation

2. *Issuer* CIK (Central Index Key) number, if any

1118004 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/9/2026

1. *Issuer* name

BancPlus Corporation Employee Stock Ownership Plan with 401(k) Provisions

2. *Issuer* CIK (Central Index Key) number, if any

1118004 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/20/2025

1. *Issuer* name

Bank First Corporation

2. *Issuer* CIK (Central Index Key) number, if any

1746109 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously

☐ issued *audit report*s.

2/27/2026

1. *Issuer* name
Bank7 Corp.

2. *Issuer* CIK (Central Index Key) number, if any
1746129 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/16/2026

1. *Issuer* name
BayFirst Financial Corp.

2. *Issuer* CIK (Central Index Key) number, if any
1649739 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/27/2026

1. *Issuer* name
BellSouth Savings and Security Plan

2. *Issuer* CIK (Central Index Key) number, if any
732717 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/23/2025

1. *Issuer* name
BK Technologies Corp

2. *Issuer* CIK (Central Index Key) number, if any
2186 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/12/2026

1. *Issuer* name
Business First Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1624322 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/26/2026

1. *Issuer* name
BV Financial, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1302387 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/27/2026

1. *Issuer* name

Capital City Bank Group, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

726601 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name

Capital City Bank Group, Inc. 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

726601 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name

CB Financial Services, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1605301 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/13/2026

1. *Issuer* name

CF Bankshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1070680 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/12/2026

1. *Issuer* name

Civista Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

944745 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/6/2026

1. *Issuer* name

CNB Financial Corporation

2. *Issuer* CIK (Central Index Key) number, if any

736772 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/11/2026

1. *Issuer* name

Community Trust Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

350852 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name

Community Trust Bancorp, Inc. Employee Stock Ownership Plan

2. *Issuer* CIK (Central Index Key) number, if any

350852 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/27/2025

1. *Issuer* name

Community Trust Bancorp, Inc. Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

350852 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/27/2025

1. *Issuer* name

Costa Farms, LLC 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

1096343 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name

Country Investors Variable Annuity Account

2. *Issuer* CIK (Central Index Key) number, if any

1223662 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Country Investors Variable Life Account

2. *Issuer* CIK (Central Index Key) number, if any

1249635 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Dogwood Therapeutics, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1818844 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/18/2026

1. *Issuer* name

Dream Finders Homes, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1825088 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/12/2025

1. *Issuer* name

Elite Pharmaceuticals, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1053369 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/30/2025

1. *Issuer* name

Equitrust Life Annuity Account

2. *Issuer* CIK (Central Index Key) number, if any

1055367 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Equitrust Life Annuity Account II

2. *Issuer* CIK (Central Index Key) number, if any

1058149 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously

issued *audit report*s.

4/29/2025

1. *Issuer* name

Equitrust Life Variable Account

2. *Issuer* CIK (Central Index Key) number, if any

1054819 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Equitrust Life Variable Account II

2. *Issuer* CIK (Central Index Key) number, if any

1058150 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Exzeo Group, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1873951 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/26/2026 6/3/2025

1. *Issuer* name

Farm Bureau Life Annuity Account

2. *Issuer* CIK (Central Index Key) number, if any

910819 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/30/2025

1. *Issuer* name

Farm Bureau Life Variable Account

2. *Issuer* CIK (Central Index Key) number, if any

811713 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/30/2025

1. *Issuer* name

Farmers & Merchants Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

792966 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name

Fidelity National Financial Group 401(k) Profit Sharing Plan

2. *Issuer* CIK (Central Index Key) number, if any

1331875 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name

Finward Bancorp

2. *Issuer* CIK (Central Index Key) number, if any

919864 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/25/2026

1. *Issuer* name

First Internet Bancorp

2. *Issuer* CIK (Central Index Key) number, if any

1562463 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/11/2026

1. *Issuer* name

First Merchants Corporation

2. *Issuer* CIK (Central Index Key) number, if any

712534 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/25/2026

1. *Issuer* name

First Merchants Corporation Retirement Income and Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

712534 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/20/2025

1. *Issuer* name

First Mid Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

700565 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name

First Mid Bancshares, Inc. Employee Stock Purchase Plan

2. *Issuer* CIK (Central Index Key) number, if any

700565 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/30/2026

1. *Issuer* name

First Savings Financial Group, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1435508 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

12/12/2025

1. *Issuer* name

Glacier Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

868671 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/25/2026

1. *Issuer* name

Granite Ridge Resources, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1928446 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/5/2026

1. *Issuer* name

Great Southern Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

854560 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/6/2026

1. *Issuer* name

Guerrilla RF, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1832487 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/26/2026

1. *Issuer* name

Hanesbrands Inc. Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

1359841 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/18/2025

1. *Issuer* name

Harris Teeter Supermarkets, Inc. Retirement and Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

56873 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/24/2025

1. *Issuer* name

Hawthorn Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

893847 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/5/2026

1. *Issuer* name

Hawthorn Bancshares, Inc. Profit Sharing 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

893847 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name

HCI Group, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1400810 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously

☐ issued *audit report*s.

2/26/2026

1. *Issuer* name
Hills Bancorporation

2. *Issuer* CIK (Central Index Key) number, if any
732417 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/18/2026

1. *Issuer* name
HireQuest, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1140102 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/30/2026

1. *Issuer* name
Home BancShares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1331520 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name
HomeTrust Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1538263 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/13/2026

1. *Issuer* name
HomeTrust Bank KSOP Plan

2. *Issuer* CIK (Central Index Key) number, if any
1538263 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☑ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name
Horizon Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
706129 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/13/2026

1. *Issuer* name

ICTS International N.V.

