

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II Basic Plan Information —enter all requested information		
1a Name of plan <u>CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN</u>	1b Three-digit plan number (PN) ▶	<u>005</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>CULPEPER FARMERS' COOPERATIVE, INC.</u> <u>15172 BRANDY ROAD</u> <u>CULPEPER, VA 22701-2519</u>	1c Effective date of plan <u>07/01/1989</u>	2b Employer Identification Number (EIN) <u>54-0185700</u>
	2c Plan Sponsor's telephone number <u>540-825-2200</u>	2d Business code (see instructions) <u>115210</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	09/25/2023	MICHELLE SMELSER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/25/2023	MICHELLE SMELSER
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 146
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year		6a(1) 104
a(2) Total number of active participants at the end of the plan year		6a(2) 109
b Retired or separated participants receiving benefits		6b 0
c Other retired or separated participants entitled to future benefits.....		6c 33
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 142
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 142
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 133
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2K 2S 2T 3D		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☐ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ 2 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	005
C Plan sponsor's name as shown on line 2a of Form 5500 CULPEPER FARMERS' COOPERATIVE, INC.	D Employer Identification Number (EIN) 54-0185700	

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

(a) Name of insurance carrier MASSMUTUAL LIFE INSURANCE COMPANY
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(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-1590850	65935	780626-01	136	10/29/2022	12/31/2022

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end.....	4	1494876
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b	Balance at the end of the previous year	7b	1515456
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c	Additions: (1) Contributions deposited during the year	7c(1)	3840	
	(2) Dividends and credits.....	7c(2)	0	
	(3) Interest credited during the year.....	7c(3)	7960	
	(4) Transferred from separate account.....	7c(4)		
	(5) Other (specify below)	7c(5)		

(6) Total additions.....	7c(6)	11800
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1527256
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e Deductions:

e	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	31388	
	(2) Administration charge made by carrier.....	7e(2)	992	
	(3) Transferred to separate account.....	7e(3)	0	
	(4) Other (specify below)	7e(4)	0	

(5) Total deductions.....	7e(5)	32380
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1494876
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	005
C Plan sponsor's name as shown on line 2a of Form 5500 CULPEPER FARMERS' COOPERATIVE, INC.	D Employer Identification Number (EIN) 54-0185700	

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

(a) Name of insurance carrier MASSMUTUAL LIFE INSURANCE COMPANY
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(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-1590850	65935	61007	132	01/01/2022	10/28/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.
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(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year **7b** 1353169

c	Additions: (1) Contributions deposited during the year	7c(1)	14622	
	(2) Dividends and credits.....	7c(2)	0	
	(3) Interest credited during the year.....	7c(3)	29947	
	(4) Transferred from separate account.....	7c(4)	259344	
	(5) Other (specify below)	7c(5)	0	

(6) Total additions..... **7c(6)** 303913

d Total of balance and additions (add lines **7b** and **7c(6)**)..... **7d** 1657082

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	137661
(2) Administration charge made by carrier.....	7e(2)	3965
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	

(5) Total deductions..... **7e(5)** 141626

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 1515456

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A Name of plan CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 005
C Plan sponsor's name as shown on line 2a of Form 5500 CULPEPER FARMERS' COOPERATIVE, INC.	D Employer Identification Number (EIN) 54-0185700

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

MASSMUTUAL LIFE INSURANCE COMPANY

04-1590850

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
62 64	SERVICE PROVIDER	30756	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

LPL FINANCIAL - RP

04-3046611

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	15333	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☒

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

CHASE BENEFIT ADVISORS

54-1370499

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 14 16	THIRD PARTY ADMINISTRATOR	4425	Yes ☒ No ☐	Yes ☒ No ☐	8981	Yes ☐ No ☒

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

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

EMPOWER ANNUITY INS. CO. OF AMERICA

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	RECORDKEEPER	4918	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

LPL FINANCIAL

PO BOX 502533
SAN DIEGO, CA 92150

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	3067	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☒

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

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
CHASE BENEFIT ADVISORS	13 14	8981
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GREAT WEST LIFE & ANNUITY INS. CO. 84-0467907	BASIS POINTS * ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **12/31/2022**

A Name of plan CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ►	005
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 CULPEPER FARMERS' COOPERATIVE, INC.	D Employer Identification Number (EIN) 54-0185700	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2015 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126259-563	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: EILMINGTON TRUST AMRCN FD 2020 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126260-564	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2025 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126261-565	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2030 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126262-566	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2035 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126263-567	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2040				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126264-568	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		
a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2045 CIT				
b Name of sponsor of entity listed in (a): WILMINGTON TRUST				
c EIN-PN 38-4126265-569	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0		

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2050 CIT		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST		
c EIN-PN 38-4126266-570	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2055 CIT		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST		
c EIN-PN 38-4126267-571	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2060 CIT		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST		
c EIN-PN 38-4126268-572	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMRCN FD 2010 CIT		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST		
c EIN-PN 38-4126290-593	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2055 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126267-571	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 252384

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2020 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126260-564	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1303999

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2045 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126265-569	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 200656

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2030 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126262-566	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 735958

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2040 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126264-568	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 337868

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2035 CLI		
b Name of sponsor of entity listed in (a): AMERICAN FUNDS		
c EIN-PN 38-4126263-567	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 176387

a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2060 CLI

b Name of sponsor of entity listed in (a): AMERICAN FUNDS

c EIN-PN 38-4126268-572	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 78760
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a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2010 CLI

b Name of sponsor of entity listed in (a): AMERICAN FUNDS

c EIN-PN 38-4126290-593	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6472
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a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2050 CLI

b Name of sponsor of entity listed in (a): AMERICAN FUNDS

c EIN-PN 38-4126266-570	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 252415
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a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2025 CLI

b Name of sponsor of entity listed in (a): AMERICAN FUNDS

c EIN-PN 38-4126261-565	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 351273
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a Name of MTIA, CCT, PSA, or 103-12 IE: WILMINGTON TRUST AMERCN FD 2015 CLI

b Name of sponsor of entity listed in (a): AMERICAN FUNDS

c EIN-PN 38-4126259-563	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 508205
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>005</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>CULPEPER FARMERS' COOPERATIVE, INC.</u>	D Employer Identification Number (EIN) <u>54-0185700</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)	109348	92915
(9) Value of interest in common/collective trusts.....	1c(9)	5105054	4204377
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	2193145	1616059
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	1353169	1494877

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	8760716	7408228

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k		

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	8760716	7408228
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	168595	
(B) Participants	2a(1)(B)	268518	
(C) Others (including rollovers)	2a(1)(C)	1049	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		438162
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	4205	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		4205
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	107907	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		107907
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-532448
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-480755
c Other income	2c		37910
d Total income. Add all income amounts in column (b) and enter total	2d		-425019
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	872953	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		872953
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	3558	
(2) Contract administrator fees	2i(2)	5719	
(3) Investment advisory and management fees	2i(3)	45239	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		54516
j Total expenses. Add all expense amounts in column (b) and enter total	2j		927469
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-1352488
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: YOUNT, HYDE & BARBOUR, P.C.

