

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning 10/01/2021 and ending 12/31/2021	
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 R & D MAINTENANCE SERVICES, INC. 401(K)PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 11/01/1986
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) R & D MAINTENANCE SERVICES, INC. 6846 S. CANTON AVE., SUITE 250 TULSA, OK 74136
2b	Employer Identification Number (EIN) 73-1098539
2c	Plan Sponsor's telephone number 918-392-8900
2d	Business code (see instructions) 561210

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.	09/12/2024	TERRY BIGGER
	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 ☒ 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 R & D MAINTENANCE SERVICES, INC. c Plan Name R & D MAINTENANCE SERVICES, INC. PENSION PLAN		4b EIN 73-1098539 4d PN 001	
5 Total number of participants at the beginning of the plan year		5	200
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)	199
a(2) Total number of active participants at the end of the plan year		6a(2)	180
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	20
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	200
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	200
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	200
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 2F 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) ☒ 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) ☐ 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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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 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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 10/01/2021 and ending 12/31/2021		
A Name of plan R & D MAINTENANCE SERVICES, INC. 401(K)PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 R & D MAINTENANCE SERVICES, INC.	D Employer Identification Number (EIN) 73-1098539	

Part I	Asset and Liability Statement
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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	40578	721
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1063	
(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)	392590	
(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)		
(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)	7491319	7607073
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

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	7925550	7607794

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	7925550	7607794
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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)	117158	
(B) Participants	2a(1)(B)	103432	
(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)		220590
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)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(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)	292635	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		292635
(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)		
(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)		-371528
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		141697
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	456617	
(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)		456617
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)	2836	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		2836
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		459453
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-317756
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: HOGANTAYLOR, LLP

(2) EIN: 73-1413977

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.)			
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?	X		1000000
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 _____.

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 2021 This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 10/01/2021 and ending 12/31/2021		
A Name of plan R & D MAINTENANCE SERVICES, INC. 401(K)PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 R & D MAINTENANCE SERVICES, INC.		D Employer Identification Number (EIN) 73-1098539
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): 84-1455663		
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 0
b Enter the amount contributed by the employer to the plan for this plan year		6b 0
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 0
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2021 v. 201209		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (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 _____

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

**FINANCIAL STATEMENTS
AND SUPPLEMENTAL INFORMATION**

**AS OF DECEMBER 31, 2021, SEPTEMBER 30, 2021 AND OCTOBER 31, 2020,
AND PERIOD FROM OCTOBER 1, 2021 THROUGH DECEMBER 31, 2021, AND
PERIOD FROM NOVEMBER 1, 2020 THROUGH SEPTEMBER 30, 2021**

WITH

INDEPENDENT AUDITOR'S REPORTS

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INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees and Plan Administrator
R & D Maintenance Services, Inc. 401(k) Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the December 31, 2021 Financial Statements

We have performed an audit of the financial statements of R & D Maintenance Services, Inc. 401(k) Plan, formerly the R & D Maintenance Services, Inc. Pension 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 statement of net assets available for benefits as of December 31, 2021, the related statement of changes in net assets available for benefits for the period from October 1, 2021 through December 31, 2021, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 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 certification from a qualified institution, as of December 31, 2021, and for the period from October 1, 2021 through December 31, 2021, stating that the certified investment information, as described in Note 3 to the December 31, 2021 financial statements, is complete and accurate.

Opinion on the December 31, 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the December 31, 2021 Financial Statements section:

- the amounts and disclosures in the accompanying 2021 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 December 31, 2021 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 on the December 31, 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the December 31, 2021 Financial Statements section of our report. We are

required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the December 31, 2021 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 December 31, 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the December 31, 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

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

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and

disclosed in the 2021 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 – 2021 Supplemental Information Required by ERISA

The supplemental information, schedule of assets (held at end of year) as of December 31, 2021, 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 supplemental information, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental information that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

- the form and content of the supplemental information, other than the information in the supplemental information that agreed to or is derived from the certified investment information, are 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 information 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).