2. *Issuer* CIK (Central Index Key) number, if any

1010134 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

5/13/2025

1. *Issuer* name

IF Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1514743 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

9/11/2025

1. *Issuer* name

Ingles Markets, Incorporated Investment/Profit Sharing Plan

2. *Issuer* CIK (Central Index Key) number, if any

50493 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/27/2025

1. *Issuer* name

Intellicheck, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1040896 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/19/2026

1. *Issuer* name

Interparfums, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

822663 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/10/2026

1. *Issuer* name

Investors Title Company

2. *Issuer* CIK (Central Index Key) number, if any

720858 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/16/2026

1. *Issuer* name

J.B. Hunt Transport Services, Inc. Employee Retirement Plan

2. *Issuer* CIK (Central Index Key) number, if any

728535 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name

Kansas City Life Variable Annuity Separate Account

2. *Issuer* CIK (Central Index Key) number, if any

940338 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Kansas City Life Variable Life Separate Account

2. *Issuer* CIK (Central Index Key) number, if any

948972 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

4/29/2025

1. *Issuer* name

Kewaunee Scientific Corporation

2. *Issuer* CIK (Central Index Key) number, if any

55529 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

7/2/2025

1. *Issuer* name

Leggett & Platt, Incorporated 401(k) Plan and Trust Agreement

2. *Issuer* CIK (Central Index Key) number, if any

58492 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/20/2025

1. *Issuer* name

Live Oak Bancshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1462120 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/26/2026	11/17/2025	

1. *Issuer* name

LiveRamp Holdings, Inc. Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

733269 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025		

1. *Issuer* name

Markel Group Inc. Retirement Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any

1096343 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/12/2025		

1. *Issuer* name

Martin Marietta Savings and Investment Plan

2. *Issuer* CIK (Central Index Key) number, if any

916076 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025		

1. *Issuer* name

Merchants Bancorp

2. *Issuer* CIK (Central Index Key) number, if any

1629019 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026		

1. *Issuer* name

MVB Bank, Inc. 401(k) Retirement Plan

2. *Issuer* CIK (Central Index Key) number, if any

1277902 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously

issued *audit report*s.

6/26/2025

1. *Issuer* name
MVB Financial Corp.

2. *Issuer* CIK (Central Index Key) number, if any
1277902 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/12/2026

1. *Issuer* name
National Bank Holdings Corporation ESOP

2. *Issuer* CIK (Central Index Key) number, if any
1475841 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

5/28/2025

1. *Issuer* name
Newell Brands Employee Savings Plan

2. *Issuer* CIK (Central Index Key) number, if any
814453 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name
NI Holdings, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1681206 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

3/6/2026

1. *Issuer* name
Nicolet Bankshares, Inc.

2. *Issuer* CIK (Central Index Key) number, if any
1174850 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/27/2026

1. *Issuer* name
Nicolet National Bank 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any
1174850 Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/24/2025

1. *Issuer* name

North European Oil Royalty Trust

2. *Issuer* CIK (Central Index Key) number, if any

72633 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

12/31/2025

1. *Issuer* name

Old Dominion 401(k) Retirement Plan

2. *Issuer* CIK (Central Index Key) number, if any

878927 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/24/2025

1. *Issuer* name

Old Market Capital Corporation

2. *Issuer* CIK (Central Index Key) number, if any

1000045 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/27/2025

1. *Issuer* name

Olin Corporation Contributing Employee Ownership Plan

2. *Issuer* CIK (Central Index Key) number, if any

74303 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/6/2025

1. *Issuer* name

ONE Gas, Inc. 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

1587732 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/26/2025

1. *Issuer* name

ONEOK, Inc. 401(k) Plan

2. *Issuer* CIK (Central Index Key) number, if any

1039684 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

1. *Issuer* name

Origin Bancorp, Inc.

2. *Issuer* CIK (Central Index Key) number, if any

1516912 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

2/25/2026

1. *Issuer* name

Origin Bancorp, Inc. Employee Retirement Plan

2. *Issuer* CIK (Central Index Key) number, if any

1516912 ☐ Check here, if none

3. Date(s) of the *audit report*(s) (mm/dd/yyyy)

☐ Check here if the dates listed below correspond solely to the issuance of consents to the use of previously issued *audit report*s.

6/25/2025

b. If the Firm identified any *issuer*s in response to Item 4.1.a., indicate, by checking the box corresponding to the appropriate range set out below, the total number of Firm personnel who exercised the authority to sign the Firm's name to an *audit report,* for an *issuer*, during the reporting period. If the Firm checks the box indicating that the number is in the range of 1-9, provide the exact number.

- ○ 1-9 Exact Number:
- ○ 10-25
- ○ 26-50
- ◉ 51-100
- ○ 101-200
- ○ More than 200

Note: In responding to Item 4.1(a), careful attention should be paid to the definition of *issuer*. The Firm should not, for example, overlook the fact that investment companies may be *issuers*, or that employee benefit plans that file reports on *Commission* Form 11-K are *issuers*.

Note: In responding to Item 4.1, do not list any *issuer* more than once. For each *issuer,* provide in Item 4.1.a.3 the *audit report* dates (as described in AU 530, Dating of the Independent Auditor's Report) of all such *audit reports* for that *issuer*, including each date of any dual-dated *audit report*.

Note: In responding to Item 4.1.a.3, it is not necessary to provide the date of any consent to an *issuer*'s use of an *audit report* previously issued for that *issuer*, except that, if such consents constitute the only instances of the Firm issuing *audit reports* for a particular *issuer* during the reporting period, the Firm should include that *issuer* in Item 4.1 and include the dates of such consents and indicate whether the dates provided correspond to the issuance of a consent to the use of a previously-issued *audit report* in Item 4.1.a.3.

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 4.2 - *ISSUER AUDIT REPORTS* WITH RESPECT TO WHICH THE FIRM *PLAYED A SUBSTANTIAL ROLE* DURING THE REPORTING PERIOD

a. If no *issuers* are identified in response to Item 4.1.a, but the Firm *played a substantial role in the preparation or furnishing of an audit report* for an *issuer* that was issued during the reporting period, provide the following information concerning each *issuer* with respect to which the Firm did so -

Note: If the Firm identifies any *issuer* in response to Item 4.1, the Firm need not respond to Item 4.2.

Note: In responding to Item 4.2, do not list any *issuer* more than once.

