UNITED STATES BANKRUPTCY COURT

MIDDLE DISTRICT OF FLORIDA

JACKSONVILLE DIVISION

In Re. BENEFITS GROUP HOLDINGS, LLC §
§
§
Debtor(s) §

Case No. 26-03289

Lead Case No. 26-03286

☒ Jointly Administered

Monthly Operating Report

Chapter 11

Reporting Period Ended: 09/30/2026

Petition Date: 07/23/2026

Months Pending: 2

Industry Classification: 5 5 1 1

Reporting Method: Accrual Basis ◉ Cash Basis ○

Debtor's Full-Time Employees (current): 0

Debtor's Full-Time Employees (as of date of order for relief): 0

Supporting Documentation (check all that are attached):

(For jointly administered debtors, any required schedules must be provided on a non-consolidated basis for each debtor)

- ☒ Statement of cash receipts and disbursements
- ☒ Balance sheet containing the summary and detail of the assets, liabilities and equity (net worth) or deficit
- ☒ Statement of operations (profit or loss statement)
- ☐ Accounts receivable aging
- ☒ Postpetition liabilities aging
- ☐ Statement of capital assets
- ☐ Schedule of payments to professionals
- ☐ Schedule of payments to insiders
- ☒ All bank statements and bank reconciliations for the reporting period
- ☐ Description of the assets sold or transferred and the terms of the sale or transfer

/S/ MARK C. HEALY
Signature of Responsible Party

10/22/2026
Date

MARK C. HEALY
Printed Name of Responsible Party

1885 MARINA MILE BLVD STE # 103
FORT LAUDERDALE, FL 33315
Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefo
1320.4(a)(2) applies.

2603286261028000000000003

Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

Part 1: Cash Receipts and Disbursements		Current Month	Cumulative
a.	Cash balance beginning of month	$-688,990	
b.	Total receipts (net of transfers between accounts)	$170,911	$170,911
c.	Total disbursements (net of transfers between accounts)	$898,964	$1,762,028
d.	Cash balance end of month (a+b-c)	$-1,417,043	
e.	Disbursements made by third party for the benefit of the estate	$0	$0
f.	Total disbursements for quarterly fee calculation (c+e)	$898,964	$1,762,028

Part 2: Asset and Liability Status (Not generally applicable to Individual Debtors. See Instructions.)		Current Month
a.	Accounts receivable (total net of allowance)	$0
b.	Accounts receivable over 90 days outstanding (net of allowance)	$0
c.	Inventory (Book ◉ Market ○ Other ○ (attach explanation))	$0
d	Total current assets	$10,180,655
e.	Total assets	$10,163,097
f.	Postpetition payables (excluding taxes)	$286,060
g.	Postpetition payables past due (excluding taxes)	$0
h.	Postpetition taxes payable	$0
i.	Postpetition taxes past due	$0
j.	Total postpetition debt (f+h)	$286,060
k.	Prepetition secured debt	$59,437,500
l.	Prepetition priority debt	$0
m.	Prepetition unsecured debt	$30,481,151
n.	Total liabilities (debt) (j+k+l+m)	$90,204,711
o.	Ending equity/net worth (e-n)	$-80,041,614

Part 3: Assets Sold or Transferred		Current Month	Cumulative
a.	Total cash sales price for assets sold/transferred outside the ordinary course of business	$0	$0
b.	Total payments to third parties incident to assets being sold/transferred outside the ordinary course of business	$0	$0
c.	Net cash proceeds from assets sold/transferred outside the ordinary course of business (a-b)	$0	$0

Part 4: Income Statement (Statement of Operations) (Not generally applicable to Individual Debtors. See Instructions.)		Current Month	Cumulative
a.	Gross income/sales (net of returns and allowances)	$0	
b.	Cost of goods sold (inclusive of depreciation, if applicable)	$0	
c.	Gross profit (a-b)	$0	
d.	Selling expenses	$0	
e.	General and administrative expenses	$0	
f.	Other expenses	$0	
g.	Depreciation and/or amortization (not included in 4b)	$-23,126	
h.	Interest	$0	
i.	Taxes (local, state, and federal)	$0	
j.	Reorganization items	$0	
k.	Profit (loss)	$-23,126	$-52,220

Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

Part 5: Professional Fees and Expenses

				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
a.	Debtor's professional fees & expenses (bankruptcy) *Aggregate Total*						
	Itemized Breakdown by Firm						
		Firm Name	Role				
	i						
	ii						
	iii						
	iv						
	v						
	vi						
	vii						
	viii						
	ix						
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	xii						
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Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

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Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

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	xcvii						
	xcviii						
	xcix						
	c						
	ci						

				Approved Current Month	Approved Cumulative	Paid Current Month	Paid Cumulative
b.	Debtor's professional fees & expenses (nonbankruptcy) *Aggregate Total*						
	Itemized Breakdown by Firm						
		Firm Name	Role				
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	ii						
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	xiii						
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Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