Oklahoma City, Oklahoma
July 14, 2022

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees and Plan Administrator
R & D Maintenance Services, Inc. Pension Plan

Report on the Financial Statements

We have audited the accompanying financial statements of R & D Maintenance Services, Inc. Pension Plan (the Plan), which effective October 1, 2021, became the R & D Maintenance Services, Inc. 401(k) Plan, which comprise the statements of net assets available for benefits as of September 30, 2021 and October 31, 2020, the related statement of changes in net assets available for benefits for the period from November 1, 2020 through September 30, 2021, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements 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 entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of September 30, 2021 and October 31, 2020, and changes in net assets available for benefits for the period from November 1, 2020 through September 30, 2021, in accordance with accounting principles generally accepted in the United States of America.

Other Matter – Report on Supplemental Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental information, schedule of assets (held at end of year) as of September 30, 2021, and schedule of reportable transactions for the period November 1, 2020 through September 30, 2021, is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of Plan 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 auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

A handwritten signature in black ink that reads "Hogan Taylor" followed by the letters "UP".

Oklahoma City, Oklahoma
July 14, 2022

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2021, September 30, 2021, and October 31, 2020

	December 31, 2021	September 30, 2021	October 31, 2020
Assets			
Cash, noninterest bearing	\$ 721	\$ 40,578	\$ 25,626
Investments, at fair value	7,607,073	7,883,909	5,931,347
Prepaid expense	-	-	108
Company contributions receivable	-	1,063	1,067
Net assets available for benefits	<u>\$ 7,607,794</u>	<u>\$ 7,925,550</u>	<u>\$ 5,958,148</u>

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

**Period from October 1, 2021 through December 31, 2021,
and period from November 1, 2020 through September 30, 2021**

	December 31, 2021	September 30, 2021
Additions to net assets attributed to		
Investment income:		
Net appreciation (depreciation) in fair value of investments	\$ (371,528)	\$ 1,686,435
Interest and dividends	292,635	273,637
Net investment income (loss)	(78,893)	1,960,072
Contributions:		
Participant	103,432	-
Employer	117,158	275,667
Total contributions	220,590	275,667
Total additions	141,697	2,235,739
Deductions from net assets attributed to		
Benefits paid to participants	456,617	211,755
Insurance premiums	-	30,720
Administrative expenses	2,836	25,862
Total deductions	459,453	268,337
Net (decrease) increase	(317,756)	1,967,402
Net assets available for benefits:		
Beginning of year	7,925,550	5,958,148
End of year	\$ 7,607,794	\$ 7,925,550

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2021, September 30, 2021, and October 31, 2020

Note 1 – Description of the Plan

R & D Maintenance Services, Inc. (the Company or Employer) sponsors the R & D Maintenance Services, Inc. Pension Plan. Effective October 1, 2021, the R & D Maintenance Services, Inc. Pension Plan was converted from a nonstandardized money purchase pension plan to a preapproved defined contribution plan. In addition, the plan name was changed from R & D Maintenance Services, Inc. Pension Plan to R & D Maintenance Services, Inc. 401(k) Plan (the Plan). The following description provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan established for the benefit of the Company's employees, except for members of nonresident aliens with no U.S.-sourced income, and employees of the J. Strom Thurmond Lake project. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan's trustees are responsible for the oversight of the Plan. Effective October 1, 2021, Great-West Trust Company LLC (the Custodian) holds the Plan assets. Empower Retirement maintains the records of the participant data.

Eligibility

Prior to October 1, 2021, nonexcluded employees who had reached 18 years of age were eligible to participate in the Plan. Participants were automatically enrolled in the Plan on the first day of the Plan year after satisfying eligibility requirements.

Effective October 1, 2021, nonexcluded employees who have reached 18 years of age and have completed three months of service are eligible to participate in the Plan and may enroll on May 1 or November 1 after satisfying the eligibility requirements. Age and service requirements were waived for employees employed on October 1, 2021.