1. *Issuer* name

2. *Issuer* CIK (Central Index Key) number, if any

☐ Check here, if none

3. Name of the *registered public accounting firm* that issued the *audit report*(s)

4. The end date(s) of the fiscal period(s) covered by the financial statements that were the subject of the *audit report*(s)

5. *Substantial role played* by the Firm with respect to the *audit report*(s)

If other is selected, please enter *substantial role played* below -

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 4.3 - *AUDIT REPORTS* ISSUED BY THE FIRM FOR *BROKERS* OR *DEALERS*

a. Provide the following information concerning each *audit report* issued for a *broker* or *dealer* during the reporting period –

1. *Broker*'s or *Dealer*'s name
ABG Sundal Collier, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
30605

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
886118 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/24/2026

1. *Broker*'s or *Dealer*'s name
Acquiom Financial LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
170074

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1594349 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/30/2026

1. *Broker*'s or *Dealer*'s name
AE Financial Services, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
298608

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1753303 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name
ALPS Distributors, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
16853

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
775156 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/27/2026

1. *Broker*'s or *Dealer*'s name
ALPS Portfolio Solutions Distributor, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
144464

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1403614 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
American Century Investment Services, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
17437

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
79145 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/24/2026

1. *Broker*'s or *Dealer*'s name
AmeriVet Securities, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
34786

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
912678 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
Anubis Securities LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
157642

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1518468 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/25/2026

1. *Broker*'s or *Dealer*'s name
Atomic Brokerage LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
315263

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1882121 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/16/2026

1. *Broker*'s or *Dealer*'s name
Banco do Brasil Securities LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
132701

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1301207 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/20/2026

1. *Broker*'s or *Dealer*'s name
Belle Haven Investments, L.P.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
29278

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
880018 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/30/2026

1. *Broker*'s or *Dealer*'s name
Bluerock Capital Markets, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
136974

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1337052 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
Bonds.com, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
43875

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1044991 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
C.R. Lloyd Investment Services, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
325212

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1976197 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/27/2026

1. *Broker*'s or *Dealer*'s name
Capital Dynamics Broker Dealer LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
148780

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1448770 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name
Clarkson Securities, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
30882

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
892711 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
CNL Securities Corp.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
10356

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
700307 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name

Copper Financial Network, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

168203

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1579095 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/26/2026

1. *Broker*'s or *Dealer*'s name

CP Client Solutions LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

330402

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

2033621 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/26/2026

1. *Broker*'s or *Dealer*'s name

Credit Agricole Securities (USA) Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

190

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

33738 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/26/2026

1. *Broker*'s or *Dealer*'s name

CU Investment Solutions LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

43753

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1044202 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

11/24/2025

1. *Broker*'s or *Dealer*'s name

CVC Funding, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

277056

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1647525 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/17/2026

1. *Broker*'s or *Dealer*'s name

Eagle Point Securities LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

324528

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1963784 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/9/2026

1. *Broker*'s or *Dealer*'s name
EIG Global Energy Partners Capital Markets, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
288254

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1703219 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/18/2026

1. *Broker*'s or *Dealer*'s name
FBL Marketing Services, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
5309

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
78027 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name
Floww Private Markets

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
328174

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1993563 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
10/30/2025

1. *Broker*'s or *Dealer*'s name
FMI Capital Advisors, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
129262

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1267668 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name
Hand Securities, Inc

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
45198

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1061066 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
Harris Williams Primary Fund Placement, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
131452

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1289006 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/25/2026

1. *Broker*'s or *Dealer*'s name
Investec Securities (US) LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
138421

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1344804 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
6/6/2025

1. *Broker*'s or *Dealer*'s name
Javelin Private Capital Group LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
310169

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1842624 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/20/2026

1. *Broker*'s or *Dealer*'s name
Larson Financial Securities, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
152517

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1478145 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/27/2026

1. *Broker*'s or *Dealer*'s name
MEC Global Partners LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
305000

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1789121 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/19/2026

1. *Broker*'s or *Dealer*'s name
Meridian Platform Securities, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
287845

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1699246 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/25/2026

1. *Broker*'s or *Dealer*'s name
N.I.S. Financial Services, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

5361

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

49589 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/27/2026

1. *Broker*'s or *Dealer*'s name

NCMG LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

317428

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1891784 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/24/2026

1. *Broker*'s or *Dealer*'s name

NexBank Securities Inc

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

133267

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1306765 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/31/2026

1. *Broker*'s or *Dealer*'s name

Paralel Distributors LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

316115

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1877227 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/25/2026

1. *Broker*'s or *Dealer*'s name

Q Advisors LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

127232

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1234445 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/27/2026

1. *Broker*'s or *Dealer*'s name

Red Mountain Securities LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

317716

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1894192 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/26/2026

1. *Broker*'s or *Dealer*'s name

REDI Global Technologies LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
41924

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1024711 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/20/2026

1. *Broker*'s or *Dealer*'s name
Rothschild & Co Global Market Solutions LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
140564

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1360502 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/30/2026

1. *Broker*'s or *Dealer*'s name
SI Securities, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
170937

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1603038 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
SS&C Market Services, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
23568

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
842730 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name
Standard Chartered Securities (North America) LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
130847

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1281941 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/26/2026

1. *Broker*'s or *Dealer*'s name
Sunset Financial Services, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
3538

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
95453 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/26/2026

1. *Broker*'s or *Dealer*'s name

TAG Capital Partners LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

318850

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1928807 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/24/2026

1. *Broker*'s or *Dealer*'s name

The Baker Group, LP

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

7888

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

278307 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

2/23/2026

1. *Broker*'s or *Dealer*'s name

The GMS Group, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

8000

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

311887 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/19/2026

1. *Broker*'s or *Dealer*'s name

The Strategic Alliance Corporation

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

32788

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

911028 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

3/2/2026

1. *Broker*'s or *Dealer*'s name

The Strategic Financial Alliance, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

126514

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1225151 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

4/23/2025

1. *Broker*'s or *Dealer*'s name

Tora Trading Services, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

135423

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1325845 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/20/2026

1. *Broker*'s or *Dealer*'s name
TradeUP Securities, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
18483

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
803039 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/2/2026

1. *Broker*'s or *Dealer*'s name
Triumph Capital Markets, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
327963

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1992183 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/24/2026

1. *Broker*'s or *Dealer*'s name
UniCredit Capital Markets LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
7789

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
276683 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/11/2026

1. *Broker*'s or *Dealer*'s name
Unlu Securities Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
238786

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1643230 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
2/24/2026

1. *Broker*'s or *Dealer*'s name
US Tiger Securities, Inc.