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Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

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Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

	xcix						
	c						
c.	All professional fees and expenses (debtor & committees)						

Part 6: Postpetition Taxes		Current Month	Cumulative
a.	Postpetition income taxes accrued (local, state, and federal)	$0	$0
b.	Postpetition income taxes paid (local, state, and federal)	$0	$0
c.	Postpetition employer payroll taxes accrued	$0	$0
d.	Postpetition employer payroll taxes paid	$0	$0
e.	Postpetition property taxes paid	$0	$0
f.	Postpetition other taxes accrued (local, state, and federal)	$0	$0
g.	Postpetition other taxes paid (local, state, and federal)	$0	$0

Part 7: Questionnaire - During this reporting period:

a.	Were any payments made on prepetition debt? (if yes, see Instructions)	Yes ○	No ◉
b.	Were any payments made outside the ordinary course of business without court approval? (if yes, see Instructions)	Yes ○	No ◉
c.	Were any payments made to or on behalf of insiders?	Yes ○	No ◉
d.	Are you current on postpetition tax return filings?	Yes ◉	No ○
e.	Are you current on postpetition estimated tax payments?	Yes ◉	No ○
f.	Were all trust fund taxes remitted on a current basis?	Yes ○	No ◉
g.	Was there any postpetition borrowing, other than trade credit? (if yes, see Instructions)	Yes ○	No ◉
h.	Were all payments made to or on behalf of professionals approved by the court?	Yes ○	No ○ N/A ◉
i.	Do you have: Worker's compensation insurance?	Yes ◉	No ○
	If yes, are your premiums current?	Yes ◉	No ○ N/A ○ (if no, see Instructions)
	Casualty/property insurance?	Yes ◉	No ○
	If yes, are your premiums current?	Yes ◉	No ○ N/A ○ (if no, see Instructions)
	General liability insurance?	Yes ◉	No ○
	If yes, are your premiums current?	Yes ◉	No ○ N/A ○ (if no, see Instructions)
j.	Has a plan of reorganization been filed with the court?	Yes ○	No ◉
k.	Has a disclosure statement been filed with the court?	Yes ○	No ◉
l.	Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?	Yes ◉	No ○

Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289

Part 8: Individual Chapter 11 Debtors (Only)

a.	Gross income (receipts) from salary and wages	$0
b.	Gross income (receipts) from self-employment	$0
c.	Gross income from all other sources	$0
d.	Total income in the reporting period (a+b+c)	$0
e.	Payroll deductions	$0
f.	Self-employment related expenses	$0
g.	Living expenses	$0
h.	All other expenses	$0
i.	Total expenses in the reporting period (e+f+g+h)	$0
j.	Difference between total income and total expenses (d-i)	$0
k.	List the total amount of all postpetition debts that are past due	$0
l.	Are you required to pay any Domestic Support Obligations as defined by 11 U.S.C § 101(14A)?	Yes ○ No ◉
m.	If yes, have you made all Domestic Support Obligation payments?	Yes ○ No ○ N/A ◉

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information, and provision of this information is mandatory under 11 U.S.C. §§ 704, 1106, and 1107. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6). The United States Trustee will also use this information to evaluate a chapter 11 debtor's progress through the bankruptcy system, including the likelihood of a plan of reorganization being confirmed and whether the case is being prosecuted in good faith. This information may be disclosed to a bankruptcy trustee or examiner when the information is needed to perform the trustee's or examiner's duties or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." *See* 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Monthly Operating Report and its supporting documentation are true and correct and that I have been authorized to sign this report on behalf of the estate.

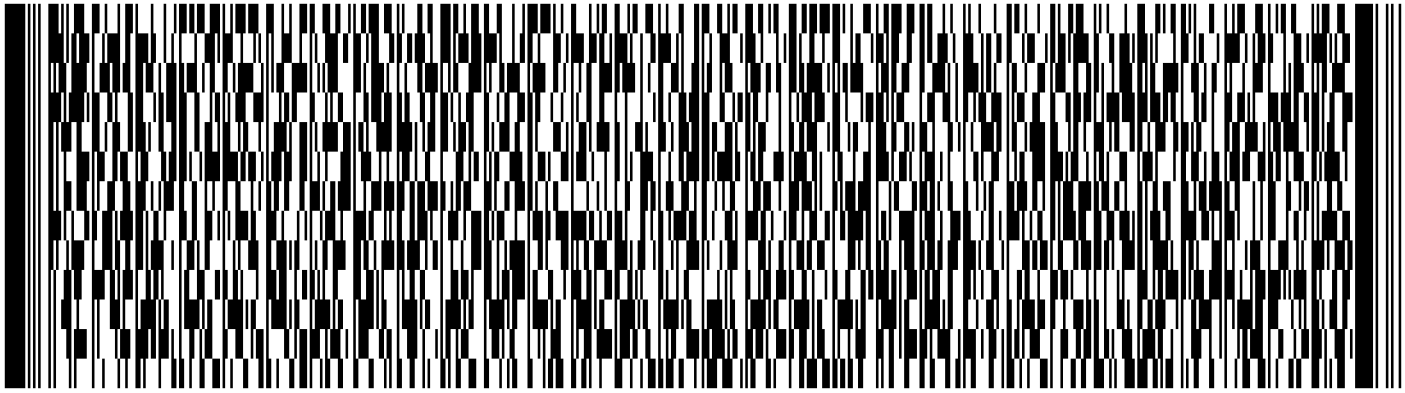
/S/ MARK C. HEALY
Signature of Responsible Party