(2) EIN: 54-1149263

d The opinion of an independent qualified public accountant is **not attached** because:

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

**CULPEPER FARMERS' COOPERATIVE, INC.
RETIREMENT SAVINGS PLAN**

Culpeper, Virginia

FINANCIAL REPORT

DECEMBER 31, 2022

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50 S. Cameron St.
Winchester, VA 22601

540.662.3417

YHBcpa.com

INDEPENDENT AUDITOR'S REPORT

To the Trustees of the
Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan
Culpeper, Virginia

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

We have performed audits of the financial statements of Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from qualified institutions as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2022, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meet the requirements of ERISA Section 103(a)(3)(C).

Gount, Hyde & Barbour, P.C.

Winchester, Virginia
September 5, 2023

CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN

Statements of Net Assets Available for Benefits

December 31, 2022 and 2021

Assets

	<u>2022</u>	<u>2021</u>
Investments		
Investments at fair value	\$ 5,820,436	\$ 7,298,198
Fully benefit-responsive investment contracts, at contract value	<u>1,494,877</u>	<u>1,353,169</u>
Total investments	<u>7,315,313</u>	<u>8,651,367</u>
 Receivables , notes from participants	 <u>92,918</u>	 <u>109,481</u>
 Net assets available for benefits	 <u>\$ 7,408,231</u>	 <u>\$ 8,760,848</u>

See Notes to Financial Statements.

CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2022

Additions:

Investment income (loss):

Net depreciation in fair value of investments \$ (1,002,149)

Interest and dividends 115,869

(886,280)

Interest on notes from participants 4,076

Contributions:

Employer 168,595

Participant 268,518

Rollover 1,049

438,162

Net reductions (444,042)

Deductions:

Benefits paid to participants 872,953

Administrative expenses 35,622

Total deductions 908,575

Net decrease (1,352,617)

Net assets available for benefits:

Beginning of year 8,760,848

End of year \$ 7,408,231

See Notes to Financial Statements.

CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN

Notes to Financial Statements

Note 1. Plan Description

The following description of the Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full and part-time employees of Culpeper Farmers' Cooperative, Inc. ("Company") who are age twenty-one or older and have completed one year of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan was amended and restated effective February 1, 2022, to adopt a non-standardized pre-approved Plan document sponsored by Chase Benefit Advisors and to comply with the Internal Revenue Service's Cycle 3 restatement requirements. In connection with this amendment, the Plan's trustee was changed to Empower Trust Company.

Contributions

Participants may make elective deferrals up to the lesser of 85% of their compensation or the maximum legal limit. Participants who have attained the age of 50 before the end of the Plan year are eligible to make additional catch-up contributions not to exceed \$6,500 for the year ended December 31, 2022. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Company contributes a safe harbor match equal to 100% of the first 3% and a 50% of the next 3% of a participant's qualified compensation that a participant contributes to the plan. Total safe harbor matching contributions for the year ended December 31, 2022 were \$168,595. An additional discretionary contribution may be contributed at the option of the Company. There were no additional discretionary contributions for the year ended December 31, 2022. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the participant's contributions, related matching contribution and allocations of the Company's discretionary contribution, if any, and Plan earnings and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their voluntary, Company safe harbor, and Company discretionary contributions plus actual earnings thereon.

Notes to Financial Statements

Participant Loans

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Loan terms range to a maximum of 5 years or up to 30 years for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at the prime rate plus 1% as of the loan date. Principal and interest is paid ratably through biweekly payroll deductions.

Payment of Benefits

On termination of service due to death, disability, retirement or resignation, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account.

Forfeited Accounts

As of December 31, 2022 and 2021, there were no outstanding forfeited nonvested accounts. During the Plan year ended December 31, 2022, no forfeited nonvested accounts were used to reduce employer matching contributions.

Note 2. Summary of Accounting Policies

Basis of Accounting

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

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent loans are treated as distributions based upon the terms of the plan document.

Notes to Financial Statements

Payment of Benefits

Benefits are recorded when paid.

Investment Valuation and Income Recognition

Investments are stated at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's management determines the Plan's valuation policies utilizing information provided by the investment advisors and the trustee. See Note 5 for discussion of fair value measurements.

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

Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statement of changes in net assets available for benefit. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Certain investment related expenses are included in the net appreciation (depreciation) of fair value of investments.

Note 3. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100 percent vested in their employer accounts.

Notes to Financial Statements

Note 4. Information Certified and Provided by Trustee

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and supplemental schedule, including investments and notes receivable from participants held at December 31, 2022 and 2021, and net (depreciation) in fair value of the investments, interest and dividends, and interest income on notes receivable from participants for the year ended December 31, 2022, was obtained or derived from information supplied to the Plan administrator. The Plan Administrator has obtained a certification from Empower Trust Company, the current trustee as of December 31, 2022, and for the period from October 29, 2022 to December 31, 2022, and Reliance Trust Company, the former trustee from January 1, 2022 to October 29, 2022, that the information provided to the Plan Administrator by the trustee is complete and accurate.

Note 5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under ASC 820 are described below:

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

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the assets or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Notes to Financial Statements

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2022 and 2021.

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

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

The following tables set forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2022 and 2021.

	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total
Fair Value Measurements at December 31, 2022				
Mutual Funds	\$ 5,820,436	\$ --	\$ --	\$ 5,820,436
Fair Value Measurements at December 31, 2021				
Mutual Funds	\$ 7,298,198	\$ --	\$ --	\$ 7,298,198

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another.

We evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the year ended December 31, 2022, there were no significant transfers in or out of levels.

Notes to Financial Statements

Note 6. Fully Benefit-Responsive Investment Contract

The Plan holds a separate guaranteed interest contract, the SAGIC Diversified Bond Fund, with Massachusetts Mutual Life Insurance Company. This contract meets the fully benefit-responsive investment contracts criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses.