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
120583

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any
1172317 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)
3/31/2026

1. *Broker*'s or *Dealer*'s name
William Hood & Company, LLC

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number
293416

3. *Broker*'s or *Dealer*'s CIK (Central Index Key) number, if any

1740985 ☐ Check here, if none

4. Date(s) of the *audit report*(s) (mm/dd/yyyy)

11/4/2025

b. If the Firm identified any *brokers* or *dealers* in response to Item 4.3.a., indicate, by checking the box corresponding to the appropriate range set out below, the total number of Firm personnel who exercised the authority to sign the Firm's name to an *audit report*, for a *broker* or *dealer*, during the reporting period. If the Firm checks the box indicating that the number is in the range of 1-9, provide the exact number.

- ○ 1-9 — Exact Number:
- ◉ 10-25
- ○ 26-50
- ○ 51-100
- ○ 101-200
- ○ More than 200

Note: For each *audit report* provide in Item 4.3.a.3 the *audit report* dates (as described in AU 530, Dating of the Independent Auditor's Report) including each date of any dual-dated *audit report*.

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 4.4 - *BROKER* OR *DEALER AUDIT REPORTS* WITH RESPECT TO WHICH THE FIRM *PLAYED A SUBSTANTIAL ROLE* DURING THE REPORTING PERIOD

a. If no *brokers* or *dealers* are identified in response to Item 4.3.a, but the Firm *played a substantial role in the preparation or furnishing of an audit report* for a *broker* or *dealer* that was issued during the reporting period, provide the following information concerning each *broker* or *dealer* with respect to which the Firm did so –

Note: If the Firm identifies any *broker* or *dealer* in response to Item 4.3, the Firm need not respond to Item 4.4.

Note: In responding to Item 4.4, do not list any *broker* or *dealer* more than once.

1. *Broker*'s or *Dealer*'s name

2. *Broker*'s or *Dealer*'s CRD (Central Registration Depository) number

3. *Broker*'s or *Dealer*'s CIK number, if any

☐ Check here, if none

4. Name of the *registered public accounting firm* that issued the *audit report*(s)

5. The end date(s) of the fiscal period(s) covered by the financial statements that were subject of the *audit report*(s)

6. Substantial role played by the Firm with respect to the *audit report*(s)

If other is selected, please enter substantial role played below -

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part IV, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 4.2.a.1 ☐ 4.2.a.2 ☐ 4.2.a.3 ☐ 4.2.a.4 ☐ 4.2.a.5

☐ 4.4.a.1 ☐ 4.4.a.2 ☐ 4.4.a.3 ☐ 4.4.a.4 ☐ 4.4.a.5

☐ 4.4.a.6

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART V - OFFICES AND AFFILIATIONS

In Part V, the Firm should provide information that is current as of the last day of the reporting period.

ITEM 5.1 - FIRM'S OFFICES

List the physical address and, if different, the mailing address, of each of the Firm's offices.

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 12301 Research Boulevard	Street address 1
Street address 2 Building IV, Suite 290	Street address 2
City Austin	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 78759	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 5255 E Williams Circle	Street address 1
Street address 2 Suite 6000	Street address 2
City Tucson	City
State/Province Arizona	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 85711	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 14 Tri-Park Way	Street address 1
Street address 2	Street address 2
City Appleton	City
State/Province Wisconsin	State/Province
Non-U.S. State/Province	Non-U.S. State/Province

Zip/Postal code 54914	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 191 Peachtree Street NE	Street address 1
Street address 2 Suite 2700	Street address 2
City Atlanta	City
State/Province Georgia	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 30303	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 807 Las Cimas Parkway	Street address 1
Street address 2 Suite 310	Street address 2
City Austin	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 78746	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 800 Shades Creek Parkway	Street address 1
Street address 2 Suite 500	Street address 2
City Birmingham	City
State/Province Alabama	State/Province
Non-U.S. State/Province	Non-U.S. State/Province

Zip/Postal code	Zip/Postal code
35209	

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 120 E. Palmetto Park Road	Street address 1
Street address 2 Suite 403	Street address 2
City Boca Raton	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 33432	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1818 Wallace Ct Building #3	Street address 1
Street address 2 Suite 201	Street address 2
City Bowling Green	City
State/Province Kentucky	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 42103	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 Building III Suite LL	Street address 1
Street address 2 800 State Highway 248	Street address 2
City Branson	City
State/Province Missouri	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code

65616	

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 9 Bay State Ct	Street address 1
Street address 2	Street address 2
City Brewster	City
State/Province Massachusetts	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 02631	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 525 East Bay Street	Street address 1
Street address 2 Suite 100	Street address 2
City Charleston	City
State/Province South Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 29403	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 500 Virginia Street East	Street address 1
Street address 2 Suite 800	Street address 2
City Charleston	City
State/Province West Virginia	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 25301	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 615 S. College Street	Street address 1
Street address 2 Suite 700	Street address 2
City Charlotte	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 28202	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 4350 Congress Street	Street address 1
Street address 2 Suite 900	Street address 2
City Charlotte	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 28209	Zip/Postal code

Office physical address	Office mailing address ☐ Same as physical address
Country United States	Country United States
Street address 1 312 Walnut Street	Street address 1 P.O. Box 5367
Street address 2 Suite 3000	Street address 2
City Cincinnati	City Cincinnati
State/Province Ohio	State/Province Ohio
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 45202	Zip/Postal code 45201

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 111 S. Tejon Street	Street address 1
Street address 2 Suite 800	Street address 2
City Colorado Springs	City
State/Province Colorado	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 80903	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 14241 Dallas Parkway Suite 1100	Street address 1
Street address 2 International Plaza 3	Street address 2
City Dallas	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 75254	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 225 N. Water Street	Street address 1
Street address 2 Suite 400	Street address 2
City Decatur	City
State/Province Illinois	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 62523	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address

