

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 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ 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 TYSON FOODS, INC. RETIREMENT SAVINGS PLAN
1b	Three-digit plan number (PN) ▶ 004
1c	Effective date of plan 10/01/1987
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) TYSON FOODS, INC. P.O. BOX 2020 SPRINGDALE, AR 72765-2020
2b	Employer Identification Number (EIN) 71-0225165
2c	Plan Sponsor's telephone number 479-290-5000
2d	Business code (see instructions) 112300

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.	10/15/2024	JACOB BARNEY
	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 TYSON FOODS, INC. P.O. BOX 2020 SPRINGDALE, AR 72765-2020	3b Administrator's EIN 71-0225165 3c Administrator's telephone number 479-290-5000
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 125358
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 113806 6a(2) 118403 6b 1219 6c 11672 6d 131294 6e 666 6f 131960 6g(1) 67276 6g(2) 67063 6h 2
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:
 2G 2J 2K 2E 2F 2T 3H

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
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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
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (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 2023 Form M-1 annual report. If the plan was not required to file the 2023 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan TYSON FOODS, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 TYSON FOODS, INC.	D Employer Identification Number (EIN) 71-0225165	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☒ Yes ☐ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
CHARLES SCHWAB TRUST COMPANY
42-1558009

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHWEST PLAN SERVICES
91-2090931

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

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

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

NORTHWEST PLAN SERVICES, INC.

91-2090931

(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?
15 17 64 13	NONE	2780238	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

INVESCO

58-1707262

(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?
28 99 27	NONE	491940	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

TYSON FOODS, INC.

71-0225165

(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?
14 38 50	EMPLOYER	366630	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

CHARLES SCHWAB TRUST CO.

42-1558009

(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?
18 25 27 59 62 65 19	NONE	150731	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

AON INVESTMENT CONSULTING

59-2706923

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 70	NONE	127870	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DST RETIREMENT SOLUTIONS

43-1581814

(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?
49	NONE	44980	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

MCCONNELL & JONES LLP

76-0488832

(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?
10	NONE	24500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INFORMATION SOLUTIONS

13-2638166

(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?
36 50	NONE	5216	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
INVESCO	19	0

(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.
INVESCO 58-1707262	CUSTODIAL FEES

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan <u>TYSON FOODS, INC. RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>004</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TYSON FOODS, INC.</u>	D Employer Identification Number (EIN) <u>71-0225165</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT INVESCO SHORT TERM BOND</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-215</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>288907485</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT INVESCO INT</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-212</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>64309895</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT JENNISON INT</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-218</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>64084155</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT LOOMIS SAYLES INT</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-217</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>32106352</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT PIMCO INT</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-207</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>31989395</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT DODGE & COX CORE</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-244</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>32594260</u>		
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>IGT LOOMIS SAYLES CORE</u>				
b Name of sponsor of entity listed in (a): <u>INVESCO NATIONAL TRUST COMPANY</u>				
c EIN-PN <u>61-1246990-224</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>32710347</u>		

a Name of MTIA, CCT, PSA, or 103-12 IE: IGT INVESCO CORE

b Name of sponsor of entity listed in (a): INVESCO NATIONAL TRUST COMPANY

c EIN-PN 61-1246990-225	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32228804
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a Name of MTIA, CCT, PSA, or 103-12 IE: IGT PIMCO CORE

b Name of sponsor of entity listed in (a): INVESCO NATIONAL TRUST COMPANY

c EIN-PN 61-1246990-219	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32419415
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection
	For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
	A Name of plan TYSON FOODS, INC. RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ► 004
C Plan sponsor's name as shown on line 2a of Form 5500 TYSON FOODS, INC.	D Employer Identification Number (EIN) 71-0225165	

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	181488	1944895
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2970678	2899811
(2) Participant contributions	1b(2)	6198190	5992129
(3) Other	1b(3)	3704701	2234577
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	23236139	3
(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)	186601582	196596638
(9) Value of interest in common/collective trusts	1c(9)	2228150525	2426524673
(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)	737807990	865640891
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	51288505	37696135