MARK C. HEALY
Printed Name of Responsible Party

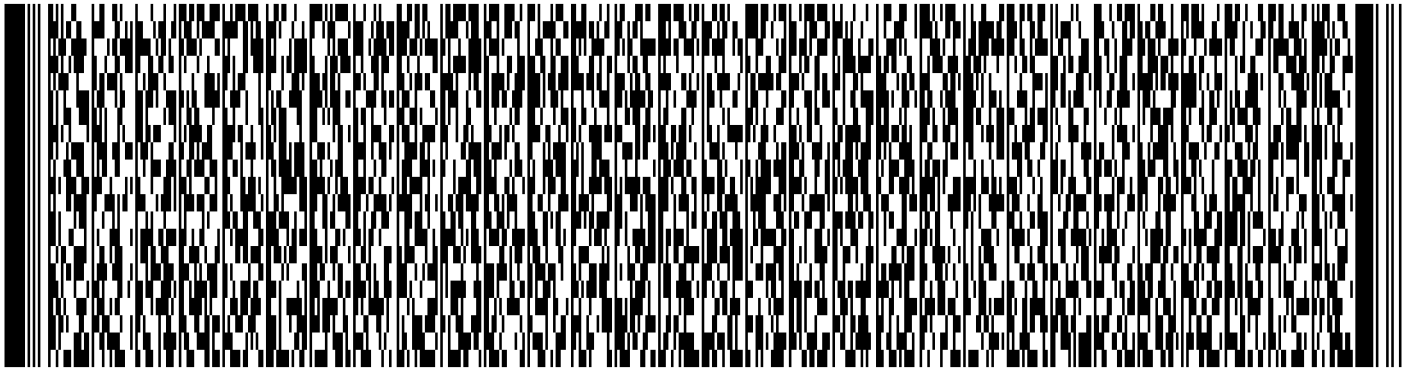
CHIEF RESTRUCTURING OFFICER
Title

10/22/2026
Date

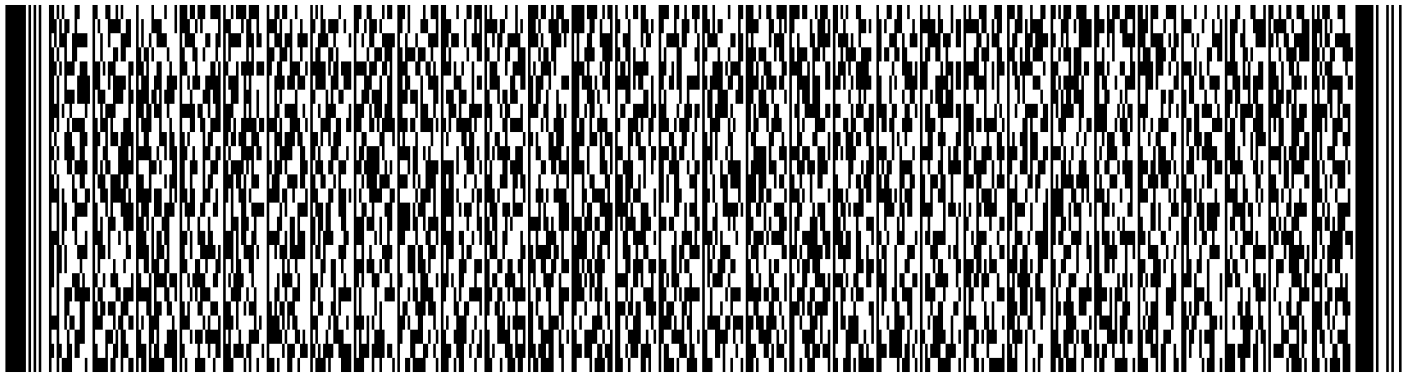
Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289