Contributions

Prior to October 1, 2021, participant contributions were not allowed. Effective October 1, 2021, participants may contribute up to 90% of their compensation, as defined in the Plan document, as pretax deferrals. 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 plans.

The Employer contributes 3% of each participant's eligible compensation, up to \$27,540, plus 5% of each participant's eligible compensation greater than \$26,580 as nonelective Employer contributions. Prior to October 1, 2021, participants must have been credited with 500 hours of service or be employed on the last day of the Plan year to be eligible for Employer nonelective contributions.

Effective October 1, 2021, the Company also contributes 3% of each participant's eligible compensation as Employer safe harbor nonelective contributions.

Contributions are subject to certain limitations of the Internal Revenue Code (the Code).

Prior to October 1, 2021, the trustees directed the investment of Employer contributions into various investments and securities held by the Plan. Effective October 1, 2021, participants direct the investment of all contributions into various investment options offered by the Plan.

Participant accounts

Each participant's account is credited with participant contributions, Employer contributions, and allocations of Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined in the Plan document. Prior to October 1, 2021, life insurance was purchased on active participants who were full-time employees, with the premium being paid from the respective participant's account. The benefit to which a participant is entitled is the benefit that can be provided from the life insurance in force, if any, and the participant's vested account.

Vesting

Prior to October 1, 2021, vesting in participant accounts was based upon years of continuous service as follows:

<u>Years of service</u>	<u>Vesting percentage</u>
Less than one year	0%
One, but less than two	20%
Two, but less than three	40%
Three, but less than four	60%
Four, but less than five	80%
Five years or more	100%

Participants automatically became 100% vested upon retirement, disability, or death. Participants who terminated for any other reason are entitled to the vested amount of their accounts.

Effective October 1, 2021, nonterminated participants are vested immediately in their contributions and Employer contributions plus actual earning thereon.

Payment of benefits

Prior to October 1, 2021, upon retirement, termination, disability or death, a participant, or his or her beneficiary in the event of death, could elect to receive a lump-sum amount or annuity payments equal to the value of the participant's vested interest in his or her account. Upon termination, automatic distributions were required for balances of less than \$1,000.

Effective October 1, 2021, upon retirement, termination, disability, or death, a participant, or his or her beneficiary in the event of death, may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. Additionally, a participant may elect annuity payments from the participant's account balance as of September 30, 2021. Upon termination, automatic

distributions are required for balances of less than \$5,000. Automatic distributions above \$1,000 made without the participant's consent are rolled into an individual retirement account designated by the Custodian.

Generally, certain minimum distributions are required for participants who have separated from service and have reached age 72.

Forfeitures

Forfeitures are used to restore participant balances previously forfeited, to pay Plan administrative expenses, or to reduce Employer contributions, as determined by the Plan sponsor. The Plan had \$545, \$11,546, and \$33,043 in unallocated forfeitures as of December 31, 2021, September 30, 2021, and October 31, 2020, respectively. For the period from October 1, 2021 through December 31, 2021, forfeitures in the amount of \$1,204 were used to reduce Employer safe harbor contributions and \$11,531 were used to reduce Employer nonelective contributions. For the period from November 1, 2020 through September 30, 2021, forfeitures in the amount of \$33,043 were used to reduce Employer contributions.

Administrative expenses

The Plan allows certain administrative expenses to be paid from Plan assets. Investment expenses netted against investment income represent amounts associated with the net expense ratios of the investments in the Plan's fund lineup. Effective October 1, 2021, the Plan participates in an agreement with the Custodian, where excess revenue may be returned and deposited into an unallocated expense account. The amounts in the unallocated expense account may be used to pay reasonable and necessary Plan expenses or may be allocated to participants. There was \$177 of unallocated funds in the expense account as of December 31, 2021. For the period from October 1, 2021 through December 31, 2021, the Plan used \$2,388 from the expense account to pay certain Plan expenses.