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	3240139798	3539529752
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	2041959	2235139
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	2041959	2235139
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	3238097839	3537294613

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)	111780670	
(B) Participants	2a(1)(B)	209879776	
(C) Others (including rollovers)	2a(1)(C)	6281987	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		327942433
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	257453	
(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)	12059035	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		12316488
(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)	256532	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		256532
(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)		19004955
(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)		443226973
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		802747381

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	480951033	
(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)		480951033
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		21565323
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)	127870	
(3) Recordkeeping fees.....	2i(3)	2780238	
(4) IQPA audit fees.....	2i(4)	24500	
(5) Investment advisory and investment management fees	2i(5)	491940	
(6) Bank or trust company trustee/custodial fees	2i(6)	150731	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	424602	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		3999881
j Total expenses. Add all expense amounts in column (b) and enter total	2j		506516237

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		296231144
l Transfers of assets:			
(1) To this plan	2l(1)		2965630
(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: **MCCONNEL & JONES LLP**

(2) EIN: **76-0488832**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		25000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
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.			

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 2023 This Form is Open to Public Inspection.
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan TYSON FOODS, INC. RETIREMENT SAVINGS PLAN		B Three-digit plan number (PN) ▶ 004
C Plan sponsor's name as shown on line 2a of Form 5500 TYSON FOODS, INC.		D Employer Identification Number (EIN) 71-0225165
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): 42-1558009		
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2023 v. 230707		

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)

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)

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)

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

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

16a**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) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
 High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

- 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. _____

Part VII IRS Compliance Questions

- 21a** Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☒ Yes ☐ No

- 21b** If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

- ☒ Design-based safe harbor method
- ☐ "Prior year" ADP test
- ☐ "Current year" ADP test
- ☐ N/A

- 22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.

Tyson Foods, Inc.
Retirement Savings Plan

Financial Statements and Supplemental Schedule
December 31, 2023 and 2022



INDEPENDENT AUDITOR'S REPORT

To the Participants and Plan Administrator of the
Tyson Foods, Inc. Retirement Savings Plan

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

We have performed audits of the financial statements of the Tyson Foods, Inc. Retirement Savings Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2023, and 2022, the related statement of changes in net assets available for benefits for the year ended December 31, 2023, and the related notes to the financial statements (collectively, the financial statements).

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

Management has obtained certifications from qualified institutions as of December 31, 2023 and 2022, and for the year ended December 31, 2023, stating that the certified investment information, as described in Note 6 to the financial statements, is complete and accurate.

Opinion on the Financial Statements

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the



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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with US 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 ability of the Plan to continue as a going concern for one year after the date that the financial statements were 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 transactions of the Plan that are presented and disclosed in the financial statements are in conformity with the provisions of the Plan, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* 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 US 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 US GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- 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 audits 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 internal controls of the Plan. 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 ability of the Plan to continue as a going concern for a reasonable period of time.

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

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.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2023 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of Management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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 US GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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



McConnell Jones

In our opinion

- the form and content of the supplemental schedule, other than the information in the supplemental schedules 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 schedules related to assets held by and certified to by the 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).

McConnell & Jones LLP

Houston, Texas
October 9, 2024

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Tyson Foods, Inc.
Retirement Savings Plan
Statements of Net Assets Available for Benefits
December 31, 2023 and 2022 (in thousands)

	2023	2022
Assets:		
Investments, at fair value:		
Mutual funds	\$ 865,641	\$ 737,808
Collective investment trust	1,815,175	1,614,168
Cash, interest-bearing	—	23,236
Total investments, at fair value	2,680,816	2,375,212
Investments, at contract value:		
Stable value synthetic guaranteed investment contracts	649,046	665,271
Total investments	3,329,862	3,040,483
Receivables:		
Employer contributions	2,900	2,971
Participant contributions	5,992	6,198
Notes receivable from participants	196,597	186,602
Due from broker for securities sold	2,234	3,705
Total receivables	207,723	199,476
Cash	1,945	181
Total assets	\$ 3,539,530	\$ 3,240,140
Liabilities:		
Accounts payable	\$ 1,775	\$ 1,638
Accrued expenses	337	344
Due to broker for securities purchased	123	60
Total liabilities	2,235	2,042
Net assets available for benefits	\$ 3,537,295	\$ 3,238,098

See accompanying notes to the financial statements.

