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

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
SHASTA PRODUCE 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/22/1986

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)
ANDRIGHETTO PRODUCE, INC. DBA SHASTA PRODUCE

P.O. BOX 2328
SOUTH SAN FRANCISCO, CA 94083

2b Employer Identification Number (EIN)
94-2992661

2c Plan Sponsor's telephone number
650-588-0930

2d Business code (see instructions)
424500

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	DAVID A. ANDRIGHETTO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		
5	Total number of participants at the beginning of the plan year	**5**	141
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)**	125
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	124
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	28
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	152
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	152
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	151
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	6
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2A 2E 2J 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)** [X] 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)** [X] 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)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **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 C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**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
SHASTA PRODUCE 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ANDRIGHETTO PRODUCE, INC. DBA SHASTA PRODUCE

D Employer Identification Number (EIN)
94-2992661

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] 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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4 WORLD FINANCIAL CENTER
250 VESEY STREET
NEW YORK, NY 10281

13-5674085

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

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

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

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250 VESEY STREET
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13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
51 52 63 71	BROKERAGE	39235	Yes [X] No [ ]	Yes [ ] No [X]	363	Yes [ ] No [X]

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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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 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 01/01/2022 and ending 12/31/2022

A Name of plan
SHASTA PRODUCE 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ANDRIGHETTO PRODUCE, INC. DBA SHASTA PRODUCE

D Employer Identification Number (EIN)
94-2992661

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)	633013	691541
(2) Participant contributions	1b(2)	41768	27544
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	855698	777760
(2) U.S. Government securities	1c(2)	227285	352049
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	1391393	1086956
(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)	122079	112177
(9) Value of interest in common/collective trusts	1c(9)		
(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)	16602923	11326983
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	19874159	14375010
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	32	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	32	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	19874127	14375010

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)	691743	
(B) Participants	2a(1)(B)	382246	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1073989
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)	5824	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		5824
(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)	268439	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		268439
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-3079687
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		-1731435
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3677155	
(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)		3677155
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)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	90527	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		90527
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3767682
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-5499117
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) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] 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: ELSENER & ELSENER, LLP **(2)** EIN: 68-0038828

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:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		204374

		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.)	4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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 _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

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
SHASTA PRODUCE 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ANDRIGHETTO PRODUCE, INC. DBA SHASTA PRODUCE

D Employer Identification Number (EIN)
94-2992661

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 13-5674085

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

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

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

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

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

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

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

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation_____

SHASTA PRODUCE 401(k) PROFIT SHARING PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL INFORMATION

FOR THE YEAR ENDED
DECEMBER 31, 2022

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Elsener & Elsener LLP
CERTIFIED PUBLIC ACCOUNTANTS

Independent Auditor's Report

To the Trustees
Shasta Produce 401(k) Profit Sharing Plan
South San Francisco, California

Opinion

We have audited the accompanying financial statements of the Shasta Produce 401(k) Profit Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which 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.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Shasta Produce 401(k) Profit Sharing Plan as of December 31, 2022 and 2021, and the changes in its net assets available for benefits for the year ended December 31, 2022, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 Shasta Produce 401(k) Profit Sharing 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 audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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 Shasta Produce 401(k) Profit Sharing Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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 generally accepted auditing standards 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 generally accepted auditing standards, 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 Shasta Produce 401(k) Profit Sharing 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 Shasta Produce 401(k) Profit Sharing Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Supplemental Information Required Under Instructions to Items 4a and 4i of Form 5500 Schedule H are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting

and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits 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 generally accepted auditing standards.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Elsener & Elsener, LLP

October 16, 2023

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Statements of Net Assets Available for Benefits

December 31, 2022 and 2021

	2022	2021
ASSETS		
Investments		
Investments at fair value	$ 13,063,196	$ 18,221,601
Cash	480,552	855,698
Total investments	13,543,748	19,077,299
Receivables		
Participant contributions	27,544	41,768
Employer contributions	691,541	633,013
Notes receivable from participants	112,177	122,079
Total assets	14,375,010	19,874,159
LIABILITIES		
Excess contributions payable	-	32
Total liabilities	-	32
NET ASSETS AVAILABLE FOR BENEFITS	$ 14,375,010	$ 19,874,127

See accompanying notes.