Note 2 – Summary of Significant Accounting Policies

Basis of accounting

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

Use of estimates

The preparation of the financial statements in conformity with U.S. GAAP requires Plan 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.

Investment valuation and income recognition

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. Plan management determines the Plan's valuation policies utilizing information provided by the investment custodians. See Note 4 for 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 appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Payment of benefits

Benefit payments are recorded when paid. There were no benefits requested before year-end that were not paid.

Subsequent events

The Plan administrator has evaluated subsequent events through July 14, 2022, the date the financial statements were available to be issued.

Note 3 – Information Certified by the Plan's Custodian

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Custodian has certified that the following data included in the accompanying financial statements and supplemental schedule of assets (held at end of year) is complete and accurate:

- Investments as shown on the statement of net assets available for benefits as of December 31, 2021;
- Net investment activity as shown in the statement of changes in net assets available for benefits for the period from October 1, 2021 through December 31, 2021;
- Investment information included in the footnotes and on the supplemental schedule of assets (held at end of year) as of December 31, 2021.

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental information or schedule of assets (held at end of year).

Note 4 – Fair Value Measurements

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

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

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. There have been no changes in the methodologies used at December 31, 2021, September 30, 2021, and October 31, 2020. During the periods from October 1, 2021 through December 31, 2021, and November 1, 2020 through September 30, 2021, there were no transfers of financial instruments into or out of Level 3. Following is a description of the valuation methodologies used for assets measured at fair value:

Money market accounts – Valued at amortized cost, which approximates fair value.

Mutual and closed-end funds – Valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end.

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.

Investments measured at fair value on a recurring basis consisted of the following types of instruments as of:

	Fair value measurements as of December 31, 2021			
	Level 1	Level 2	Level 3	Total
Mutual funds and total investments at fair value	\$ 7,607,073	\$ -	\$ -	\$ 7,607,073
Fair value measurements as of September 30, 2021				
	Level 1	Level 2	Level 3	Total
Money market accounts	\$ 392,590	\$ -	\$ -	\$ 392,590
Mutual funds	7,491,319	-	-	7,491,319
Total investments at fair value	\$ 7,883,909	\$ -	\$ -	\$ 7,883,909
Fair value measurements as of October 31, 2020				
	Level 1	Level 2	Level 3	Total
Closed-end funds	\$ 203,930	\$ -	\$ -	\$ 203,930
Money market accounts	448,339	-	-	448,339
Mutual funds	5,279,078	-	-	5,279,078
Total investments at fair value	\$ 5,931,347	\$ -	\$ -	\$ 5,931,347

Note 5 – Life Insurance Contract with Insurance Company

Prior to October 1, 2021, the Plan had a group term life policy with The Lincoln National Life Insurance Company, which was determined to be an unallocated contract. The life insurance policy covered

participants who were full-time employees of the Company. Premiums were paid on a monthly basis for the policy period of July 1, 2019 through July 1, 2021. Coverage was \$40,000 per person up to age 65 and reduced to \$26,000 at age 65, and \$20,000 at age 70. Benefits under the policy were paid upon death of a participant. The policy had no cash surrender value.

Note 6 – Related Party and Party-in-Interest Transactions

Certain administrative functions are performed by officers and employees of the Company. No officer or employee receives compensation from the Plan for these services. Certain administrative expenses, totaling approximately \$4,200, were paid by the Company on behalf of the Plan for the period October 1, 2021 through December 31, 2021. The Company does not expect reimbursement from the Plan for these expenses. There were no expenses paid by the Company on behalf of the Plan for the period November 1, 2020 through September 30, 2021.

Prior to October 1, 2021, certain investments were managed by the Plan's custodians. These transactions qualify as party-in-interest transactions. Certain fees incurred by the Plan are included in net appreciation in fair value of investments.

Note 7 – 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 accounts.