Tyson Foods, Inc.
Retirement Savings Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2023 (in thousands)

2023

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	\$ 443,227
Interest and dividends	19,519
Total investment income	462,746
Contributions:	
Employer	111,780
Participant	209,880
Participant rollovers	6,282
Total contributions	327,942
Interest from notes receivable	12,059
Total additions and contributions	802,747
Deductions from net assets attributed to:	
Benefits paid to participants	502,516
Administrative expenses	4,000
Total deductions	506,516
Net increase in net assets available for benefits	296,231
Transfer from other plan	2,966
Net assets available for benefits:	
Beginning of year	3,238,098
End of year	\$ 3,537,295

See accompanying notes to the financial statements.

Tyson Foods, Inc.
Retirement Savings Plan
Notes to Financial Statements
December 31, 2023 and 2022

NOTE 1: DESCRIPTION OF THE PLAN

The following brief description of the Tyson Foods, Inc. Retirement Savings Plan ("the Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined contribution plan which was adopted effective October 1, 1987, to provide a means for eligible employees to defer a portion of their compensation and to encourage savings to provide additional financial security for the future.

Contributions

Prior to October 2, 2013, all eligible employees of Tyson Foods, Inc. ("the Sponsor") and its subsidiaries who have adopted the Plan, other than leased employees, could elect to participate on the first day of the month coinciding with or following completion of three months of service. Employees hired on October 2, 2013 through December 31, 2022 became eligible to participate the first day of the month following the completion of fifty-nine days of employment, but not earlier than January 1, 2014. Effective January 1, 2023, all eligible employees could elect to participate as of their first day of active employment. Eligible employees must elect to have deductions withheld from their paychecks by the Sponsor in order to contribute to the Plan. Effective January 1, 2021, the Plan also allows Roth elective deferrals, wherein participants can designate a portion of their elective deferral contributions as after-tax Roth elective deferral contributions.

The Plan, as amended effective January 1, 1997, allows 100% Sponsor matching contributions on participant deferrals up to 3% of compensation, including annual bonuses and 50% for participant deferrals in excess of 3% but not more than 5% of compensation, including annual bonuses, except for certain groups as noted in the Plan document. The Plan provides matching contributions only to employees who have completed one year of service.

Transfer from other Plan

Effective October 13, 2023 the Williams Sausage, Inc. 401(k) Plan was merged into the Plan, resulting in the recognition of a transfer of assets totaling approximately \$3 million at year-end. The transfer is included in the statement of changes in net assets available for benefits for the year ended December 31, 2023.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Sponsor's contribution and Plan earnings. Additionally, the Plan is responsible for all administrative expenses, including investment advisory, legal and consulting fees. Administrative expenses are allocated evenly across all participant accounts on a monthly basis, after allocating loan initiation fees collected during the period to the respective participants' accounts.

Most funds impose restrictions on the timing of certain trades, depending on the fund and length of time the shares were held. Certain mutual fund investments do not allow individual repurchases above \$5,000 if the repurchase is made within 30 days of the initial sale.

Vesting

Plan participants are fully vested at all times with regard to their salary deferral and employer matching contributions, except as noted in the Plan document.

Notes Receivable from Participants

Participants may obtain loans from their individual accounts in amounts not to exceed the lesser of 50% of their vested account balance or \$50,000. Loans are secured by the balance in the participant's account and bear interest at a fixed rate based upon New York prime plus 1% at the time the loan is made. The maximum maturity of a loan is sixty (60) months. Principal and interest are paid ratably through weekly, bi-weekly, or monthly payroll deductions. Participants are charged a one-time fee of \$35 per loan. Terms for loans initiated under merged plans may differ and generally carry over through the maturity of those loans.