Country	Country
United States	
Street address 1	Street address 1
1801 California Street	
Street address 2	Street address 2
Suite 2900	
City	City
Denver	
State/Province	State/Province
Colorado	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
80202	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
3921 W. Willow Road	
Street address 2	Street address 2
Suite B	
City	City
Enid	
State/Province	State/Province
Oklahoma	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
73703	

Office physical address	Office mailing address ☐ Same as physical address
Country	Country
United States	United States
Street address 1	Street address 1
400 Cross Pointe Boulevard	P.O. Box 628
Street address 2	Street address 2
City	City
Evansville	Evansville
State/Province	State/Province
Indiana	Indiana
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
47715	47704

Office physical address	Office mailing address ☑ Same as physical address
Country	Country

United States	
Street address 1 500 E. Broward Boulevard	Street address 1
Street address 2 Suite 1550	Street address 2
City Fort Lauderdale	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 33394	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 51 S 6th St.	Street address 1
Street address 2 Unit C	Street address 2
City Fort Smith	City
State/Province Arkansas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 72901	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 501 Office Center Drive	Street address 1
Street address 2 Suite 300	Street address 2
City Fort Washington	City
State/Province Pennsylvania	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 19034	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country

Street address 1 111 E Wayne Street	Street address 1
Street address 2 Suite 600	Street address 2
City Fort Wayne	City
State/Province Indiana	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 46802	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 777 Main Street	Street address 1
Street address 2 Suite 2000	Street address 2
City Fort Worth	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 76102	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 4161 Piedmont Parkway	Street address 1
Street address 2 Suite 310	Street address 2
City Greensboro	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 27410	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1	Street address 1

1003 Red Banks Road	
Street address 2	Street address 2
City Greenville	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 27858	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 11 Brendan Way	Street address 1
Street address 2 Suite 200	Street address 2
City Greenville	City
State/Province South Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 29615	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1620 Asheville Highway	Street address 1
Street address 2	Street address 2
City Hendersonville	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 28791	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 2700 Post Oak Boulevard	Street address 1

Street address 2 Suite 1500	Street address 2
City Houston	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 77056	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 820 Massachusetts Avenue	Street address 1
Street address 2 Suite 1370	Street address 2
City Indianapolis	City
State/Province Indiana	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 46204	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 2020 Main Street	Street address 1
Street address 2 Suite 1160	Street address 2
City Irvine	City
State/Province California	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 92614	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 200 South Wood Avenue	Street address 1
Street address 2	Street address 2

Suite 125	
City Iselin	City
State/Province New Jersey	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 08830	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1400 Meadowbrook Road	Street address 1
Street address 2 Suite 300	Street address 2
City Jackson	City
State/Province Mississippi	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 39211	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 245 Riverside Ave.	Street address 1
Street address 2 Suite 410	Street address 2
City Jacksonville	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 32202	Zip/Postal code

Office physical address	Office mailing address ☐ Same as physical address
Country United States	Country United States
Street address 1 3129 Hammons Boulevard	Street address 1 P.O. Box 1824
Street address 2	Street address 2

City	City
Joplin	Joplin
State/Province	State/Province
Missouri	Missouri
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
64804	64802

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
1201 Walnut Street	
Street address 2	Street address 2
Suite 1700	
City	City
Kansas City	
State/Province	State/Province
Missouri	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
64106	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
900 South Gay Street	
Street address 2	Street address 2
Suite 1900	
City	City
Knoxville	
State/Province	State/Province
Tennessee	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
37902	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
1248 O Street	
Street address 2	Street address 2
Suite 1040	
City	City

Lincoln	
State/Province Nebraska	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 68508	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 111 Center Street	Street address 1
Street address 2 Suite 1600	Street address 2
City Little Rock	City
State/Province Arkansas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 72201	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1875 Century Park East	Street address 1
Street address 2 Suite 850	Street address 2
City Los Angeles	City
State/Province California	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 90067	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 101 South Fifth Street	Street address 1
Street address 2 Suite 3800	Street address 2
City Louisville	City

State/Province	State/Province
Kentucky	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
40222	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
8517 Excelsior Drive	
Street address 2	Street address 2
Suite 301	
City	City
Madison	
State/Province	State/Province
Wisconsin	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
53717	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
1715 Aaron Brenner Drive	
Street address 2	Street address 2
Suite 701	
City	City
Memphis	
State/Province	State/Province
Tennessee	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
38120	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
1222 Demonbreun Street	
Street address 2	Street address 2
Suite 950	
City	City
Nashville	
State/Province	State/Province

Tennessee	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 37203	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 135 West 50th Street	Street address 1
Street address 2	Street address 2
City New York	City
State/Province New York	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 10036	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 440 Monticello Avenue	Street address 1
Street address 2 Suite 2050	Street address 2
City Norfolk	City
State/Province Virginia	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 23510	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 Two Leadership Square South Tower	Street address 1
Street address 2 211 N. Robinson Avenue Suite 600	Street address 2
City Oklahoma City	City
State/Province Oklahoma	State/Province

Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 73102	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1120 S. 101st Street	Street address 1
Street address 2 Suite 410	Street address 2
City Omaha	City
State/Province Nebraska	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 68124	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 255 South Orange Avenue #600	Street address 1
Street address 2	Street address 2
City Orlando	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 32801	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 2501 Blue Ridge Road	Street address 1
Street address 2 Suite 500	Street address 2
City Raleigh	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province

Zip/Postal code 27607	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 One James Center, 901 East Cary St.	Street address 1
Street address 2 Suite 1000	Street address 2
City Richmond	City
State/Province Virginia	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 23219	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 5115 W. JB Hunt Drive	Street address 1
Street address 2 Suite 100	Street address 2
City Rogers	City
State/Province Arkansas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 72758	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 300 University Avenue	Street address 1
Street address 2 Suite 120	Street address 2
City Sacramento	City
State/Province California	State/Province
Non-U.S. State/Province	Non-U.S. State/Province

Zip/Postal code	Zip/Postal code
95825	

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 250 E. 200 S.	Street address 1
Street address 2 Suite 1200	Street address 2
City Salt Lake City	City
State/Province Utah	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 84111	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 8200 I-10	Street address 1
Street address 2 Suite 900	Street address 2
City San Antonio	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 78230	Zip/Postal code