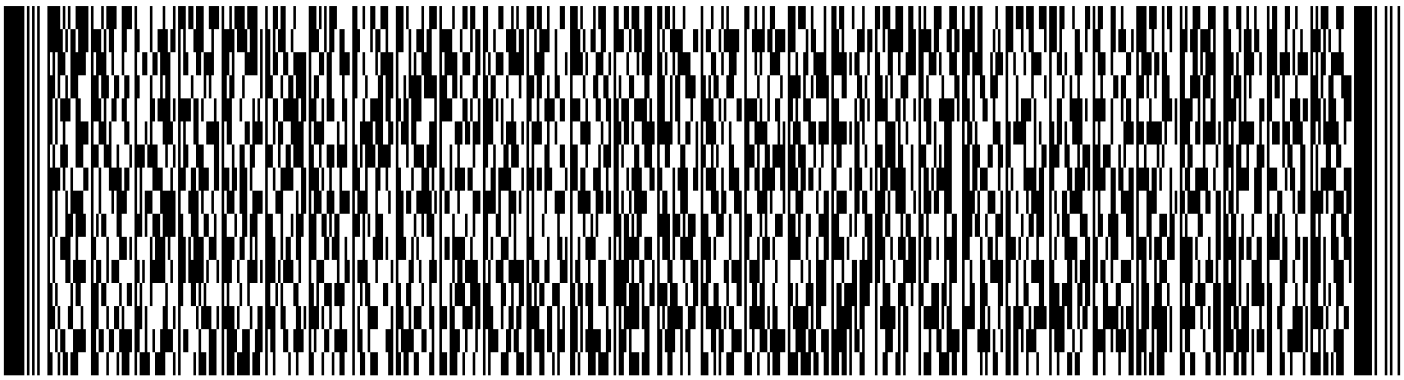
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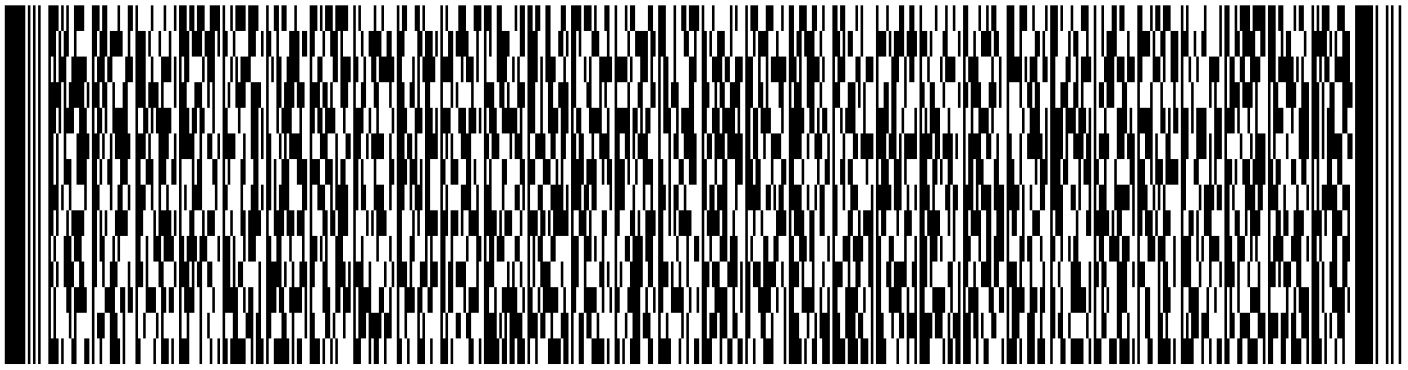


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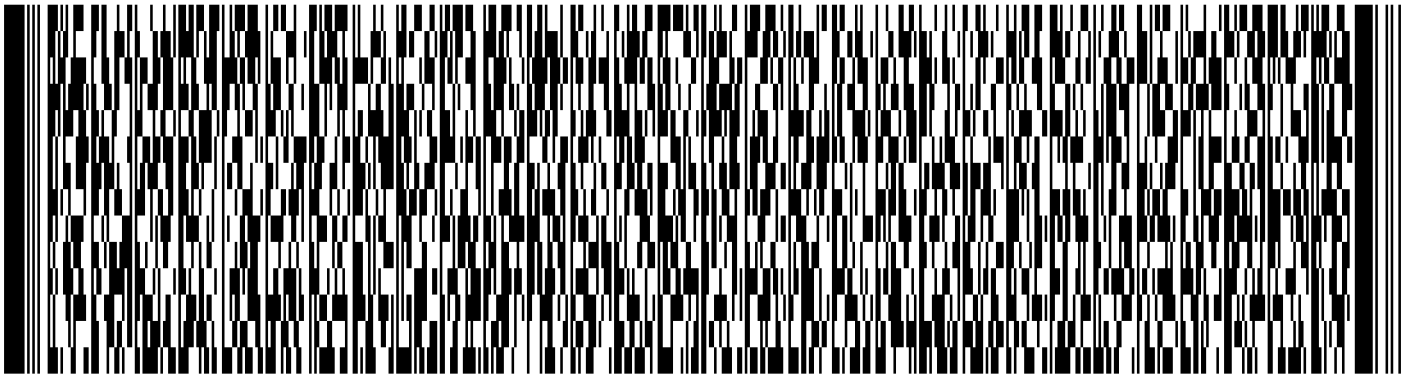