Benefits

Participants who have attained age 59 ½ or become subject to an in-service disability may elect to withdraw part or all of their account balance. All other participants may elect to withdraw their salary deferral contributions to alleviate a financial hardship. Participants may withdraw after-tax or rollover contributions at any time.

Payment of a participant's benefits upon retirement, disability or death may be in a lump sum, in installments over a period of time or any combination at the participant's election. Participants terminating employment with vested account balances of \$1,000 or less are distributed in a lump sum. Participants may elect to defer distribution of their benefit if the vested account balance exceeds \$1,000 upon termination of employment. In order to elect installment payments, a participant's account balance must exceed \$5,000.

Plan Termination

Although the Sponsor has not expressed any intent to do so, the Sponsor has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of Employee Retirement Income Security Act ("ERISA"). In event of termination, participants will be entitled to their vested account balance.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Use of Estimates

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

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. See Note 3: Fair Value Measurement for a description of fair value measurements.

Purchases and sales are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends and capital gain distributions are recorded on the ex-dividend date. The net appreciation or depreciation in fair value of investments consists of realized gains and losses and changes in unrealized gains and losses of these investments during the year. Unrealized gains and losses on investments are based on changes in the fair values of such investments.

Notes Receivable from Participants

Notes receivable from participants are valued at the unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

NOTE 3: FAIR VALUE MEASUREMENT

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. The fair value hierarchy contains three levels as follows:

Level 1 — Unadjusted quoted prices available in active markets for the identical assets or liabilities at the measurement date that the Plan has the ability to access.

Level 2 — Other observable inputs available at the measurement date, other than quoted prices included in Level 1, either directly or indirectly, including:

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

Level 3 — Unobservable inputs that cannot be corroborated by observable market data and reflect the use of significant management judgment. These values are generally determined using pricing models for which the assumptions utilize management's estimates of market participant assumptions.

The fair value hierarchy requires the use of observable market data when available. In instances where the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest level input significant to the fair value measurement in its entirety. Our assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022.

Mutual funds

Valued at quoted market prices for shares held by the Plan at year end.

Collective investment trust

At December 31, 2023 and 2022, the Plan's investments included units of a collective investment trust ("CIT") which provides long term investors with an asset allocation strategy designed to provide a strategic portfolio of diversifying and real return type asset classes. The CIT is valued at the net asset value ("NAV") of units held by the Plan at year end as a practical expedient. The NAV represents the value at which the units of the CIT may be purchased or redeemed. Valuation of the CIT occurs, at a minimum, each day the CIT is open for contributions and redemptions. Unit values are determined by dividing the CIT's net assets by the number of units outstanding on the valuation date. Redemptions are permitted on a daily basis and are executed based on the CIT unit value determined on that day. There were no unfunded commitments related to the CIT as of December 31, 2023 and 2022. The CIT investment has not been categorized in the fair value hierarchy.

Cash, interest-bearing

The Schwab Bank Savings account is an interest-bearing Money Market Deposit Account ("MMDA") opened with, and maintained by, Charles Schwab Trust Bank. The MMDA is a capital preservation option for retirement plan participants that does not carry the fees and restrictions ordinarily associated with mutual funds. Funds deposited in the MMDA are insured by the Federal Deposit Insurance Company ("FDIC") up to \$250,000 per participant. Participants may generally move funds into and out of the savings account at any time. The carrying value of funds held in the MMDA approximates fair value.