Office physical address	Office mailing address ☐ Same as physical address
Country United States	Country United States
Street address 1 910 E. St. Louis Street	Street address 1 P.O. Box 1190
Street address 2 Suite 200	Street address 2
City Springfield	City Springfield
State/Province Missouri	State/Province Missouri
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code

65806	65801

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 One Metropolitan Square	Street address 1
Street address 2 211 N. Broadway Suite 600	Street address 2
City St. Louis	City
State/Province Missouri	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 63102	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 133 East First North Street	Street address 1
Street address 2 Suite 8	Street address 2
City Summerville	City
State/Province South Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 29483	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 307 W Park Ave	Street address 1
Street address 2 Suite 202	Street address 2
City Tallahassee	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 32301	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 400 North Ashley Dr	Street address 1
Street address 2 Suite 2540	Street address 2
City Tampa	City
State/Province Florida	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 33602	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 999 E Playa Del Norte Dr	Street address 1
Street address 2 Ste 410	Street address 2
City Tempe	City
State/Province Arizona	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 85288	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 110 N. Elgin Avenue	Street address 1
Street address 2 Suite 400	Street address 2
City Tulsa	City
State/Province Oklahoma	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 74120	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 510 North Valley Mills Drive	Street address 1
Street address 2 Suite 200	Street address 2
City Waco	City
State/Province Texas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 76710	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1401 50th Street	Street address 1
Street address 2 Suite 350	Street address 2
City West Des Moines	City
State/Province Iowa	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 50266	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 1551 N. Waterfront Parkway	Street address 1
Street address 2 Suite 300	Street address 2
City Wichita	City
State/Province Kansas	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 67206	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address

Country	Country
United States	
Street address 1	Street address 1
60 Crossways Park Drive West	
Street address 2	Street address 2
Suite 301	
City	City
Woodbury	
State/Province	State/Province
New York	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
11797	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
10150 West National Avenue	
Street address 2	Street address 2
Office 219 & 220	
City	City
Milwaukee	
State/Province	State/Province
Wisconsin	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
53227	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
1410 Spring Hill Road	
Street address 2	Street address 2
Suite 500	
City	City
Tysons	
State/Province	State/Province
Virginia	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
22102	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country

United States	
Street address 1 One Oak Plaza	Street address 1
Street address 2 Suite 300	Street address 2
City Asheville	City
State/Province North Carolina	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 28806	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 One Post Office Square	Street address 1
Street address 2 Suite 2250	Street address 2
City Boston	City
State/Province Massachusetts	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 02109	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 333 W Wacker Drive	Street address 1
Street address 2 Suite 1100	Street address 2
City Chicago	City
State/Province Illinois	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 60606	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country

Street address 1	Street address 1
100 South Fifth Street	
Street address 2	Street address 2
Suite 910	
City	City
Minneapolis	
State/Province	State/Province
Minnesota	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
55402	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
106 Isabella Street	
Street address 2	Street address 2
Suite 900	
City	City
Pittsburgh	
State/Province	State/Province
Pennsylvania	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
15212	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1
100 Montgomery Street	
Street address 2	Street address 2
Suite 1600	
City	City
San Francisco	
State/Province	State/Province
California	
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code	Zip/Postal code
94104	

Office physical address	Office mailing address ☑ Same as physical address
Country	Country
United States	
Street address 1	Street address 1

2710 Centennial Road	
Street address 2	Street address 2
City Toledo	City
State/Province Ohio	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 43617	Zip/Postal code

Office physical address	Office mailing address ☑ Same as physical address
Country United States	Country
Street address 1 323 S 1st Street	Street address 1
Street address 2	Street address 2
City San Jose	City
State/Province California	State/Province
Non-U.S. State/Province	Non-U.S. State/Province
Zip/Postal code 95113	Zip/Postal code

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 5.2 - *AUDIT*-RELATED MEMBERSHIPS, AFFILIATIONS, OR SIMILAR ARRANGEMENTS

a. State whether the Firm has any:

1. Membership or affiliation in or with any network, arrangement, alliance, partnership or association that licenses or authorizes *audit* procedures or manuals or related materials, or the use of a name in connection with the provision of *audit services* or accounting services	(•) Yes ( ) No
2. Membership or affiliation in or with any network, arrangement, alliance, partnership or association that markets or sells *audit services* or through which joint *audits* are conducted	(•) Yes ( ) No
3. Arrangement, whether by contract or otherwise, with another entity through or from which the Firm employs or leases personnel to perform *audit services*	( ) Yes (•) No

b. If the Firm provides any affirmative response in Item 5.2.a, identify the entity with which the Firm has each such relationship -

Entity name
Forvis Mazars Global Ltd.

Entity Address

Country	State/Province
United Kingdom	
Street address 1	**Non-U.S. State/Province**
30 Old Bailey	
Street address 2	**Zip/Postal code**
	EC4M 7AU
City	
London	

Provide a brief description of the relationship the Firm has with this entity
Forvis Mazars Global Ltd is a UK private company limited by guarantee that is the Forvis Mazars network entity. Forvis Mazars, LLP is a member.

Note: Item 5.2.b does not require information concerning every other entity that is part of the network, arrangement, alliance, partnership or association, but only information concerning the network, arrangement, alliance, partnership, or association itself, or the principal entity through which it operates.

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part V, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 5.1 ☐ 5.2.a.1 ☐ 5.2.a.2 ☐ 5.2.a.3 ☐ 5.2.b

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART VI - PERSONNEL

In Part VI, the Firm should provide information that is current as of the last day of the reporting period.

ITEM 6.1 - NUMBER OF FIRM PERSONNEL

Provide the following numerical totals -

		CA	CR
a. Total number of the Firm's *accountants*	4311	☐	☐
b. Total number of the Firm's certified public accountants (include in this number all *accountants* employed by the Firm with comparable licenses from non-U.S. jurisdictions)	2768	☐	☐
c. Total number of the Firm's personnel	6977	☐	☐

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part VI, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 6.1.a ☐ 6.1.b ☐ 6.1.c

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART VII - CERTAIN RELATIONSHIPS

ITEM 7.1 - INDIVIDUALS WITH CERTAIN DISCIPLINARY OR OTHER HISTORIES

a. Other than a relationship required to be reported in Item 5.1 of Form 3, and only if the Firm has not previously identified the individual and the sanction or *Commission* order on Form 1, Form 2, or Form 3, state whether, as of the end of the reporting period, the Firm has any employee, partner, shareholder, principal, member, or owner who was the subject of a *Board* disciplinary sanction or a *Commission* order under Rule 102(e) of the *Commission's* Rules of Practice, entered within the five years preceding the end of the reporting period and without that sanction or order having been vacated on review or appeal, and who provided at least ten hours of *audit services* for any *issuer*, *broker*, or *dealer* during the reporting period.