Note 8 – Tax Status

The Company adopted a Preapproved Defined Contribution Plan (the Preapproved Plan) sponsored by Dataair Employee Benefit Systems Inc. The Internal Revenue Service has determined and informed the Preapproved Plan sponsor by a favorable opinion letter dated June 30, 2020, that the Preapproved Plan is designed in accordance with the applicable sections of the Code. The Preapproved Plan's opinion letter is being relied on by the Plan. Plan management believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

Note 9 – 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. In addition, on January 30, 2020, the World Health Organization declared the coronavirus outbreak a "Public Health Emergency of International Concern" and on March 11, 2020, declared it to be a pandemic. The pandemic in the United States and throughout the world has resulted in substantial volatility in financial markets. 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 participant account balances and the amounts reported on the statements of net assets available for benefits.

SUPPLEMENTAL INFORMATION

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (Held at End of Year)

**Plan #001
EIN 73-1098539**

December 31, 2021

(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
Investments:				
	T. Rowe Price	Retirement 2020	**	\$ 2,147,291
	T. Rowe Price	Retirement 2030	**	1,685,299
	T. Rowe Price	Retirement 2025	**	940,318
	T. Rowe Price	Retirement 2035	**	849,597
	BlackRock	20/80 Target Allocation	**	606,045
	Vanguard	500 Index Admiral	**	269,131
	T. Rowe Price	Retirement 2045	**	187,605
	Vanguard	Federal Money Market	**	183,241
	T. Rowe Price	Retirement 2040	**	182,654
	T. Rowe Price	Retirement 2050	**	160,730
	T. Rowe Price	Retirement 2055	**	110,531
	BlackRock	60/40 Target Allocation	**	89,814
	Vanguard	Inflation-Protected Securities Fund	**	70,102
	T. Rowe Price	Retirement 2060	**	51,433
	T. Rowe Price	Retirement 2065	**	22,080
	Vanguard	Total Stock Market Index Fund	**	16,799
	Vanguard	Extended Market Index Fund	**	14,047
	American Funds	EuroPacific Growth	**	11,445
	American Funds	Fundamental Investors	**	3,268
	Vanguard	Strategic Equity Fund	**	2,050
	BlackRock	80/20 Target Allocation	**	1,814
	Vanguard	Total Bond Market Index Fund	**	1,779
				<u><u>\$ 7,607,073</u></u>

** Column (d) cost information not required as accounts are participant directed.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (Held at End of Year)

**Plan #001
EIN 73-1098539**

September 30, 2021

(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
	Investments:			
*	American Century	Capital Preservation Fund	**	\$ 4,309,307
*	TD Ameritrade	Treasury Obligations Money Fund	**	1,391,555
*	Vanguard	Treasury Money Market Fund	**	1,790,457
*	First Oklahoma Bank	Money Market Account	**	391,990
*	TD Ameritrade	Money Market Account	**	600
				<u>\$ 7,883,909</u>

* Represents a party-in-interest.

** Column (d) cost information not required as accounts are participant directed.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4j

SCHEDULE OF REPORTABLE TRANSACTIONS

**Plan #001
EIN 73-1098539**

Period from November 1, 2020 through September 30, 2021

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
Category (i) - A single transaction in excess of 5% of Plan assets:						
* American Century	Treasury Money Market Fund	\$ 1,995,386	\$ -	\$ 1,995,386	\$ -	\$ -
* American Century	Treasury Money Market Fund	2,313,914	-	2,313,914	-	-
* TD Ameritrade	Treasury Obligations Money Fund	1,391,555	-	1,391,555	-	-
* Vanguard	Treasury Money Market Fund	1,790,453	-	1,790,453	-	-
* American Century	Growth Fund	-	1,995,386	1,034,239	1,995,386	961,147
* Dodge & Cox	Balanced Fund	-	1,251,399	839,554	1,251,399	411,845
* Dodge & Cox	Stock Fund	-	916,644	678,960	916,644	237,684
* Vanguard	500 Index Fund	-	1,790,453	532,798	1,790,453	1,257,655
* Vanguard	Wellington Fund	-	982,415	654,697	982,415	327,718