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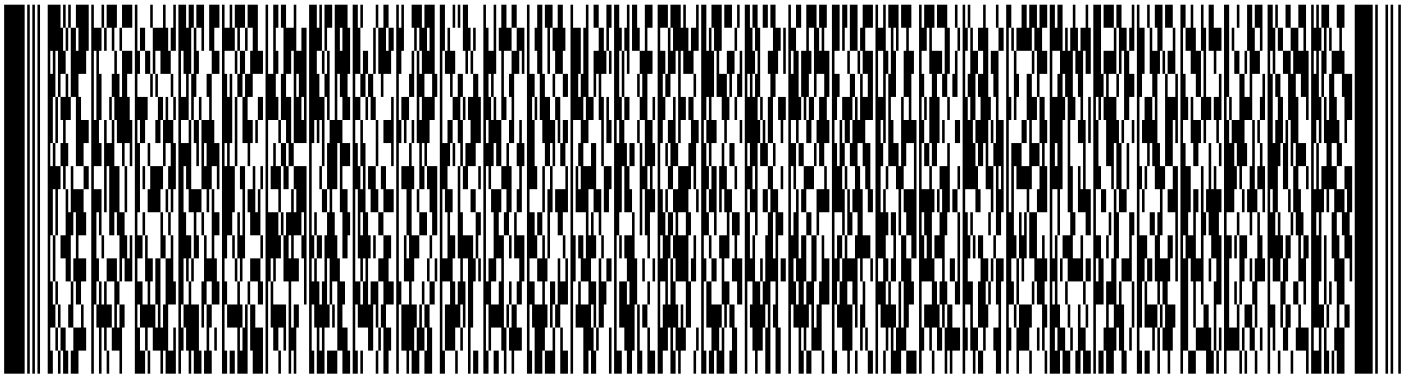
Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289