○ Yes
◉ No

CA ☐ CR ☐

b. If the Firm provides an affirmative response to Item 7.1.a, provide the following information for each such individual -

1. Family name (last name)

Given name (first name)

2. Description of the nature of the relationship

3. Date Firm entered into relationship (mm/dd/yyyy)

4. The date of the relevant order and an indication whether it was a *Board* order or a *Commission* order

○ *Board* ○ *Commission*

CA ☐ CR ☐

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 7.2 - ENTITIES WITH CERTAIN DISCIPLINARY OR OTHER HISTORIES

a. Other than a relationship required to be reported in Item 5.2 of Form 3, and only if the Firm has not previously reported the information on Form 1, Form 2, or Form 3, state whether, as of the end of the reporting period, the Firm was owned or partly owned by an entity that was the subject of (a) a *Board* disciplinary sanction entered within the five years preceding the end of the reporting period, which has not been vacated on review or appeal, suspending or revoking that entity's registration or disapproving that entity's application for registration, or (b) a *Commission* order under Rule 102(e) of the *Commission*'s Rules of Practice entered within the five years preceding the end of the reporting period, which has not been vacated on appeal, suspending or denying the privilege of appearing or practicing before the *Commission*.

○ Yes
◉ No

CA CR ☐ ☐

b. If the Firm provides an affirmative response to 7.2.a, provide the following information for each such entity -

1. Name of entity

2. Description of the nature of the relationship

3. Date Firm entered into relationship (mm/dd/yyyy)

4. The date of the relevant order and an indication whether it was a *Board* order or a *Commission* order

○ *Board* ○ *Commission*

CA CR ☐ ☐

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

ITEM 7.3 - CERTAIN ARRANGEMENTS TO RECEIVE CONSULTING OR OTHER PROFESSIONAL SERVICES

a. Other than a relationship required to be reported in Item 5.3 of Form 3, state whether the Firm received, or entered into a contractual or other arrangement to receive, from any individual or entity meeting the criteria described in Items 7.1.a. or 7.2.a, consulting or other professional services related to the Firm's *audit* practice or related to services the Firm provides to *issuer, broker*, or *dealer audit* clients.

○ Yes
◉ No

CA CR ☐ ☐

b. If the Firm provides an affirmative response to 7.3.a, provide the following information for each such individual or entity -

1. Name of individual or entity

2. Description of the nature of the relationship

3. Date Firm entered into relationship (mm/dd/yyyy)

4. Description of the services provided or to be provided to the Firm by the individual or entity

5. The date of the relevant order and an indication whether it was a *Board* order or a *Commission* order

○ *Board* ○ *Commission*

CA CR ☐ ☐

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part VII, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 7.1.a ☐ 7.1.b ☐ 7.2.a ☐ 7.2.b

☐ 7.3.a ☐ 7.3.b

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART VIII - ACQUISITION OF ANOTHER *PUBLIC ACCOUNTING FIRM* OR SUBSTANTIAL PORTIONS OF ANOTHER *PUBLIC ACCOUNTING FIRM'S* PERSONNEL

If the Firm became registered on or after December 31, 2009, the first annual report that the Firm files must provide this information for the period running from the date used by the Firm for purposes of General Instruction 9 of Form 1 (regardless of whether that date was before or after the beginning of the reporting period) through March 31 of the year in which the annual report is required to be filed.

ITEM 8.1 - ACQUISITION OF ANOTHER *PUBLIC ACCOUNTING FIRM* OR SUBSTANTIAL PORTIONS OF ANOTHER *PUBLIC ACCOUNTING FIRM*'S PERSONNEL

a. Did the Firm acquire another *public accounting firm*?

- ○ Yes
- ◉ No

b. If the Firm provides an affirmative response to Item 8.1.a, provide the name(s) of the *public accounting firm*(s) that the Firm acquired.

Name of acquired *public accounting firm*

c. Did the Firm, without acquiring another *public accounting firm*, take on as employees, partners, shareholders, principals, members, or owners 75% or more of the persons who, as of the beginning of the reporting period, were the partners, shareholders, principals, members, or owners of another *public accounting firm*?

- ○ Yes
- ◉ No

d. If the Firm provides an affirmative response to Item 8.1.c, provide the following information for each such *public accounting firm* -

Name of the other *public accounting firm*

Number of the other *public accounting firm*'s former partners, shareholders, principals, members, owners, and *accountants* that joined the Firm

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part VIII, has either withheld certain information, or declined to request certain information from relevant third parties, on the ground that the Firm cannot provide the information to the *Board* on this Form 2 without violating non-U.S. law, the Firm must identify here all items -- and only those items -- with respect to which there is any information that the Firm has actually withheld or declined to request.

☐ 8.1.a ☐ 8.1.b ☐ 8.1.c ☐ 8.1.d

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART IX - AFFIRMATION OF CONSENT

ITEM 9.1 - AFFIRMATION OF UNDERSTANDING OF, AND COMPLIANCE WITH, CONSENT REQUIREMENTS

Whether or not the Firm, in applying for registration with the *Board*, provided the signed statement required by Item 8.1 of Form 1, affirm, by checking the boxes, that -

a. The Firm has consented to cooperate in and comply with any request for testimony or the production of documents made by the *Board* in furtherance of its authority and responsibilities under the Sarbanes-Oxley Act of 2002; ☑

b. The Firm has secured from each of its *associated person*s, and agrees to enforce as a condition of each such person's continued employment by or other association with the Firm, a consent indicating that the *associated person* consents to cooperate in and comply with any request for testimony or the production of documents made by the *Board* in furtherance of its authority under the Sarbanes-Oxley Act of 2002, and that the *associated person* understands and agrees that such consent is a condition of his or her continued employment by or other association with the Firm; and ☑

c. The Firm understands and agrees that cooperation and compliance, as described in Item 9.1.a, and the securing and enforcing of consents from its *associated persons* as described in Item 9.1.b, is a condition to the continuing effectiveness of the registration of the Firm with the *Board*. ☑

Note 1: The affirmation in Item 9.1.b shall not be understood to include an affirmation that the Firm has secured such consents from any *associated person* that is a *registered public accounting firm*.