The investment contract held by the Plan is a guaranteed interest contract. The contract issuer is contractually obligated to repay the principal and interest at a specified interest rate that is guaranteed to the Plan. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than zero. Such interest rates were reviewed on a quarterly basis for resetting.

The Plan's ability to receive amounts due in accordance with fully benefit-responsive investment contracts is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments.

Certain events might limit the ability of the Plan to transact at contract value with the contract issuer. These events may be different under each contract. Examples of such events include the following:

1. The Plan's failure to qualify under Section 401(a) of the Internal Revenue Code
2. Premature termination of the contracts
3. Plan termination or merger
4. Changes to the Plan's prohibition on competing investment options
5. Bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spinoffs of a subsidiary) that significantly affect the Plan's normal operations.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contracts with the Plan and settle at an amount different from contract value. Those events may be different under each contract. Examples of such events include the following:

1. An uncured violation of the Plan's investment guidelines
2. A breach of material obligation under the contract
3. A material misrepresentation
4. A material amendment to the agreements without the consent of the issuer.

Notes to Financial Statements

Note 7. Income Tax Matters

The Plan has adopted a volume submitter plan sponsored by Chase Benefit Advisors. The volume submitter plan provider has received an advisory letter from the Internal Revenue Service as to the volume submitter plan's qualified status. The volume submitter plan advisory letter has been relied upon by the Plan. The Plan has been amended since the volume submitter plan received the advisory letter. The Plan Administrator believes the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code.

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

Note 8. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

Note 9. Related Party Transactions and Party-in-Interest Transactions

Certain plan investments are issued by Empower Retirement or its subsidiaries. Empower Retirement is the third-party plan administrator as defined by the Plan, and, therefore, these transactions qualify as parties-in-interest transactions.

Empower Retirement provides certain administrative services to the Plan pursuant to agreements with the Company. Empower Retirement receives revenue from mutual fund and guaranteed interest contract service providers for services Empower Retirement provides to the funds. This revenue is used to offset certain amounts owed to Empower Retirement for administrative services provided to the Plan.

If the revenue received by Empower Retirement from such mutual fund or guaranteed interest contract service providers exceeds the amount owed under the agreement, Empower Retirement remits the excess to the Plan's trust. Such amounts may be applied to pay Plan administrative expenses or allocated to the accounts of the participants. During 2022, there were no excess amounts. The Plan or Plan Sponsor may make payments to Empower Retirement for administrative expenses not covered by revenue sharing.

Notes to Financial Statements

Note 10. Reconciliation of Financial Statements to Form 5500

Financial information reported on the Form 5500, Annual Return/Report of Employee Benefit Plan, for the Plan years ended December 31, 2022 and 2021 differ from the Plan's financial statements as follows:

	<u>2022</u>	<u>2021</u>
Net assets available for benefits per the financial statements	\$ 7,408,231	\$ 8,760,848
Accrued interest on notes from participants	<u>(3)</u>	<u>(132)</u>
As reported in the 5500	<u>\$ 7,408,228</u>	<u>\$ 8,760,716</u>
Net decrease in assets available for benefits per the financial statements	\$ (1,352,617)	
Change in accrued interest on notes from participants	<u>129</u>	
Balance per form 5500	<u>\$ (1,352,488)</u>	

Note 11. Subsequent Events

In preparing these financial statements, the Plan administrator has evaluated subsequent events and transactions for potential recognition or disclosure through September 5, 2023, the date the financial statements were available to be issued.

CULPEPER FARMERS' COOPERATIVE, INC. RETIREMENT SAVINGS PLAN

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

EIN 54-0185700 Plan No. 005

December 31, 2022

Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Current Value
Mutual funds:		
American Funds Balanced Fund	Mutual Fund	\$ 8,713
Baird Core Plus Bond Fund	Mutual Fund	50,245
Fidelity 500 Index Fund	Mutual Fund	352,945
*MassMutual Blue Chip Growth Fund	Mutual Fund	333,912
*MassMutual Small Cap Opps Fund	Mutual Fund	24,597
MFS Intl Diversification Fd	Mutual Fund	129,754
Parnassus Mid Cap Fund	Mutual Fund	70,650
Vanguard Equity Income Fund	Mutual Fund	438,735
Vanguard Mid Cap Index Fund	Mutual Fund	113,385
Vanguard Small Cap Index Fund	Mutual Fund	93,124
Wilmington Trust American Funds 2010 Fund	Mutual Fund	6,472
Wilmington Trust American Funds 2015 Fund	Mutual Fund	508,204
Wilmington Trust American Funds 2020 Fund	Mutual Fund	1,303,999
Wilmington Trust American Funds 2025 Fund	Mutual Fund	351,273
Wilmington Trust American Funds 2030 Fund	Mutual Fund	735,958
Wilmington Trust American Funds 2035 Fund	Mutual Fund	176,387
Wilmington Trust American Funds 2040 Fund	Mutual Fund	337,868
Wilmington Trust American Funds 2045 Fund	Mutual Fund	200,656
Wilmington Trust American Funds 2050 Fund	Mutual Fund	252,415
Wilmington Trust American Funds 2055 Fund	Mutual Fund	252,384
Wilmington Trust American Funds 2060 Fund	Mutual Fund	<u>78,760</u>
		<u>5,820,436</u>
Fully Benefit-Responsive Investment Contract		
*SAGIC Diversified Bond Fund	Guaranteed investment contract	<u>1,494,877</u>
*Notes Receivable		
	Interest rates of 4.25% - 7.25% with maturity dates through 2027	<u>92,918</u>
Total assets held		<u><u>\$ 7,408,231</u></u>

* Denotes party-in-interest.

Note: Cost information has not been included because all investments are participant directed.

The above information has been certified by Empower Trust Company, the trustee, to be complete and accurate to the best of their knowledge and belief.