* Represents a party-in-interest.
There were no category (ii) or (iv) transactions.
Column (e) and (f) are not applicable.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4j

SCHEDULE OF REPORTABLE TRANSACTIONS

**Plan #001
EIN 73-1098539**

Period from November 1, 2020 through September 30, 2021

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
Category (iii) - A series of transactions involving securities of the same issue that within the Plan year amount in the aggregate to more than 5% of Plan assets:						
* American Century	Treasury Money Market Fund	\$ 1,995,386	\$ -	\$ 1,995,386	\$ -	\$ -
* American Century	Treasury Money Market Fund	2,313,914	-	2,313,914	-	-
* TD Ameritrade	Treasury Obligations Money Fund	1,391,555	-	1,391,555	-	-
* Vanguard	Treasury Money Market Fund	1,790,453	-	1,790,453	-	-
* American Century	Growth Fund	-	1,995,386	1,034,239	1,995,386	961,147
* Dodge & Cox	Balanced Fund	-	1,251,399	839,554	1,251,399	411,845
* Dodge & Cox	Stock Fund	-	916,644	678,960	916,644	237,684
* Vanguard	500 Index Fund	-	1,790,453	532,798	1,790,453	1,257,655
* Vanguard	Wellington Fund	-	982,415	654,697	982,415	327,718

* Represents a party-in-interest.
There were no category (ii) or (iv) transactions.
Column (e) and (f) are not applicable.

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 2020 This Form is Open to Public Inspection
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Part I Annual Report Identification Information For calendar plan year 2020 or fiscal plan year beginning <u>11/01/2020</u> and ending <u>09/30/2021</u>		
A This return/report is for:	☐ a multiemployer plan ☒ a single-employer plan	☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ an amended return/report	☐ the final 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 ☐ special extension (enter description)	☐ automatic extension ☐ the DFVC program

Part II Basic Plan Information—enter all requested information		
1a Name of plan <u>R&D MAINTENANCE SERVICES, INC. PENSION PLAN</u>	1b Three-digit plan number (PN) ▶	<u>001</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>R&D MAINTENANCE SERVICES, INC.</u> <u>6914 S. YORKTOWN AVE.</u> <u>SUITE 210</u> <u>TULSA, OK 74136</u>	1c Effective date of plan <u>09/01/1980</u>	2b Employer Identification Number (EIN) <u>73-1098539</u>
	2c Plan Sponsor's telephone number <u>918-392-8900</u>	2d Business code (see instructions) <u>561210</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		<u>7/14/22</u> Date	<u>Terry Bigger</u> Enter name of individual signing as plan administrator
SIGN HERE		<u>7/14/22</u> Date	<u>Terry Bigger</u> 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 (2020)
v. 200204

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		5 238
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) 153
a(2) Total number of active participants at the end of the plan year		6a(2) 167
b Retired or separated participants receiving benefits.....		6b 4
c Other retired or separated participants entitled to future benefits		6c 80
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 251
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 1
f Total. Add lines 6d and 6e		6f 252
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 252
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 21
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: 2C 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) ☒ <u>1</u> 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 2020 Form M-1 annual report. If the plan was not required to file the 2020 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 _____

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN**SCHEDULE H, LINE 4i****SCHEDULE OF ASSETS (Held at End of Year)****Plan #001****EIN 73-1098539****December 31, 2021**