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2022

ADDITIONS TO NET ASSETS	
Investment income:	
Dividends	$ 257,747
Capital gains distributions	40,899
Interest	10,692
Net investment income	309,338
Interest on participants' notes receivable	5,824
Contributions:	
Participants	382,246
Employer	691,743
Total contributions	1,073,989
Total additions	1,389,151
DEDUCTIONS FROM NET ASSETS	
Net investments loss (See Note 8)	3,120,586
Investment advisory fees	90,527
Benefits paid to participants	3,677,155
Total deductions	6,888,268
NET DECREASE IN NET ASSETS	(5,499,117)
NET ASSETS AVAILABLE FOR BENEFITS, January 1, 2022	19,874,127
NET ASSETS AVAILABLE FOR BENEFITS, December 31, 2022	$ 14,375,010

See accompanying notes.

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Notes to Financial Statements

NOTE 1 - DESCRIPTION OF PLAN

The following description of the Shasta Produce (the "Company") 401(k) Profit Sharing Plan (the "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-time employees of the Company who have one year of Service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Board of Trustees oversees governance of the Plan. The Plan Administrator determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Board of Trustees.

Contributions

Each year, participants may contribute up to 100% of pretax annual compensation as defined by the Plan. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Contributions are deposited into the Plan accounts and are managed by an investment manager.

The Company makes safe harbor matching contributions up to a maximum of 4% of annual compensation. The Company also makes a discretionary profit sharing contribution. The Company makes discretionary matching contributions based on a percentage of employee compensation, which is determined annually by the Company's Board of Directors. To receive discretionary profit sharing contributions, participants must be employed by the Company at the end of the plan year. Contributions are subject to certain statutory limitations.

Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) the Company's matching contribution and (b) Plan earnings, and (c) forfeitures of terminated participants' nonvested accounts and charged with an allocation of any administrative expenses paid by the plan. The benefit to which the participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their voluntary contributions, rollover contributions, and safe harbor matching contributions, plus actual earnings thereon. Vesting in the Company's discretionary profit sharing contributions is based on years of continuous service. A participant is 100% vested after six years of credited service.

Notes Receivable from Participants

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 account balance. The loans are secured by the balance in the participant's account and bear interest rates ranging from 5.25% - 7.25%, which are commensurate with local prevailing rates determined by the plan administrator. Principal and interest are paid ratably through bi-weekly payroll deductions.

NOTE 1 - DESCRIPTION OF PLAN (Continued)

Payment of Benefits
On termination of service due to death, a beneficiary may receive a lump-sum distribution or annual installments over a period of time until the account balance is depleted. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited Accounts
At December 31, 2022 and 2021, forfeited nonvested accounts totaled $1,484 and $4,425, respectively. These accounts will be reallocated to participants in the same manner as employer contributions.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting
The financial statements of the Plan are prepared on the accrual method of accounting. Investments held by a defined contribution plan are required to be reported at fair value.

Use of Estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America ("GAAP") requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition
The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator determines the Plan's valuation policies. See Note 3 for further discussion of fair value measurements.

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

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2022 and 2021, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

Excess Contributions Liability
Amounts payable to participants for contributions in excess of amounts allowed by the IRS are recorded as accounts payable, with a corresponding reduction to contributions. There were no excess contributions for the years ended December 31, 2022.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Payment of Benefits
Benefits are recorded when paid.

Expenses
Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefit payments are charged directly to the participant's account and are included in administrative expenses.

Date of Management's Review of Subsequent Events
Subsequent events were evaluated through October 16, 2023, which is the date the financial statements were available to be issued.

NOTE 3 - FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1), and Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs are not available. There are no plan assets requiring the use of Level 3 inputs for the periods presented.

Level 1 Fair Value Measurements

The fair values of mutual funds are based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded. The fair values of ETFs are based on the closing price reported in the active market where the individual securities are traded, when available.

Level 2 Fair Value Measurements

The fair value of corporate bonds and U.S. government securities are valued using a market approach on yields currently available on comparable securities of issuers with similar credit ratings.

NOTE 3 - FAIR VALUE MEASUREMENTS (Continued)

The following table sets forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2022 and 2021.