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

GA

Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan

29-OCT-22 to 31-DEC-22

11-MAR-23 20:01:31

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
2MKSXX	0.01	0.010000	1	(0.01)	(0.010000)	1	(0.01)	SERIES
4MKSXX	3,779.84	3,779.840000	6	(3,778.32)	(3,778.320000)	4	(3,778.32)	SERIES
2SGDFS0	412.82	0.000000	1	(0.27)	0.000000	2	(0.27)	SERIES
3SGDFS0	18.35	0.000000	2	0.00	0.000000	0	0.00	SERIES
4SGDFS0	1,495.31	0.000000	1	(0.98)	0.000000	2	(0.98)	SERIES
1S7105A	721,259.97	63,872.131127	114	(494.81)	(42.322140)	73	(477.90)	SERIES
1S7106A	1,282,090.15	114,358.170811	110	(5,372.15)	(471.819201)	68	(5,289.13)	SERIES
1S7109A	246,870.47	21,550.764002	69	(163.75)	(13.626155)	40	(156.04)	SERIES
1S7112A	196,112.84	17,338.690560	72	(128.70)	(10.849147)	38	(122.65)	SERIES
1S7114A	344,347.85	30,380.933223	115	(236.20)	(20.219632)	60	(229.16)	SERIES
1S7125A	77,262.37	6,865.471323	207	(56.65)	(4.811372)	88	(54.10)	SERIES
1S7132A	510,317.48	46,221.374713	90	(12,357.99)	(1,087.765616)	121	(12,008.91)	SERIES
1S7137A	330,180.08	28,749.244288	135	(228.65)	(19.002331)	62	(218.13)	SERIES
1S7142A	246,821.59	21,999.308506	153	(172.39)	(14.643418)	102	(164.28)	SERIES
1S7147A	173,928.90	15,425.101625	166	(1,164.34)	(100.396528)	81	(1,131.79)	SERIES
1S7150A	6,362.99	578.729303	10	(4.03)	(0.358477)	4	(3.94)	SERIES
1MDIZX	139,053.64	7,365.598371	89	(18,016.57)	(954.842683)	42	(17,989.25)	SERIES
1MSOOX	25,313.40	1,620.281903	45	(16.32)	(1.024963)	22	(16.02)	SERIES
1VSMAX	100,907.62	1,120.266834	71	(5,538.90)	(61.323048)	42	(5,523.99)	SERIES
1PFPMX	73,292.31	2,085.521808	42	(316.51)	(8.793634)	30	(309.08)	SERIES
1VIMAX	121,608.89	479.241969	84	(7,644.10)	(30.140461)	54	(7,646.68)	SERIES
1FXAIX	379,003.54	2,798.619639	93	(19,727.94)	(147.286595)	52	(19,947.03)	SERIES
1MBCZX	397,443.47	20,546.945974	101	(226.35)	(11.184641)	46	(220.49)	SERIES
1VEIRX	456,108.17	5,187.275568	85	(286.09)	(3.119517)	40	(275.13)	SERIES
1RLBGX	8,598.74	303.046992	16	(5.49)	(0.187066)	8	(5.30)	SERIES
1BCOIX	52,143.58	5,422.713909	74	(3,188.53)	(332.030535)	30	(3,190.82)	SERIES
1SGDFS0	1,517,369.17	0.000000	174	(32,378.90)	0.000000	273	(32,378.90)	SERIES

5% TRANSACTIONS

4MKSXX	0.10	0.100000	1	0.00	0.000000	0	0.00	28-OCT-22
2SGDFS0	412.82	0.000000	1	0.00	0.000000	0	0.00	28-OCT-22
3SGDFS0	18.35	0.000000	2	0.00	0.000000	0	0.00	28-OCT-22
4SGDFS0	1,495.31	0.000000	1	0.00	0.000000	0	0.00	28-OCT-22
1S7105A	715,821.39	63,403.137557	30	0.00	0.000000	0	0.00	28-OCT-22
1S7106A	1,276,087.91	113,834.781708	33	0.00	0.000000	0	0.00	28-OCT-22
1S7109A	243,492.73	21,265.739835	25	0.00	0.000000	0	0.00	28-OCT-22
1S7112A	190,631.16	16,870.011931	24	0.00	0.000000	0	0.00	28-OCT-22
1S7114A	338,913.31	29,912.913243	25	0.00	0.000000	0	0.00	28-OCT-22
1S7125A	68,429.77	6,104.351525	39	0.00	0.000000	0	0.00	28-OCT-22
1S7132A	508,691.27	46,077.104822	57	0.00	0.000000	0	0.00	28-OCT-22
1S7137A	266,565.70	23,220.006997	21	0.00	0.000000	0	0.00	28-OCT-22
1S7142A	240,543.58	21,457.948258	46	0.00	0.000000	0	0.00	28-OCT-22
1S7147A	165,686.43	14,714.603721	32	0.00	0.000000	0	0.00	28-OCT-22
1S7150A	5,941.28	541.100407	2	0.00	0.000000	0	0.00	28-OCT-22
1MDIZX	134,850.19	7,157.652467	23	0.00	0.000000	0	0.00	28-OCT-22
1MSOOX	24,939.38	1,596.631453	11	0.00	0.000000	0	0.00	28-OCT-22
1VSMAX	100,006.19	1,110.192990	23	0.00	0.000000	0	0.00	28-OCT-22
1PFPMX	69,994.35	1,989.040968	14	0.00	0.000000	0	0.00	28-OCT-22
1VIMAX	120,344.75	474.358418	29	0.00	0.000000	0	0.00	28-OCT-22
1FXAIX	376,351.52	2,778.937588	28	0.00	0.000000	0	0.00	28-OCT-22
1MBCZX	343,122.95	17,408.572757	23	0.00	0.000000	0	0.00	28-OCT-22
1VEIRX	428,433.96	4,857.527930	20	0.00	0.000000	0	0.00	28-OCT-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