	(b)	(c)		(e)
(a)	Identity of issue, borrower, lessor or similar party	Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	Current value
Investments:				
	T. Rowe Price	Retirement 2020	**	\$ 2,147,291
	T. Rowe Price	Retirement 2030	**	1,685,299
	T. Rowe Price	Retirement 2025	**	940,318
	T. Rowe Price	Retirement 2035	**	849,597
	BlackRock	20/80 Target Allocation	**	606,045
	Vanguard	500 Index Admiral	**	269,131
	T. Rowe Price	Retirement 2045	**	187,605
	Vanguard	Federal Money Market	**	183,241
	T. Rowe Price	Retirement 2040	**	182,654
	T. Rowe Price	Retirement 2050	**	160,730
	T. Rowe Price	Retirement 2055	**	110,531
	BlackRock	60/40 Target Allocation	**	89,814
	Vanguard	Inflation-Protected Securities Fund	**	70,102
	T. Rowe Price	Retirement 2060	**	51,433
	T. Rowe Price	Retirement 2065	**	22,080
	Vanguard	Total Stock Market Index Fund	**	16,799
	Vanguard	Extended Market Index Fund	**	14,047
	American Funds	EuroPacific Growth	**	11,445
	American Funds	Fundamental Investors	**	3,268
	Vanguard	Strategic Equity Fund	**	2,050
	BlackRock	80/20 Target Allocation	**	1,814
	Vanguard	Total Bond Market Index Fund	**	1,779
				<u>\$ 7,607,073</u>

** Column (d) cost information not required as accounts are participant directed.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (Held at End of Year)

**Plan #001
EIN 73-1098539**

September 30, 2021

(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
	Investments:			
*	American Century	Capital Preservation Fund	**	\$ 4,309,307
*	TD Ameritrade	Treasury Obligations Money Fund	**	1,391,555
*	Vanguard	Treasury Money Market Fund	**	1,790,457
*	First Oklahoma Bank	Money Market Account	**	391,990
*	TD Ameritrade	Money Market Account	**	600
				<u>\$ 7,883,909</u>

* Represents a party-in-interest.

** Column (d) cost information not required as accounts are participant directed.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4j

SCHEDULE OF REPORTABLE TRANSACTIONS

**Plan #001
EIN 73-1098539**

Period from November 1, 2020 through September 30, 2021

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
Category (i) - A single transaction in excess of 5% of Plan assets:						
* American Century	Treasury Money Market Fund	\$ 1,995,386	\$ -	\$ 1,995,386	\$ -	\$ -
* American Century	Treasury Money Market Fund	2,313,914	-	2,313,914	-	-
* TD Ameritrade	Treasury Obligations Money Fund	1,391,555	-	1,391,555	-	-
* Vanguard	Treasury Money Market Fund	1,790,453	-	1,790,453	-	-
* American Century	Growth Fund	-	1,995,386	1,034,239	1,995,386	961,147
* Dodge & Cox	Balanced Fund	-	1,251,399	839,554	1,251,399	411,845
* Dodge & Cox	Stock Fund	-	916,644	678,960	916,644	237,684
* Vanguard	500 Index Fund	-	1,790,453	532,798	1,790,453	1,257,655
* Vanguard	Wellington Fund	-	982,415	654,697	982,415	327,718

* Represents a party-in-interest.
There were no category (ii) or (iv) transactions.
Column (e) and (f) are not applicable.

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4j

SCHEDULE OF REPORTABLE TRANSACTIONS

**Plan #001
EIN 73-1098539**

Period from November 1, 2020 through September 30, 2021

(a) Identity of party involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase price	(d) Selling price	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
Category (iii) - A series of transactions involving securities of the same issue that within the Plan year amount in the aggregate to more than 5% of Plan assets:						
* American Century	Treasury Money Market Fund	\$ 1,995,386	\$ -	\$ 1,995,386	\$ -	\$ -
* American Century	Treasury Money Market Fund	2,313,914	-	2,313,914	-	-
* TD Ameritrade	Treasury Obligations Money Fund	1,391,555	-	1,391,555	-	-
* Vanguard	Treasury Money Market Fund	1,790,453	-	1,790,453	-	-
* American Century	Growth Fund	-	1,995,386	1,034,239	1,995,386	961,147
* Dodge & Cox	Balanced Fund	-	1,251,399	839,554	1,251,399	411,845
* Dodge & Cox	Stock Fund	-	916,644	678,960	916,644	237,684
* Vanguard	500 Index Fund	-	1,790,453	532,798	1,790,453	1,257,655
* Vanguard	Wellington Fund	-	982,415	654,697	982,415	327,718

* Represents a party-in-interest.
There were no category (ii) or (iv) transactions.
Column (e) and (f) are not applicable.