	Fair Value	Fair Value Measurements at the end of the Reporting Period Using Quoted Prices in Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)
December 31, 2022			
U.S. government securities	$ 649,256	$ -	$ 649,256
Corporate bonds (Aa to Aaa credit rating, investment grade)	146,196	-	146,196
Mutual funds	2,231,138	2,231,138	-
ETFs	10,036,606	10,036,606	-
Total investments at fair value	$ 13,063,196	$ 12,267,744	$ 795,452
December 31, 2021			
U.S. government securities	$ 227,285	$ -	$ 227,285
Corporate bonds (Aa to Aaa credit rating, investment grade)	269,414	-	269,414
Mutual funds	3,373,424	3,373,424	-
ETFs	14,351,478	14,351,478	-
Total investments at fair value	$ 18,221,601	$ 17,724,902	$ 496,699

Gains and losses included in the statement of changes in net assets available for benefits for the year ended December 31, 2022 are reported as net investments loss.

The Plan's policy is to recognize transfers between Levels 1 and 2 and into and out of Level 3 as of the date of the event or range in circumstances that caused the transfer. For the year ended December 31, 2022, there were no significant transfers between Levels 1 and 2 and no transfers into or out of Level 3.

NOTE 4 - RELATED PARTY TRANSACTIONS AND PARTY IN INTEREST TRANSACTIONS

Certain officers and employees of the Company are trustees and administrators of the Plan and are participants in the Plan. No such officer or employee receives compensation from the Plan.

NOTE 5 - 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 would become 100% vested in their employer contributions.

NOTE 6 - INCOME TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated January 1, 2022 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability 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 7 - 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 investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

NOTE 8 - NET INVESTMENTS LOSS

For the year ended December 31, 2022, net investments income (loss) consisted of the following:

Treasuries	$ (18,049)
Corporate Bonds	(92,340)
Bond Mutual Funds/ETFs	(381,537)
US Equity Mutual Funds/ETFs	(2,114,228)
Foreign Equity Mutual Funds/ETFs	(514,432)
Total net investment income (loss)	$ (3,120,586)

NOTE 9 - RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

There are no differences between net assets available for benefits per the financial statements and Schedule H in Form 5500.

See Accountant's Audit Report.

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

SUPPLEMENTAL INFORMATION REQUIRED
UNDER INSTRUCTIONS TO ITEM
4a and 4i OF FORM 5500 SCHEDULE H

FOR THE YEAR ENDED
DECEMBER 31, 2022

SHASTA PRODUCE 401(k)
PROFIT SHARING PLAN

Schedule H, line 4a - Schedule of Delinquent Participant Contributions

For the Year Ended
December 31, 2022

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP And PTE 2002-51
Check here if Late Participant Loan Repayments are included: X	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$204,374	$0	$204,374	$0	$0

E.I.N. 94-2992661
P.N. 001

See Accountant's Audit Report.

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets Held at End of Year

December 31, 2022

At December 31, 2022, assets held for investment purposes consisted of the following:

(a)	Identity of issue, borrower, lessor, or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par, or maturity value (c)	Cost (d)	Value (e)
	SPDR S&P Midcap400 ETF TR SER1	ETF	$ 100,625	$ 231,579
	Vanguard Index FDS Small Cap ETF	ETF	255,627	229,425
	DFA U.S. Large-Cap Growth Portfolio	Mutual fund	269,044	261,170
	Dodge & Cox Stock Fund Class I	Mutual fund	335,143	289,972
	Ishares TR Russell 1000 Growth ETF	ETF	221,979	453,118
	Ishares TR Russell 1000 Value ETF	ETF	328,751	514,094
	Ishares TR Russell 3000 Value ETF	ETF	1,056,704	2,482,650
	JP Morgan Equity Income Fund	Mutual fund	533,499	521,629
	Vanguard SP FD Divid Apprec ETF	ETF	512,598	668,140
	Ishares INC MSCI CDA ETF	ETF	133,340	115,144
	PIMCO Income Fund Instl Class	Mutual fund	250,237	228,271
	Bank of Nova Scotia BC SR 1.300%	Bnd 1.300% Maturity 8,000 6/11/25	8,108	7,336
	HSBC Holdings PLC 0.976%	Bnd 0.976% Maturity 9,000 5/24/25	8,813	8,336
	Shell Intl FIN B C GTD 3.250%	Bnd 3.250% Maturity 8,000 5/11/25	8,208	7,758
	Allspring Short-Term Bond Plus Fund	Mutual fund	301,000	304,680
	Amazon Com Inc NT 3.600%	Bnd 3.600% Maturity 10,000 4/13/32	9,753	9,182
	American Express Co NT 0.000%	Bnd 0.000% Maturity 13,000 5/3/24	13,000	12,986
	Apple Inc 3.250%	Bnd 3.250% Maturity 8,000 8/8/29	7,794	7,420
	BankAmer Med Tern SRNT 3.974%	Bnd 3.974% Maturity 9,000 2/7/30	9,250	8,194
	Boeing CO SR NT 2.800%	Bnd 2.800% Maturity 8,000 3/1/24	8,152	7,759
	Citi Group FLTG Rate SRNT 5.783%	Bnd 5.783% Maturity 25,000 6/1/24	25,269	25,028
	Coca Cola Co NT 2.250%	Bnd 2.250% Maturity 8,000 1/5/32	7,706	6,709
	Entergy LA LLC 0.950%	Bnd 0.950% Maturity 8,000 10/1/24	7,988	7,450
	JP Morgan Chase Fxd 4.005%	Bnd 4.005% Maturity 8,000 4/23/29	7,197	7,389
	Lennar Corp GTD FXD 5.875%	Bnd 5.875% Maturity 7,000 11/15/24	7,510	7,033
	Morgan Stanley FLTG RT 5.770%	Bnd 5.770% Maturity 8,000 5/8/24	8,150	8,014
	Morgan Stanley SRNT Fixed 3.622%	Bnd 3.622% Maturity 9,000 4/1/31	8,202	7,879
	Putnam Ultra Short Duration Income	Mutual fund	408,698	407,809
	Qualcomm Inc 4.250%	Bnd 4.250% Maturity 8,000 5/20/32	8,017	7,723
	JP Morgan Exchange-Traded Fund	ETF	208,742	216,107
	JP Morgan Hedged Equity 3 Fund	Hedge fund	215,000	217,607
	US Treasury NTS 0.500%	Notes 0.500% Maturity 24,000 4/30/27	22,612	20,698
	US Treasury NTS 1.250%	Notes 1.250% Maturity 60,000 8/31/24	58,974	56,831
	US Treasury NTS 1.375%	Notes 1.375% Maturity 50,000 8/31/23	50,218	48,881
	US Treasury NTS 1.500%	Notes 1.500% Maturity 39,000 2/15/30	36,425	33,324
	US Treasury NTS 1.625%	Notes 1.625% Maturity 24,000 8/15/29	22,415	20,877
	US Treasury NTS 1.875%	Notes 1.875% Maturity 45,000 6/30/26	45,955	41,799