GA

Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan

29-OCT-22 to 31-DEC-22

11-MAR-23 20:01:31

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
IRLBGX	8,160.46	288.049680	4	0.00	0.000000	0	0.00	28-OCT-22
IBCOIX	51,064.29	5,313.662757	17	0.00	0.000000	0	0.00	28-OCT-22
1SGDFS0	1,513,529.40	0.000000	113	0.00	0.000000	0	0.00	28-OCT-22
2MKSXX	0.01	0.010000	1	0.00	0.000000	0	0.00	31-OCT-22
1S7137A	53,627.04	4,687.678320	20	0.00	0.000000	0	0.00	01-NOV-22
1MDIZX	0.00	0.000000	0	(17,933.19)	(950.858709)	4	(17,914.18)	01-NOV-22
1VSMAX	0.00	0.000000	0	(5,476.68)	(60.649913)	4	(5,463.34)	01-NOV-22
1VIMAX	0.00	0.000000	0	(7,568.46)	(29.854715)	4	(7,574.14)	01-NOV-22
1FXAIX	0.00	0.000000	0	(19,492.15)	(145.594266)	4	(19,717.84)	01-NOV-22
IBCOIX	0.00	0.000000	0	(3,156.56)	(328.809139)	4	(3,159.85)	01-NOV-22
1S7106A	0.00	0.000000	0	(2,250.88)	(202.781982)	4	(2,273.18)	02-NOV-22
1S7132A	0.00	0.000000	0	(198.30)	(18.126144)	4	(200.11)	02-NOV-22
1SGDFS0	0.00	0.000000	0	(840.29)	0.000000	4	(840.29)	02-NOV-22
4MKSXX	1,889.16	1,889.160000	1	0.00	0.000000	0	0.00	09-NOV-22
1S7105A	77.50	6.925827	6	0.00	0.000000	0	0.00	09-NOV-22
1S7106A	95.00	8.512545	6	0.00	0.000000	0	0.00	09-NOV-22
1S7109A	22.50	1.992914	2	0.00	0.000000	0	0.00	09-NOV-22
1S7114A	45.00	3.996446	4	0.00	0.000000	0	0.00	09-NOV-22
1S7125A	37.50	3.393664	4	0.00	0.000000	0	0.00	09-NOV-22
1S7132A	72.50	6.590908	4	0.00	0.000000	0	0.00	09-NOV-22
1S7137A	110.00	9.708737	8	0.00	0.000000	0	0.00	09-NOV-22
1S7142A	100.00	9.049773	8	0.00	0.000000	0	0.00	09-NOV-22
1S7147A	127.50	11.455528	12	0.00	0.000000	0	0.00	09-NOV-22
1SGDFS0	15.00	0.000000	2	0.00	0.000000	0	0.00	09-NOV-22
1S7105A	1,418.42	122.913344	19	0.00	0.000000	0	0.00	10-NOV-22
1S7106A	1,415.92	124.203508	14	0.00	0.000000	0	0.00	10-NOV-22
1S7109A	763.36	64.691526	8	0.00	0.000000	0	0.00	10-NOV-22
1S7112A	1,248.78	107.283505	12	0.00	0.000000	0	0.00	10-NOV-22
1S7114A	1,346.02	116.639513	19	0.00	0.000000	0	0.00	10-NOV-22
1S7125A	2,152.70	186.219726	39	0.00	0.000000	0	0.00	10-NOV-22
1S7132A	435.62	38.859946	6	0.00	0.000000	0	0.00	10-NOV-22
1S7137A	2,286.25	193.422169	20	0.00	0.000000	0	0.00	10-NOV-22
1S7142A	1,528.45	132.333332	23	0.00	0.000000	0	0.00	10-NOV-22
1S7147A	2,107.13	182.593589	29	0.00	0.000000	0	0.00	10-NOV-22
1S7150A	112.35	10.085278	2	0.00	0.000000	0	0.00	10-NOV-22
1MDIZX	196.42	9.786747	7	0.00	0.000000	0	0.00	10-NOV-22
1MSOOX	7.52	0.470588	3	0.00	0.000000	0	0.00	10-NOV-22
1VSMAX	92.55	1.004122	7	0.00	0.000000	0	0.00	10-NOV-22
1VIMAX	92.56	0.353714	7	0.00	0.000000	0	0.00	10-NOV-22
1FXAIX	289.90	2.109132	9	0.00	0.000000	0	0.00	10-NOV-22
1MBCZX	451.54	22.782037	7	0.00	0.000000	0	0.00	10-NOV-22
1VEIRX	60.19	0.662667	5	0.00	0.000000	0	0.00	10-NOV-22
IRLBGX	94.10	3.243709	2	0.00	0.000000	0	0.00	10-NOV-22
IBCOIX	191.53	19.623974	5	0.00	0.000000	0	0.00	10-NOV-22
1SGDFS0	966.09	0.000000	12	0.00	0.000000	0	0.00	10-NOV-22
2SGDFS0	0.00	0.000000	0	(0.14)	0.000000	1	(0.14)	11-NOV-22
4SGDFS0	0.00	0.000000	0	(0.49)	0.000000	1	(0.49)	11-NOV-22
1S7105A	0.00	0.000000	0	(241.33)	(20.804310)	36	(234.90)	11-NOV-22
1S7106A	0.00	0.000000	0	(414.99)	(36.275351)	30	(406.66)	11-NOV-22
1S7109A	0.00	0.000000	0	(79.22)	(6.645974)	20	(76.11)	11-NOV-22
1S7112A	0.00	0.000000	0	(62.08)	(5.278912)	19	(59.66)	11-NOV-22
1S7114A	0.00	0.000000	0	(114.94)	(9.917169)	30	(112.39)	11-NOV-22
1S7125A	0.00	0.000000	0	(26.79)	(2.293665)	43	(25.74)	11-NOV-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

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Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan

29-OCT-22 to 31-DEC-22

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1S7132A	0.00	0.000000	0	(165.66)	(14.738433)	50	(162.70)	11-NOV-22
1S7137A	0.00	0.000000	0	(110.25)	(9.241408)	31	(106.05)	11-NOV-22
1S7142A	0.00	0.000000	0	(83.12)	(7.116437)	51	(79.80)	11-NOV-22
1S7147A	0.00	0.000000	0	(66.08)	(5.681856)	37	(64.02)	11-NOV-22
1S7150A	0.00	0.000000	0	(1.95)	(0.174731)	2	(1.92)	11-NOV-22
1MDIZX	0.00	0.000000	0	(39.95)	(1.943091)	19	(36.61)	11-NOV-22
1MSOOX	0.00	0.000000	0	(8.02)	(0.500311)	11	(7.82)	11-NOV-22
1VSMAx	0.00	0.000000	0	(30.55)	(0.328106)	19	(29.57)	11-NOV-22
1PFPmX	0.00	0.000000	0	(22.80)	(0.624658)	14	(21.98)	11-NOV-22
1VIMAX	0.00	0.000000	0	(36.81)	(0.139384)	25	(35.37)	11-NOV-22
1FXAIX	0.00	0.000000	0	(114.73)	(0.827061)	24	(112.02)	11-NOV-22
1MBCZX	0.00	0.000000	0	(109.82)	(5.455537)	23	(107.55)	11-NOV-22
1VEIRX	0.00	0.000000	0	(138.85)	(1.525491)	20	(134.54)	11-NOV-22
1RLBGX	0.00	0.000000	0	(2.63)	(0.090346)	4	(2.56)	11-NOV-22
1BCOIX	0.00	0.000000	0	(15.31)	(1.570256)	13	(15.10)	11-NOV-22
1SGDFS0	0.00	0.000000	0	(490.39)	0.000000	122	(490.39)	11-NOV-22
4MKSXX	0.00	0.000000	0	(1,889.16)	(1,889.160000)	2	(1,889.16)	14-NOV-22
1PFPmX	3,130.36	91.584550	14	0.00	0.000000	0	0.00	17-NOV-22
1S7147A	0.00	0.000000	0	(1,023.34)	(88.371692)	2	(996.23)	18-NOV-22
1S7132A	0.00	0.000000	0	(461.12)	(40.699029)	4	(449.32)	23-NOV-22
1BCOIX	130.11	13.155713	13	0.00	0.000000	0	0.00	23-NOV-22
1SGDFS0	0.00	0.000000	0	(520.53)	0.000000	5	(520.53)	23-NOV-22
1S7105A	1,319.96	112.913601	19	0.00	0.000000	0	0.00	25-NOV-22
1S7106A	1,396.23	120.990469	14	0.00	0.000000	0	0.00	25-NOV-22
1S7109A	787.39	65.670560	8	0.00	0.000000	0	0.00	25-NOV-22
1S7112A	1,246.82	105.305743	10	0.00	0.000000	0	0.00	25-NOV-22
1S7114A	1,338.48	114.497861	19	0.00	0.000000	0	0.00	25-NOV-22
1S7125A	2,093.97	178.362011	39	0.00	0.000000	0	0.00	25-NOV-22
1S7132A	437.70	38.597884	6	0.00	0.000000	0	0.00	25-NOV-22
1S7137A	2,286.05	190.345544	20	0.00	0.000000	0	0.00	25-NOV-22
1S7142A	1,496.41	127.462520	23	0.00	0.000000	0	0.00	25-NOV-22
1S7147A	1,969.71	168.063996	29	0.00	0.000000	0	0.00	25-NOV-22
1S7150A	106.73	9.478685	2	0.00	0.000000	0	0.00	25-NOV-22
1MDIZX	196.42	9.411595	7	0.00	0.000000	0	0.00	25-NOV-22
1MSOOX	7.52	0.465635	3	0.00	0.000000	0	0.00	25-NOV-22
1VSMAx	92.55	0.994198	7	0.00	0.000000	0	0.00	25-NOV-22
1VIMAX	92.56	0.349654	7	0.00	0.000000	0	0.00	25-NOV-22
1FXAIX	232.62	1.661453	9	0.00	0.000000	0	0.00	25-NOV-22
1MBCZX	451.54	22.487051	7	0.00	0.000000	0	0.00	25-NOV-22
1VEIRX	60.19	0.647203	5	0.00	0.000000	0	0.00	25-NOV-22
1RLBGX	94.10	3.189831	2	0.00	0.000000	0	0.00	25-NOV-22
1BCOIX	191.53	19.346465	5	0.00	0.000000	0	0.00	25-NOV-22
1SGDFS0	950.23	0.000000	12	0.00	0.000000	0	0.00	25-NOV-22
4MKSXX	0.85	0.850000	1	0.00	0.000000	0	0.00	30-NOV-22
1S7132A	0.00	0.000000	0	(7,844.66)	(686.922942)	4	(7,583.63)	01-DEC-22
1PFPmX	0.00	0.000000	0	(269.60)	(7.488864)	2	(263.20)	01-DEC-22
1VIMAX	269.60	1.002193	2	0.00	0.000000	0	0.00	01-DEC-22
1SGDFS0	0.00	0.000000	0	(11,903.23)	0.000000	4	(11,903.23)	01-DEC-22
1S7106A	0.00	0.000000	0	(2,276.39)	(195.734307)	4	(2,194.18)	02-DEC-22
1S7132A	0.00	0.000000	0	(199.99)	(17.496938)	4	(193.17)	02-DEC-22
1SGDFS0	0.00	0.000000	0	(813.09)	0.000000	4	(813.09)	02-DEC-22
4MKSXX	1,889.16	1,889.160000	1	0.00	0.000000	0	0.00	05-DEC-22
1S7105A	1,258.36	108.013733	17	0.00	0.000000	0	0.00	09-DEC-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

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Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan

29-OCT-22 to 31-DEC-22

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1S7106A	1,385.97	120.414423	14	0.00	0.000000	0	0.00	09-DEC-22
1S7109A	906.37	76.037751	10	0.00	0.000000	0	0.00	09-DEC-22
1S7112A	1,273.95	108.237043	10	0.00	0.000000	0	0.00	09-DEC-22
1S7114A	1,367.78	117.406007	21	0.00	0.000000	0	0.00	09-DEC-22
1S7125A	2,279.37	195.318766	43	0.00	0.000000	0	0.00	09-DEC-22
1S7132A	384.38	33.955830	6	0.00	0.000000	0	0.00	09-DEC-22
1S7137A	2,360.78	197.720266	20	0.00	0.000000	0	0.00	09-DEC-22
1S7142A	1,599.22	137.036847	25	0.00	0.000000	0	0.00	09-DEC-22
1S7147A	2,060.26	176.694682	31	0.00	0.000000	0	0.00	09-DEC-22
1S7150A	85.07	7.568505	2	0.00	0.000000	0	0.00	09-DEC-22
1MDIZX	162.53	7.695549	7	0.00	0.000000	0	0.00	09-DEC-22
1MSOOX	7.52	0.478982	3	0.00	0.000000	0	0.00	09-DEC-22
1VSMAX	103.84	1.154933	7	0.00	0.000000	0	0.00	09-DEC-22
1VIMAX	96.33	0.371930	7	0.00	0.000000	0	0.00	09-DEC-22
1FXAIX	227.22	1.659267	9	0.00	0.000000	0	0.00	09-DEC-22
1MBCZX	440.25	22.156517	7	0.00	0.000000	0	0.00	09-DEC-22
1VEIRX	90.30	0.996139	5	0.00	0.000000	0	0.00	09-DEC-22
1RLBGX	94.10	3.209413	2	0.00	0.000000	0	0.00	09-DEC-22
1BCOIX	184.00	18.363273	3	0.00	0.000000	0	0.00	09-DEC-22
1SGDFS0	959.05	0.000000	12	0.00	0.000000	0	0.00	09-DEC-22
2MKSXX	0.00	0.000000	0	(0.01)	(0.010000)	1	(0.01)	13-DEC-22
2SGDFS0	0.00	0.000000	0	(0.13)	0.000000	1	(0.13)	13-DEC-22
4SGDFS0	0.00	0.000000	0	(0.49)	0.000000	1	(0.49)	13-DEC-22
1S7105A	0.00	0.000000	0	(253.48)	(21.517830)	37	(243.00)	13-DEC-22
1S7106A	0.00	0.000000	0	(429.89)	(37.027561)	30	(415.11)	13-DEC-22
1S7109A	0.00	0.000000	0	(84.53)	(6.980181)	20	(79.93)	13-DEC-22
1S7112A	0.00	0.000000	0	(66.62)	(5.570235)	19	(62.99)	13-DEC-22
1S7114A	0.00	0.000000	0	(121.26)	(10.302463)	30	(116.77)	13-DEC-22
1S7125A	0.00	0.000000	0	(29.86)	(2.517707)	45	(28.36)	13-DEC-22
1S7132A	0.00	0.000000	0	(170.85)	(14.973709)	50	(165.31)	13-DEC-22
1S7137A	0.00	0.000000	0	(118.40)	(9.760923)	31	(112.08)	13-DEC-22
1S7142A	0.00	0.000000	0	(89.27)	(7.526981)	51	(84.48)	13-DEC-22
1S7147A	0.00	0.000000	0	(73.10)	(6.184432)	39	(69.76)	13-DEC-22
1S7150A	0.00	0.000000	0	(2.08)	(0.183746)	2	(2.02)	13-DEC-22
1MDIZX	0.00	0.000000	0	(43.43)	(2.040883)	19	(38.46)	13-DEC-22
1MSOOX	343.94	21.740834	22	(8.30)	(0.524652)	11	(8.20)	13-DEC-22
1VSMAX	0.00	0.000000	0	(31.67)	(0.345029)	19	(31.08)	13-DEC-22
1PFPMX	0.00	0.000000	0	(24.11)	(0.680112)	14	(23.90)	13-DEC-22
1VIMAX	0.00	0.000000	0	(38.83)	(0.146362)	25	(37.17)	13-DEC-22
1FXAIX	0.00	0.000000	0	(121.06)	(0.865268)	24	(117.17)	13-DEC-22
1MBCZX	0.00	0.000000	0	(116.53)	(5.729104)	23	(112.94)	13-DEC-22
1VEIRX	0.00	0.000000	0	(147.24)	(1.594026)	20	(140.59)	13-DEC-22
1RLBGX	61.88	2.092661	4	(2.86)	(0.096720)	4	(2.74)	13-DEC-22
1BCOIX	0.00	0.000000	0	(16.66)	(1.651140)	13	(15.87)	13-DEC-22
1SGDFS0	0.00	0.000000	0	(497.52)	0.000000	123	(497.52)	13-DEC-22
4MKSXX	0.00	0.000000	0	(1,889.16)	(1,889.160000)	2	(1,889.16)	14-DEC-22
1MBCZX	52,536.90	3,043.852837	46	0.00	0.000000	0	0.00	14-DEC-22
1BCOIX	9.54	0.942687	13	0.00	0.000000	0	0.00	15-DEC-22
1S7132A	0.00	0.000000	0	(2,858.01)	(254.045333)	1	(2,804.66)	16-DEC-22
1FXAIX	1,677.18	12.563146	24	0.00	0.000000	0	0.00	16-DEC-22
1VEIRX	27,373.17	326.376182	40	0.00	0.000000	0	0.00	16-DEC-22
1SGDFS0	0.00	0.000000	0	(1,756.39)	0.000000	1	(1,756.39)	16-DEC-22
4MKSXX	(0.95)	(0.950000)	1	0.00	0.000000	0	0.00	21-DEC-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

GA

Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan

29-OCT-22 to 31-DEC-22

11-MAR-23 20:01:31

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1VSMAX	508.64	5.740210	19	0.00	0.000000	0	0.00	21-DEC-22
1PFPMX	167.60	4.896290	14	0.00	0.000000	0	0.00	21-DEC-22
1VIMAX	616.76	2.424752	25	0.00	0.000000	0	0.00	21-DEC-22
1S7105A	0.09	0.007828	6	0.00	0.000000	0	0.00	22-DEC-22
1S7106A	0.22	0.019249	13	0.00	0.000000	0	0.00	22-DEC-22
1S7109A	0.06	0.005136	6	0.00	0.000000	0	0.00	22-DEC-22
1S7112A	0.02	0.001734	2	0.00	0.000000	0	0.00	22-DEC-22
1S7114A	0.06	0.005196	6	0.00	0.000000	0	0.00	22-DEC-22
1S7132A	0.07	0.006228	5	0.00	0.000000	0	0.00	22-DEC-22
1S7137A	0.04	0.003412	4	0.00	0.000000	0	0.00	22-DEC-22
1S7142A	0.03	0.002625	3	0.00	0.000000	0	0.00	22-DEC-22
1S7147A	0.02	0.001742	2	(1.82)	(0.158548)	3	(1.78)	22-DEC-22
1VSMAX	0.01	0.000114	1	0.00	0.000000	0	0.00	22-DEC-22
1FXAIX	0.08	0.000602	5	0.00	0.000000	0	0.00	22-DEC-22
1MBCZX	0.04	0.002468	4	0.00	0.000000	0	0.00	22-DEC-22
1VEIRX	0.06	0.000714	5	0.00	0.000000	0	0.00	22-DEC-22
1BCOIX	0.02	0.002000	2	0.00	0.000000	0	0.00	22-DEC-22
1SGDFS0	0.13	0.000000	11	(15,035.22)	0.000000	4	(15,035.22)	22-DEC-22
1S7105A	1,364.25	118.219237	17	0.00	0.000000	0	0.00	23-DEC-22
1S7106A	1,373.71	119.974673	14	0.00	0.000000	0	0.00	23-DEC-22
1S7109A	898.06	76.626280	10	0.00	0.000000	0	0.00	23-DEC-22
1S7112A	1,273.95	110.012953	10	0.00	0.000000	0	0.00	23-DEC-22
1S7114A	1,337.20	115.474957	21	0.00	0.000000	0	0.00	23-DEC-22
1S7125A	2,269.06	197.825631	43	0.00	0.000000	0	0.00	23-DEC-22
1S7132A	295.94	26.259095	6	(459.40)	(40.763088)	4	(450.01)	23-DEC-22
1S7137A	2,312.63	196.652210	20	0.00	0.000000	0	0.00	23-DEC-22
1S7142A	1,553.90	135.475151	25	0.00	0.000000	0	0.00	23-DEC-22
1S7147A	1,977.85	171.688367	31	0.00	0.000000	0	0.00	23-DEC-22
1S7150A	117.56	10.496428	2	0.00	0.000000	0	0.00	23-DEC-22
1MDIZX	162.53	7.813942	7	0.00	0.000000	0	0.00	23-DEC-22
1MSOOX	7.52	0.494411	3	0.00	0.000000	0	0.00	23-DEC-22
1VSMAX	103.84	1.180267	7	0.00	0.000000	0	0.00	23-DEC-22
1VIMAX	96.33	0.381308	7	0.00	0.000000	0	0.00	23-DEC-22
1FXAIX	225.02	1.688451	9	0.00	0.000000	0	0.00	23-DEC-22
1MBCZX	440.25	27.092307	7	0.00	0.000000	0	0.00	23-DEC-22
1VEIRX	90.30	1.064733	5	0.00	0.000000	0	0.00	23-DEC-22
1RLBGX	94.10	3.261698	2	0.00	0.000000	0	0.00	23-DEC-22
1BCOIX	184.00	18.473895	3	0.00	0.000000	0	0.00	23-DEC-22
1SGDFS0	949.27	0.000000	12	(522.24)	0.000000	6	(522.24)	23-DEC-22
1MDIZX	3,485.55	173.238071	38	0.00	0.000000	0	0.00	28-DEC-22
1BCOIX	188.56	19.143145	13	0.00	0.000000	0	0.00	28-DEC-22
4MKSXX	1.52	1.520000	1	0.00	0.000000	0	0.00	30-DEC-22
1S7106A	335.19	29.274236	2	0.00	0.000000	0	0.00	30-DEC-22
1S7112A	438.16	37.837651	4	0.00	0.000000	0	0.00	30-DEC-22
1S7137A	631.59	53.706633	2	0.00	0.000000	0	0.00	30-DEC-22