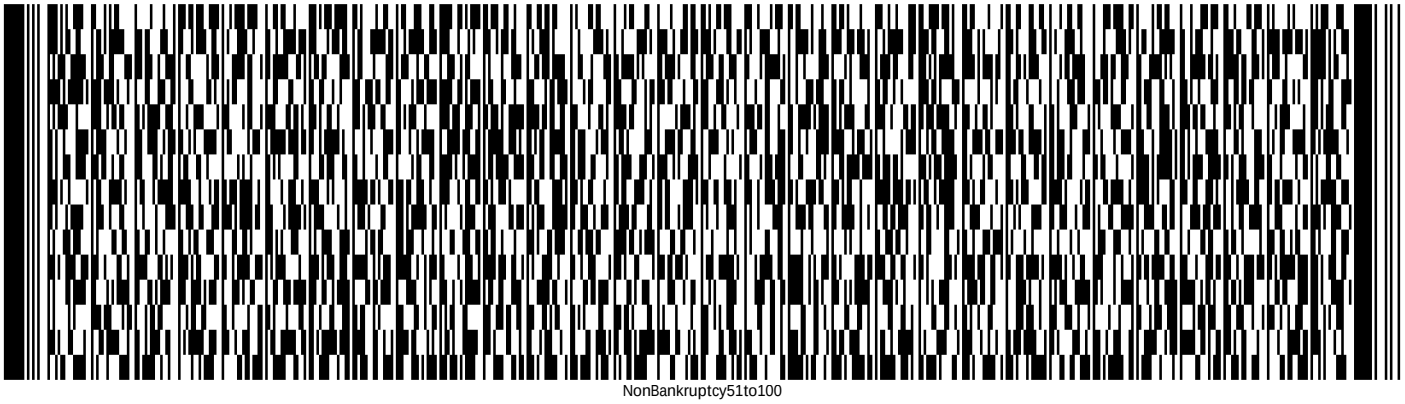
Bankruptcy1to50



Bankruptcy51to100

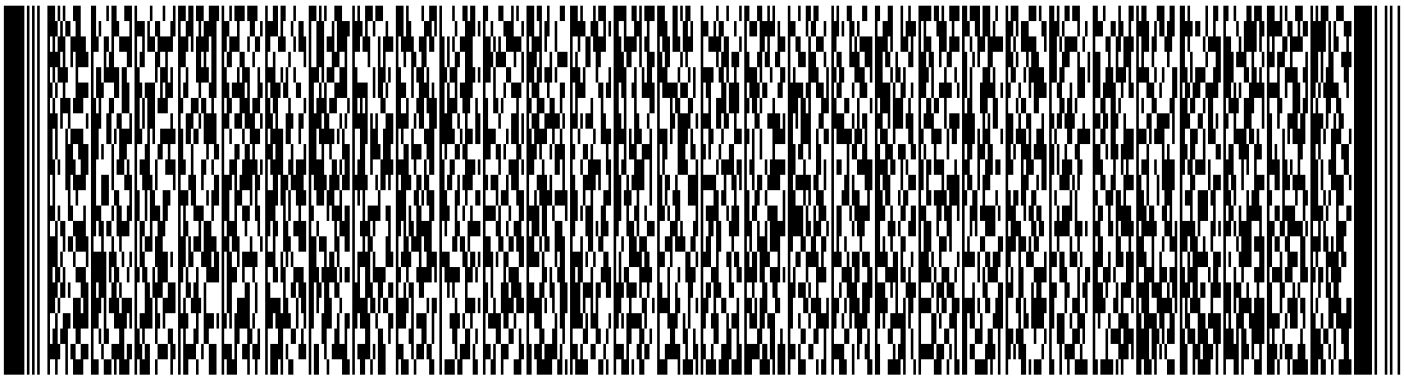


NonBankruptcy1to50

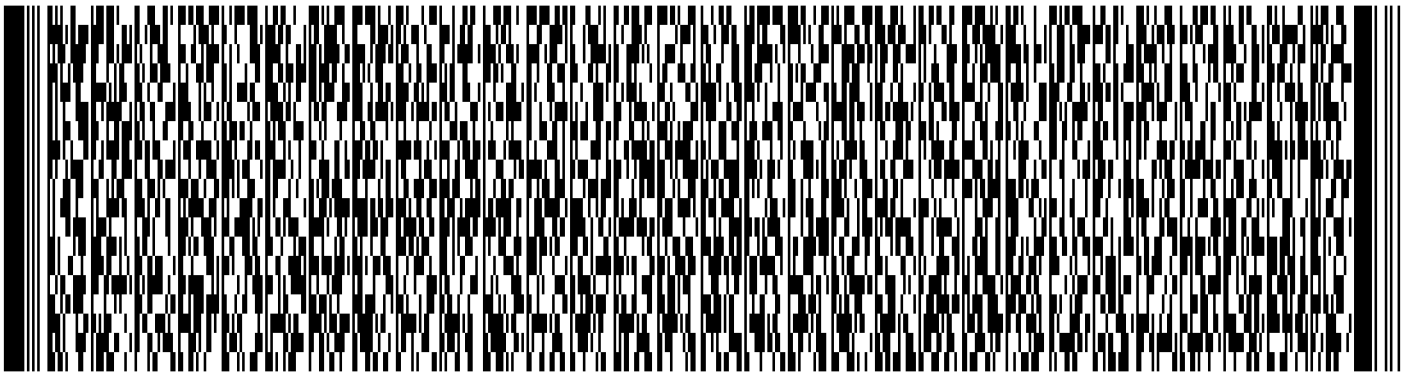


NonBankruptcy51to100

Debtor's Name BENEFITS GROUP HOLDINGS, LLC Case No. 26-03289



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Income Statement by Entity
September
Cash Basis

	Benefits Group Holdings, LLC
Inflow	
Revenue	-
Other	170,911
Total Inflows	170,911
Outflow	
Payroll	-
Marketing	-
Other Operating Expenses	
Acquired Evidence Total	-
Bank & Merchant Fee Total	-
Insurance Exp Total	-
Occupancy Expenses Total	-
Office Expenses Total	-
Dues, Subscription, and IT Expense Total	-
Professional Fees Total	-
Travel & Meals & Other Total	-
Transaction and Financing Fees Total	-
BREX Credit Card Total	-
Intercompany Expenses (GBTK & TI) Total	428,495
Loan Interest Payments	470,469
State Taxes	-
Total Outflows	898,964
TRANSFERS	435,000

Benefits Group Holdings, LLC
September 2026 Balance Sheet
Accrual Basis

	Benefits Group Holdings, LLC
Assets	
Current assets:	
Cash and cash equivalents	192,957
Accounts Receivable - net Total	-
Note Receivable - Current	-
Receivables Due from Members- Current	-
Contract Assets - Current	-
Prepaid and other current assets Total	-
Intercompany Accounts Receivable	-
Intercompany - Note Receivables	9,987,699
Total current assets	10,180,655
Property and equipment - net	396,056
Operating Lease Right-of-Use Assets Total	-
Intangibles - Goodwill	-
Deferred Tax Assets Total	-
Receivables Due from Members - LT	-
Contract Assets - LT	(413,615)
Note Receivable - LT	-
Software Technology Total	-
Customer Relationships Total	-
Trade Names Total	-
Non-competes Total	-
Total assets	10,163,097
Liabilities and Members' Equity	
Current Liabilities:	
Accounts Payable	286,060
Accrued Expenses Total	-
Current Long-Term Debt	6,448,000
Deferred Tax Liabilities Total	-
Intercompany Payables	-
Total current liabilities	6,734,060
Operating Lease Liabilities Total	-
Long Term Debt - Less Current Portion Total	52,946,478
Long Term Debt Owed to Members	-
Other Non-Current Liabilities	-
Intercompany Note Payables	34,715,354
Total liabilities	94,395,892
Members' Equity:	
Members' equity attributable to Trajector Holdings Group unitholders	(84,232,795)
Non Controlling Interest	-
Total members' equity	(84,232,795)
Less: Treasury Stock	-
Total liabilities and members' equity	10,163,097