Note 2: The affirmation in Item 9.1.b shall not be understood to include an affirmation that the Firm has secured such consents from any *associated person* that is a *foreign public accounting firm* in circumstances where that *associated person* asserts that non-U.S. law prohibits it from providing the consent, so long as the Firm possesses in its files documents relating to the *associated person's* assertion about non-U.S. law that would be sufficient to satisfy the requirements of subparagraphs (2) through (4) of Rule 2207(c) if that *associated person* were a *registered public accounting firm* filing a Form 2 and withholding this affirmation. This exception to the affirmation in Item 9.1.b does not relieve the Firm of its obligation to enforce cooperation and compliance with *Board* demands by any such *associated person* as a condition of continued association with the Firm.

Note 3: If the Firm is a *foreign registered public accounting firm*, the affirmations in Item 9.1 that relate to *associated persons* shall be understood to encompass every *accountant* who is a proprietor, partner, principal, shareholder, officer, or *audit* manager of the Firm and who provided at least ten hours of *audit services* for any *issuer* during the reporting period.

INCOMPLETE RESPONSES DUE TO ASSERTED NON-U.S. LEGAL RESTRICTIONS

If the Firm is a *foreign registered public accounting firm* that, in responding to Part IX, has withheld an affirmation on the ground that the Firm cannot provide the affirmation without violating non-U.S. law, the Firm must identify here all items - and only those items - as to which the Firm has actually declined to provide the affirmation.

☐ 9.1.a ☐ 9.1.b ☐ 9.1.c

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART X - CERTIFICATION OF THE FIRM

ITEM 10.1 SIGNATURE OF PARTNER OR AUTHORIZED OFFICER

This Form must be signed on behalf of the Firm by an authorized partner or officer of the Firm including, in accordance with Rule 2204, both a signature that appears in typed form within the electronic submission and a corresponding manual signature retained by the Firm.

I, the undersigned, certify that -

a. I am a partner or an officer of the Firm and I am authorized to sign this Form on behalf of the Firm;

b. I have reviewed this Form;

c. based on my knowledge, the Firm has filed a special report on Form 3 with respect to each event that occurred during the reporting period and for which a special report on Form 3 is required under the *Board*'s *rules*;

d. based on the signer's knowledge, this Form does not contain any untrue statement of a material fact or omit to state a material fact necessary to make the statements made, in light of the circumstances under which such statements were made, not misleading; and

e. either-

(●) 1. based on the signer's knowledge, the Firm has not failed to include in this Form any information or affirmation that is required by the instructions to this Form, or

( ) 2. based on the signer's knowledge-
(A) the Firm is a *foreign registered public accounting firm* and has not failed to include in this form any information or affirmation that is required by the instructions to this Form except for information or affirmations that the Firm asserts it cannot provide to the *Board* on this Form 2 without violating non-U.S. law;
(B) with respect to any such withheld information or affirmation, the Firm has satisfied the requirements of PCAOB Rule 2207(b) and has in its possession the materials required by PCAOB Rule 2207(c); and
(C) the Firm has indicated, in accordance with the instructions to this Form, each item of this Form with respect to which the Firm has withheld any required information or affirmation.

Typed signature (to be submitted electronically):	David Given name (first name)	Cohen Family name (last name)
Manual signature (to be retained in accordance with PCAOB Rule 2204):		
Date of typed and manual signatures (mm/dd/yyyy):	6/24/2026	
Business Title:	National Audit Oversight Leader - SEC Practice	
Capacity in which signed:	Partner ( ) Officer (●)	

Business mailing address

Country United States	State/Province Missouri
Street address 1 1201 Walnut Street, Suite 1700	Non-U.S. State/Province
Street address 2	Zip/Postal code 64106
City Kansas City	

Business telephone number (incl. country and area codes)

816-905-3628

Business facsimile number (incl. country and area codes)

Business e-mail address

david.cohen@us.forvismazars.com

Italicized terms are defined in PCAOB Rule 1001. The Firm must apply those definitions in completing this Form.

PART XI - EXHIBITS

EXHIBIT 3.2 - DESCRIPTION OF METHODOLOGY USED TO ESTIMATE COMPONENTS OF CALCULATION IN ITEM 3.2 AND REASONS FOR USING ESTIMATES

If the Firm has indicated in Item 3.2.c that it used a reasonable method to estimate the components of the calculations described in Item 3.2.b, rather than using specific data, the Firm must include as Exhibit 3.2 an exhibit that briefly describes the reasons for doing so and the methodology used in making those estimates.

CA ☐ CR ☐

EXHIBIT 99.1 - REQUEST FOR CONFIDENTIAL TREATMENT

If the Firm has identified, in accordance with the instructions to this Form, any information for which the Firm requests confidential treatment, the Firm must include as Exhibit 99.1 an exhibit that includes the representations and information required by Rule 2300(c)(2).

Unless the Firm requests otherwise by checking the box below, any such Exhibit 99.1 will be afforded confidential treatment without the need for a request for confidential treatment.

Check here to indicate if you do not want confidential treatment for Exhibit 99.1 ☐

EXHIBIT 99.3 - MATERIALS REQUIRED BY RULE 2207(c)(2)-(4)

If the Firm is responding to a request pursuant to Rule 2207(d) for any of the materials described in Rule 2207(c)(2)-(4), submit the requested materials as Exhibit 99.3 to an amended Form 2.

CA ☐ CR ☐

If the Firm seeks confidential treatment for any such materials submitted, check the CR box in this section and also provide Exhibit 99.1 in accordance with the instructions.