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 2021 This Form is Open to Public Inspection
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Part I Annual Report Identification Information	
For calendar plan year 2021 or fiscal plan year beginning <u>10/01/2021</u> and ending <u>12/31/2021</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.)
B This return/report is:	☒ a single-employer plan;
	☐ a DFE (specify) ____
	☐ 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>R & D Maintenance Services, Inc. 401(k) Plan</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 11/01/1986</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 11/01/1986	
1b Three-digit plan number (PN) ▶	001				
1c Effective date of plan 11/01/1986					
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) <u>R & D Maintenance Services, Inc.</u> <u>6846 S. Canton Ave., Suite 250</u> <u>US Tulsa OK 74136</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 73-1098539</td> </tr> <tr> <td>2c Plan Sponsor's telephone number (918) 392-8900</td> </tr> <tr> <td>2d Business code (see instructions) 561210</td> </tr> </table>	2b Employer Identification Number (EIN) 73-1098539	2c Plan Sponsor's telephone number (918) 392-8900	2d Business code (see instructions) 561210	
2b Employer Identification Number (EIN) 73-1098539					
2c Plan Sponsor's telephone number (918) 392-8900					
2d Business code (see instructions) 561210					

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		<u>9/12/24</u> Date	<u>Terry Bigger, CFO</u> 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 ☒ 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 and the plan name and the plan number from the last return/report: a Sponsor's name R & D Maintenance Services, Inc. c Plan name R & D Maintenance Services, Inc. Pension Plan	4b EIN 73-1098539 4d PN 001
5 Total number of participants at the beginning of the plan year	5 200
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) 199
a(2) Total number of active participants at the end of the plan year	6a(2) 180
b Retired or separated participants receiving benefits	6b 0
c Other retired or separated participants entitled to future benefits	6c 20
d Subtotal. Add lines 6a(2), 6b, and 6c.	6d 200
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e 0
f Total. Add lines 6d and 6e	6f 200
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 200
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 2F 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)	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	(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	b General 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	(1) ☒ H (Financial Information) (2) ☐ I (Financial Information - Small Plan) (3) ☐ 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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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 _____

R & D MAINTENANCE SERVICES, INC. 401(K) PLAN

SCHEDULE H, LINE 4i

SCHEDULE OF ASSETS (Held at End of Year)

Plan #001

EIN 73-1098539

December 31, 2021

(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
Investments:				
	T. Rowe Price	Retirement 2020	**	\$ 2,147,291
	T. Rowe Price	Retirement 2030	**	1,685,299
	T. Rowe Price	Retirement 2025	**	940,318
	T. Rowe Price	Retirement 2035	**	849,597
	BlackRock	20/80 Target Allocation	**	606,045
	Vanguard	500 Index Admiral	**	269,131
	T. Rowe Price	Retirement 2045	**	187,605
	Vanguard	Federal Money Market	**	183,241
	T. Rowe Price	Retirement 2040	**	182,654
	T. Rowe Price	Retirement 2050	**	160,730
	T. Rowe Price	Retirement 2055	**	110,531
	BlackRock	60/40 Target Allocation	**	89,814
	Vanguard	Inflation-Protected Securities Fund	**	70,102
	T. Rowe Price	Retirement 2060	**	51,433
	T. Rowe Price	Retirement 2065	**	22,080
	Vanguard	Total Stock Market Index Fund	**	16,799
	Vanguard	Extended Market Index Fund	**	14,047
	American Funds	EuroPacific Growth	**	11,445
	American Funds	Fundamental Investors	**	3,268
	Vanguard	Strategic Equity Fund	**	2,050
	BlackRock	80/20 Target Allocation	**	1,814
	Vanguard	Total Bond Market Index Fund	**	1,779
				<u>\$ 7,607,073</u>

** Column (d) cost information not required as accounts are participant directed.