Benefits Group Holdings, LLC

Statement of Operations for the Period Ending September 30, 2026

Accrual Basis

	Benefits Group Holdings, LLC
Medical Revenue Total	-
Legal US Total Revenue	-
Disability Revenues Total	-
Insurance Revenues Total	-
Media Revenue	-
Technology Revenue	-
Management Revenue Total	-
Intercompany Revenue Total	-
Total Revenue	-
Operating expenses:	
COS and Salaries and Benefits Total	-
Contract Labor Total	-
Advertising and Marketing Total	-
Advertising and Management Total	-
Bad Debts Expense Total	-
Acquired Evidence Total	-
Bank & Merchant Fee Total	-
Insurance Exp Total	-
Occupancy Expenses Total	-
Office Expenses Total	-
Dues, Subscription, and IT Expense Total	-
Professional Fees Total	-
Travel & Meals & Entertainment Total	-
Transaction and Financing Fees Total	-
Outsourced Expenses Total	-
Intercompany Expenses Total	-
Depreciation and Amortization Total	23,126
Total operating expenses	23,126
Income (loss) from operations	**(23,126)**
Unit Based Comp Exp Total	-
Transaction and Financing Fees Total	-
Depreciation and Amortization Total	23,126
Adjusted EBITDA	**-**
Other income (expense):	
Interest Expense Total	-
Gain on Litigation Settlement Total	-
Interest Income Total	-
Other Misc Exp Total	-
Revenue - Other Total	-
Foreign Currency Exchange	-
Gain (loss) on Sale Total	-
Total other income (expense), net	-
Income before income taxes	**(23,126)**
Tax Expense Total	-
Net income (loss)	**(23,126)**
Less: Net income attributable to noncontrolling interest	-
Net income attributable to Trajector Holdings Group unitholders	(23,126)
Net income per unit - basic and diluted	-
Weighted-average number of units outstanding - basic and diluted	-
Non-GAAP Metrics:	
EBITDA	-

Benefits Group Holdings, LLC

Postpetition Liabilities Payable

As of September 30, 2026

Supplier	Invoice Number	Current	1–30 Days	31–60 Days	61–90 Days	91+ Days	Total
Trajector India Private Limited	TIPL/26-27/06	-	286,060	-	-	-	286,060
Total Postpetition Liabilities Payable		**-**	**286,060**	**-**	**-**	**-**	**286,060**

Benefits Group Holdings, LLC

Bank Reconciliation — KeyBank Checking

Account Number: [redacted]9209
Month Ending: September 30, 2026

Balance per Bank Statement	**192,957**
Deposits in transit:	
None	-
Outstanding checks:	
None	-
Adjusted Bank Balance	192,957
Balance per General Ledger	**192,957**
Deposits not recorded:	
None	-
Checks/electronic transfers not recorded:	
None	-
Adjusted Ledger Balance	192,957
Variance	-

KeyBank
P.O. Box 93885
Cleveland, OH 44101-5885

Corporate Banking Statement
September 30, 2026

[redacted]9209

31 T 968 00000 R EM AO
BENEFITS GROUP HOLDINGS, LLC
DEBTOR IN POSSESSION
CASE NO#26-03286
410 SW 140TH TERRACE
NEWBERRY FL 32669-1029

Questions or comments?
Call 1-800-821-2829
Dial 711 for TTY/TRS

Stop payment requests: What you need to know (effective 9/18/26)
We have updated Section 7 of our Deposit Account Agreement to clarify that a stop payment request on a check drawn on your account is effective for six (6) months.

Commercial Transaction [redacted]9209
BENEFITS GROUP HOLDINGS, LLC
DEBTOR IN POSSESSION
CASE NO#26-03286

Beginning balance 8-31-26	$486,009.83
3 Additions	+605,910.81
3 Subtractions	-898,964.12
Ending balance 9-30-26	**$192,956.52**

Additions

Deposits	*Date*	*Serial #*	*Source*				
	9-23	72177	Wire Deposit	Insurance Branch 5288			$170,910.81

Transfers	*Date*	*Serial #*	*Source*				
	9-8		Trf Fr	DDA [redacted]	8060	4451	$410,000.00
	9-21		Trf Fr	DDA [redacted]	8060	4451	25,000.00
			Total additions				**$605,910.81**

Subtractions

Withdrawals	*Date*	*Serial #*	*Location*	
	9-1	702052	Wire Withdrawal Commercial Loans 0119	$456,122.19
	9-9	839565	Internat Wire Wd Trajector India 9191	428,494.90
	9-21	36597	Wire Withdrawal Commercial Loans 0119	14,347.03
			Total subtractions	**$898,964.12**

Fees and charges

See your Account Analysis statement for details.