TRANSACTIONS FOR REVIEW (5% REPORTABLE)**Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan****29-OCT-22 to 31-DEC-22****11-MAR-23 20:01:31**

INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
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LEGEND

INVESTMENT OPTION:

2MKSXX MassMutual US Government Mny Mkt Fd
 2SGDFS0 SAGIC Diversified Bond I
 4SGDFS0 SAGIC Diversified Bond I
 1S7106A Wilmington Trust American Fds 2020 CL I
 1S7112A Wilmington Trust American Fds 2045 CL I
 1S7125A Wilmington Trust American Fds 2060 CL I
 1S7137A Wilmington Trust American Fds 2040 CL I
 1S7147A Wilmington Trust American Fds 2035 CL I
 1MDIZX MFS Intl Diversification R6
 1VSMAX Vanguard Small Cap Index Adm
 1VIMAX Vanguard Mid Cap Index Fund - Admiral
 1MBCZX MassMutual Blue Chip Growth I
 1RLBGX American Funds American Balanced R6
 1SGDFS0 SAGIC Diversified Bond I

4MKSXX MassMutual US Government Mny Mkt Fd
 3SGDFS0 SAGIC Diversified Bond I
 1S7105A Wilmington Trust American Fds 2030 CL I
 1S7109A Wilmington Trust American Fds 2050 CL I
 1S7114A Wilmington Trust American Fds 2025 CL I
 1S7132A Wilmington Trust American Fds 2015 CL I
 1S7142A Wilmington Trust American Fds 2055 CL I
 1S7150A Wilmington Trust American Fds 2010 CL I
 1MSOOX MassMutual Small Cap Opportun I
 1PPPMX Parnassus Mid Cap Institutional
 1FXAIX Fidelity 500 Index
 1VEIRX Vanguard Equity-Income Adm
 1BCOIX Baird Core Plus Bond Inst

SCHEDULE OF ASSETS (HELD AT END OF YEAR)**Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan****29-OCT-22 to 31-DEC-22**

11-MAR-23 20:01:31

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
1S7105A			720,782.09	735,957.70
1S7106A			1,276,801.02	1,303,998.74
1S7109A			246,714.41	252,415.24
1S7112A			195,990.16	200,656.40
1S7114A			344,118.70	351,273.45
1S7125A			77,208.34	78,760.37
1S7132A			498,308.52	508,204.47
1S7137A			329,961.93	337,867.64
1S7142A			246,657.36	252,383.94
1S7147A			172,797.13	176,387.34
1S7150A			6,359.05	6,471.97
1MDIZX			121,064.40	129,753.69
1MSOOX			25,297.39	24,596.52
1VSMAX			95,383.63	93,123.54
1PFPMX			72,983.24	70,650.29
1VIMAX			113,962.24	113,384.68
1FXAIX			359,056.52	352,945.46
1MBCZX			397,223.03	333,911.49
1VEIRX			455,833.05	438,735.12
1RLBGX			8,593.44	8,713.27
1BCOIX			48,952.76	50,245.05
1SGDFS0		3.050	1,485,058.21	1,492,940.37
			7,299,106.62	7,313,376.74
PARTICIPANT LOANS	VARIOUS	4.250-7.250	92,914.51	92,911.71
FORFEITURES			1,926.75	1,936.93

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

GA

Culpeper Farmers' Cooperative, Inc. Retirement Savings Plan**29-OCT-22 to 31-DEC-22****11-MAR-23 20:01:31**

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
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LEGEND

INVESTMENT OPTION:

1S7105A	Wilmington Trust American Fds 2030 CL I	1S7106A	Wilmington Trust American Fds 2020 CL I
1S7109A	Wilmington Trust American Fds 2050 CL I	1S7112A	Wilmington Trust American Fds 2045 CL I
1S7114A	Wilmington Trust American Fds 2025 CL I	1S7125A	Wilmington Trust American Fds 2060 CL I
1S7132A	Wilmington Trust American Fds 2015 CL I	1S7137A	Wilmington Trust American Fds 2040 CL I
1S7142A	Wilmington Trust American Fds 2055 CL I	1S7147A	Wilmington Trust American Fds 2035 CL I
1S7150A	Wilmington Trust American Fds 2010 CL I	1MDIZX	MFS Intl Diversification R6
1MSOOX	MassMutual Small Cap Opportun I	1VSMAX	Vanguard Small Cap Index Adm
1PFPMX	Parnassus Mid Cap Institutional	1VIMAX	Vanguard Mid Cap Index Fund - Admiral
1FXAIX	Fidelity 500 Index	1MBCZX	MassMutual Blue Chip Growth I
1VEIRX	Vanguard Equity-Income Adm	1RLBGX	American Funds American Balanced R6
1BCOIX	Baird Core Plus Bond Inst	1SGDFS0	SAGIC Diversified Bond I

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year

CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year