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets Held at End of Year

December 31, 2022

(a)	Identity of issue, borrower, lessor, or similar party (b)	Description of investment including maturity date, rate of interest, collateral, par, or maturity value (c)	Cost (d)	Value (e)
	US Treasury NTS 2.000%	Notes 2.000% Maturity 50,000 8/15/25	$ 50,688	$ 47,250
	US Treasury NTS 2.875%	Notes 2.875% Maturity 24,000 8/15/28	25,353	22,645
	US Treasury NTS 1.125%	Notes 1.125% Maturity 38,000 2/15/31	34,018	31,070
	US Treasury NTS 2.875%	Notes 2.875% Maturity 15,000 5/15/32	14,229	13,873
	Federal Home Ln BKS Cons 4.000%	Bnd 4.000% Maturity 15,000 7/24/25	15,000	14,801
	Eagle Bank Sweep Tier 18	Cash balance	244,478	244,478
	US Treasury Bills 0.000%	Notes 0.000% Maturity 300,000 3/23/23	294,633	297,207
	BLF Fedfund Cash Reserve	Cash balance	70,072	70,072
	Merrill Lynch	Cash balance	222	222
	Consumer Discretionary	ETF	175	126
	First Trust Cloud	ETF	35	31
	Health Care Select SPDR	ETF	113	123
	Invesco Emerging Markets	ETF	79,636	53,415
	Invesco Preferred ETF	ETF	39,721	31,002
	Ishares Biotechnology	ETF	53	64
	Ishares IBOXX $	ETF	268,290	245,863
	Ishares 20+ Year	ETF	193,966	171,442
	Ishares TIPS Bond	ETF	54,336	49,601
	Ishares MBS ETF	ETF	580,788	499,088
	Ishares Inc Core MSCI	ETF	400,760	320,580
	Ishares TR Core MSCI EAF	ETF	656,091	627,535
	Schwab Short-Term US Treasury	ETF	370,502	367,734
	Vaneck Fallen Angel High Yield	ETF	27,623	25,156
	Vanguard Small Cap Value	ETF	96,427	105,126
	Vanguard Small Cap Growth	ETF	97,969	99,468
	Vanguard Value ETF	ETF	1,032,005	1,150,332
	Vanguard Growth ETF	ETF	855,706	829,211
	Vanguard Information Tech ETF	ETF	22	21
	Vanguard Short-Term Corp Bond	ETF	214,972	198,577
	Vanguard Intermediate-Term Corp Bd	ETF	328,704	277,563
	Vanguard Total International Bond	ETF	48,908	49,043
	Xtrackers USD High Yield Corp Bond	ETF	29,731	25,249
	Bank of America	Cash balance	165,779	165,779
*	Participant Loans	Interest ranging from 5.25%-7.25%	-	112,177
			$ 11,811,708	$ 13,655,925

Notes:

1. Column (a) An asterisk denotes that the investment is with a party-in-interest.

E.I.N. 94-2992661
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See Accountant's Audit Report.

SHASTA PRODUCE
401(k) PROFIT SHARING PLAN

Schedule H, line 4i - Schedule of Assets Acquired and Disposed Within Year

December 31, 2022

Identity of issue, borrower, lessor, or similar party (a)	Description of investment including maturity date, rate of interest, collateral, par, or maturity value (b)	Cost (c)	Proceeds (d)
Citigroup Inc SR NT	Note 4.041% 5/17/24	$ 11,066	$ 10,991
Dodge & Cox Stock Fund	Mutual fund	45,857	44,551
Doubleline Total Return Fund	Mutual fund	110,000	99,762
Gilead Sciences Inc SR NT	Note 1.200% 10/1/27	8,507	7,818
Invesco Exchange-Traded S&P 500	ETF	208,755	157,248
JP Morgan Equity Income Fund	Mutual fund	148,691	148,380
JP Morgan Hedged Equity Fund	Hedge fund	175,000	171,623
PIMCO Income Fund	Mutual fund	10,000	9,641
Putnam Ultra Short Duration Income	Mutual fund	75,000	74,950
State Str Corp SR NT	Note 2.623% 2/7/33	8,000	6,924
Teledyne Technologie	Note 2.750% 4/1/31	7,046	6,022
Vanguard Index FDS Small-Cap	ETF	157,740	142,017

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See Accountant's Audit Report.

Schedule H/I, Line 4a
Schedule of Delinquent Participant Contributions

Name of Plan:

Shasta Produce 401(k) Profit Sharing Plan

Employer Identification No.: ► 94-2992661

Plan year (beginning/ending):► 01/01/2022 to 12/31/2022 Plan number:► 001

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
Check here if Late Participant Loan Repayments are included: ☒	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
16775		16775		
15876		15876		
16386		16386		
15827		15827		
15808		15808		
15816		15816		
16994		16994		
15976		15976		
14773		14773		
14873		14873		
15146		15146		
15314		15314		
14810		14810		

Schedule H, Line 4i
Schedule of Assets (Acquired and Disposed of Within Year)

Name of Plan:

Shasta Produce 401(k) Profit Sharing Plan

Employer Identification No.: ► 94-2992661

Plan year (beginning/ending):► 1/1/2022 to 12/31/2022 Plan number:► 001

(a) Identity of issue, borrower, lessor, or similar party	**(b)** Description of investment including maturity date, rate of interest, collateral, par or maturity value	**(c)** Costs of acquisition	**(d)** Proceeds of dispositions
Citigroup Inc SR NT 4.041%	Bnd 4.041% Maturity 11,000 5/17/24	11066	10991
Dodge & Cox Stock FU	Mutual fund	45857	44551
DoubleLine Total Ret Und Class 1	Mutual fund	110000	99762
Gilead Sciences Inc 00%	Bnd 00% 9,000 Maturity 10/1/27	8507	7818
Invesco Exch-TRA S&P500 RE	ETF	208754.84	157248
JP Morgan Equity Inc CLASS R6	Mutual fund	148691	148380
JP Morgan Hedged Equity ClassR6	Hedge fund	175000	171623
Pimco Income Fund In L Class	Mutual fund	10000	9641.33
Putnam Ultra Short D Come Fnd Y	Mutual fund	75000	74950
State Str Corp SR NT 2.623%	Note 2.623% Maturity 8,000 2/7/33	8000	6924
Teledyne Technologie 2.750%	Note 2.750% Maturity 7,000 4/1/31	7046	6022
Vanguard Index FDS S SHS New	ETF	157740	142017

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

Name of Plan:

► Shasta Produce 401(k) Profit Sharing Plan

Employer Identification Number:► 94-2992661

For plan year (beginning/ending):► 1/1/2022 to 12/31/2022 Plan number:► 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Consumer discretionary (ML	ETF	175	126
	First Trust Cloud (ML)	ETF	35	31
	Health Care Select SPDR (ML)	ETF	113	123
	Invesco Emerging Markets (ML)	ETF	79636	53415
	Invesco Perferred ETF (ML)	ETF	39721	31002
	Ishares Biotechnology (ML)	ETF	53	64
	Ishares IBOXX$ (ML)	ETF	268290	245863
	Ishares 20+ Year (ML)	ETF	193966	171442
	Ishares TIPS Bond (ML)	ETF	54336	49601
	Ishares MBS ETF (ML)	ETF	580788	499088
	Ishares Inc Core MSCI (ML)	ETF	400760	320580
	Ishares TR Core MSCI EAF (ML)	ETF	656091	627535
	Schwab Short-Term U.S. Treasury ETF (ML)	ETF	370502	367734
	Vaneck Fallen Angel High Yield Bond (ML)	ETF	27623	25156
	Vanguard Small Cap Value ETF (ML)	ETF	96427	105126
	Vanguard Small Cap Growth ETF (ML)	ETF	97969	99468
	Vanguard Value ETF (ML)	ETF	1032005	1150332
	Vanguard Growth ETF (ML)	ETF	855706	829211
	Vanguard Information Tech ETF (ML)	ETF	22	21
	Vanguard Short-Term Corporate Bond (ML)	ETF	214972	198577
	Vanguard Intrmdiate-Term Corp Bond (ML)	ETF	328714	277563
	Vanguard Total Interntl Bond ETF (ML)	ETF	48908	49043
	Xtrackers USD High Yield Corporate Bond ETF (ML)	ETF	29731	25249
	JPMorgan Exchange-Traded FD TR Equity Premium Income (FR)	ETF	208742	216107
	JPMorgan Hedged Equity 3 Fund Class R6 (FR)	Hedge Fund	215000	217607
	Ishares TR Russell 1000 Growth ETF (FR)	ETF	221979	453118
	Ishares TR Russell 1000 Value ETF (FR)	ETF	328751	514094
	Ishares TR Russell 3000 Value ETF (FR)	ETF	1056704	2482650
	JPMorgan Equity Income Fund Class R6 (FR)	ETF	533499	521629
	Vanguard Specialized Funds Divid Appreciation ETS SHS (FR)	ETF	512598	668140
	Ishares Inc MSCI CDA ETF (FR)	ETF	133340	115144
	SPDR S&P Midcap 400 ETF TR Unit SER 1 (FR)	ETF	100625	231579
	Vanguard Index FDS Vanguard Small Cap ETF (FR)	ETF	255627	229425
	DFA U.S. Large-Cap Growth Portfolio (FR)	ETF	269044	261170
	Dodge & Cox Stock Fund Class I (FR)	ETF	335143	289972
	Allspring Short-Term Bond Plus Institutional Class (FR)	Mutual Fund	301000	304680
	Amazon Com Inc NT 3.600% (FR)	Bond 3.600% Maturity 10,000 4/13/32	9753	9182
	American Express Co NT FLTG 0.000% (FR)	Bond 0.000% Maturity 13,000 5/3/24	13000	12986
	Apple Inc. ISIN#US037833EN61 3.250% (FR)	Bond 3.250% Maturity 8,000 8/8/29	7794	7420
	HSBC Holdings PLC ISIN#US404280CS68 0.976% (FR)	Bond 0.976% Maturity 9,000 5/24/25	8813	8336
	Shell Intl Fin BV Note ISIN#US822582BD31 3,250% (FR)	Bond 3.250%, Maturity 8,000 5/11/25	8208	7578
	Bank Amer Corp Medium Tern SR NT Ser N Fixed/FL TG 3.974%(FR)	Bond 3.974% Maturity 9,000 2/07/30	9250	8194
	Boeing Co SR NT 2.800%(FR)	Bond 2.800% Maturity 8,000 3/01/24	8152	7759
	Citigroup Inc Fltg Rate SR NT 5.783% (FR)	Note 5.783% Maturity 25,000 6/1/24	25269	25027
	Coca Cola NT 2.250% (FR)	Bond 2.250% Maturity 8,000 1/5/32	7706	6709
	Entergy LA LLC 0.950%(FR)	Bond 0.950%, Maturity 8,000 10/1/24	7988	7450
	JPMorgan Chase & Co Fixed to Fltg Rate NT 4.005%(FR)	Bond 4.005% Maturity 8,000 4/23/29	7197	7389
	Lennar Corp GTD FXD RT SR NT 5.875%(FR)	Bond 5.875% Maturity 7,000 11/15/24	7510	7033
	Morgan Stanley FLTG RT Global NT Ser I 5.770%(FR)	Bond 5.770% Maturity 8,000 5/8/24	8150	8014
	Morgan Stanley SR NT Fixed/FLTG Rate 3.622% (FR)	Bond 3.622% Maturity 9,000 4/1/31	8202	7879
	Putnam Ultra Short Duration Income Fund Class Y (FR)	Mutual Fund	408698	407809
	Qualcomm Inc 4.250% (FR)	Bond 4.250% Maturity 8,000 5/20/32	8017	7723
	United States Treas Bills 0.000% (FR)	Notes 0.000% Maturity 300,000 3/23/23	294633	297207
	United States Treas NTS 0.500%(FR)	Notes 0.500% Maturity 24,000 4/30/27	22612	20698
	United States Treas NTS 1.250%(FR)	Notes 1.250% Maturity 60,000 8/31/24	58974	56831
	United States Treas NTS 1.375%(FR)	Notes 1.375% Maturity 50,000 8/31/23	50218	48881