CUSTOMER ACCOUNT DISCLOSURES

The following disclosures apply only to accounts covered by the Federal Truth-in-Lending Act or the Federal Electronic Funds Transfer Act, as amended, or similar state laws.

IN CASE OF ERROR OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS:

Call us at the phone number indicated on the first page of this statement, OR write us at the address listed below, as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer listed on the statement or receipt. We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the problem or error appeared.

KeyBank
Customer Disputes
NY-31-55-0228
555 Patroon Creek Blvd
Albany, NY 12206

- Tell us your name and Account number;
- Describe the error or transfer that you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information;
- Tell us the dollar amount of the suspected error.

If you tell us orally, we may require that you send us your complaint or question in writing within ten (10) business days.

We will investigate your complaint and will correct any error promptly. If we take more than ten (10) business days to do this, we will recredit your account for the amount you think is in error, so that you will have use of the money during the time it takes us to complete our investigation.

COMMON ELECTRONIC TRANSACTION DESCRIPTIONS:

XFER TO SAV	- Transfer to Savings Account
XFER FROM SAV	- Transfer from Savings Account
XFER TO CKG	- Transfer to Checking Account
XFER FROM CKG	- Transfer from Checking Account
PMT TO CR CARD	- Payment to Credit Card
ADV CR CARD	- Advance from Credit Card

Preauthorized Credits: If you have arranged to have direct deposits made to your Account at least once every sixty (60) days from the same person or company, you can call us at the number indicated on the reverse side to find out whether or not the deposit has been made.

IMPORTANT LINE OF CREDIT INFORMATION

What To Do If You Think You Find A Mistake on Your Statement: If you think there is an error on your statement, write us at: KeyBank N.A., P.O Box 93885, Cleveland, OH 44101- 4825.

In your letter, give us the following information:

- Account Information : Your name and account number.
- Dollar Amount : The dollar amount of the suspected error.
- Description of the Problem : If you think there is an error on your bill, describe what you believe is wrong and why you believe it was a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors in writing. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Explanation of Finance Charge: Your Finance Charge attributable to interest (hereinafter referred to as interest) is computed using the Average Daily Balance method.

Average Daily Balance method (Balance Subject to Interest Rate): Your interest is computed on all purchases and cash advances (collectively "advances") from the date each advance is posted until we receive payment in full (there is no grace period). We figure the interest on your line of credit by multiplying the daily periodic rate by the "Average Daily Balance" of your line of credit (including current transactions) and multiplying by the number of days in the billing cycle. To get the Average Daily Balance we take the beginning balance of your line of credit each day, add any new advances or debits, and subtract any payments and credits, any non-financed fees and unpaid interest. This gives us the daily balance. Then we add up all of your daily balances in the billing cycle and divide this total by the number of days in the billing cycle to get your Average Daily Balance.

CREDIT INFORMATION: If you believe we have reported inaccurate information about your account to a credit reporting agency, you may contact the credit reporting agency or write to us at:

Key Credit Research Department
P.O. Box 94518
Cleveland, Ohio 44101-4518

Please include your account number, a copy of your credit report reflecting the inaccurate information, name, address, city, state, and zip code, and an explanation of why you believe the information is inaccurate.

BALANCING YOUR ACCOUNT

Please examine your statement and paid check information upon receipt. Erasures, alterations or irregularities should be reported promptly in accordance with your account agreement. The suggested steps below will help you balance your account.

INSTRUCTIONS

❶ **Verify and check off in your check register each deposit, check or other transaction shown on this statement.**

Enter into your check register and SUBTRACT:

- Checks or other deductions shown on our statement that you have *not* already entered.
- The "Service charges", if any, shown on your statement.

Enter into your check register and ADD:

- Deposits or other credits shown on your statement that you have *not* already entered.
- The "Interest earned" shown on your statement, if any.

❹ **List from your check register any checks or other deductions that are *not* shown on your statement.**

Check # or Date	Amount	
TOTAL ➔	$	

❺ **List any deposits from your check register that are *not* shown on your statement.**

Date	Amount	
TOTAL ➔	$	

❻ **Enter ending balance shown on your statement.**

$

❼ **Add 5 and 6 and enter total here.**

$

❽ **Enter total from 4.**

$

❾ **Subtract 8 from 7 and enter difference here.**

$

This amount should agree with your check register balance.

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