	United States Treas NTS 1.500%(FR)	Notes 1.500% Maturity 39,000 2/15/30	36425	33324
	United States Treas NTS 1.625%(FR)	Notes 1.625% Maturity 24,000 8/15/29	22415	20877
	United States Treas NTS 1.875%(FR)	Notes 1.875% Maturity 45,000 6/30/26	45955	41799
	United States Treas NTS 2.000%(FR)	Notes 2.000% Maturity 50,000 8/15/25	50688	47250
	United States Treas NTS 2.875%(FR)	Notes 2.875% Maturity 24,000 8/15/28	25353	22645
	United States Treas NTS 1.125%(FR)	Notes 1.125% Maturity 38,000 2/15/31	34018	31070
	United States Treas NTS 2.875%(FR)	Notes 2.875% Maturity 15,000 5/15/32	14229	13873
	Federal Home Ln Bnks Cons BD 4.000% (FR)	Notes 4.000% Maturity 15,000 7/24/25	15000	14801
	Pimco Income Fund Institutional Class(FR)	Mutual Fund	250237	228271
	Bank of Nova Scotia B C SR NT (FR)	Bond 1.30% Maturity 8,000 11/06/25	8108	7336
	BLF Fedfund Cash Reserve	Cash Balance		70072
	Eagle Bank Sweep	Cash Balance		244478
	Bank of America	Cash Balance		165779
	Merrrill Lynch	Cash Balance		222
*	Participant Loans	Interest Ranging from 5.25% to 7.25%		112177