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

The following tables set forth the Plan's assets at fair value by level, within the fair value hierarchy at December 31, 2023 and 2022 (in thousands):

					in thousands	
December 31, 2023	Level 1		Level 2		Level 3	
						Total
Mutual funds	\$	865,641	\$	—	\$	865,641
Collective investment trust ^(a)		—		—		1,815,175
	\$	865,641	\$	—	\$	2,680,816

December 31, 2022	Level 1		Level 2		Level 3	
						Total
Mutual funds	\$	737,808	\$	—	\$	737,808
Collective investment trust ^(a)		—		—		1,614,168
Schwab Bank Savings interest-bearing cash account		23,236		—		23,236
	\$	761,044	\$	—	\$	2,375,212

^(a) Units of the collective investment trust are valued at NAV and excluded from the fair value hierarchy.

NOTE 4: STABLE VALUE FUND

The Plan's Stable Value Fund ("the Fund") holds a portfolio of synthetic guaranteed investment contracts ("GICs") in order to manage market risks and to alter the return characteristics of underlying securities to match certain fixed income fund objectives. GICs generally change the investment characteristics of underlying securities to those of guaranteed investment contracts. The GICs provide that benefit-responsive distributions for underlying securities may be withdrawn at contract or face value. Benefit-responsive distributions are generally defined as a withdrawal on account of a participant's retirement, disability, or death, or participant-directed transfers in accordance with the terms of the Plan.

The primary purpose of the Fund is to provide preservation of principal, maintain a stable interest rate, and to provide daily liquidity at contract value for participant withdrawals and transfers in accordance with the provisions of the Plan. To accomplish the above objectives, the Fund invests primarily in a portfolio of GICs managed by Invesco Trust Company, the Custodian. BNY Mellon serves as the custodian for the underlying securities in the GICs. Each of the GICs is comprised of common collective trusts, which seek to maximize the portfolio's total return relative to a specific bond index. IGT Loomis Sayles Intermediate Fund, IGT Invesco Intermediate Fund, IGT Jennison Intermediate Fund, and IGT PIMCO Intermediate Fund seek to replicate the Invesco Custom Intermediate Bond Index. IGT Loomis Sayles Core Fixed Income Fund, IGT Dodge & Cox Core Fixed Income Fund, IGT Invesco Core Fixed Income Fund and IGT PIMCO Core Fixed Income Fund strive to match the Invesco Custom Core Bond Index, while the IGT Invesco Short-Term Bond Fund follows the Invesco Custom Short Term Bond Index. As each of the common collective trusts is tied to short-term or intermediate bond indices, the nature and risk does not vary significantly between each GIC.

Because these contracts meet the fully benefit-responsive investment contract criteria, they are reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value, as reported by the Plan, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The synthetic GICs utilize a wrapper investment contract structure with the underlying investments owned by the Fund and held in trust for Plan participants. The Fund purchases a wrapper contract from an issuer that amortizes the realized and unrealized gains and losses on the underlying fixed income investments, typically over the duration of the investments, through adjustments to the future interest crediting rate (which is the rate earned by participants in the Fund for the underlying investments). The issuer provides assurance that the adjustments to the interest crediting rate will not result in a future interest crediting rate that is less than zero. The key factors that influence future interest crediting rates for a GIC include:

- The level of market interest rates;
- The amount and timing of participant contributions, transfers, and withdrawals into/out of the wrapper contract;
- The investment returns generated by the fixed income investments covered by the wrapper contract; and
- The duration of the underlying investments backing the wrapper contract.

Interest crediting rates for GICs are typically reset on a monthly or quarterly basis. The crediting rate formula amortizes the Fund's realized and unrealized market value gains and losses over the duration of the contract's underlying investments. All GICs provide for a minimum interest crediting rate of zero percent. In the event that the interest crediting rate should fall below zero and the requirements of the wrapper contract are satisfied, the wrapper issuers will pay to the Plan the shortfall needed to maintain the interest crediting rate at zero. This helps to ensure that participants' principal and accrued interest will be protected.

In certain circumstances, the amount withdrawn from the GIC would be payable at fair value rather than at contract value, known as value events. These value events could include the termination of the Plan, a material adverse change to the provisions of the Plan, or a decision to withdraw from the contract in order to change to a different investment provider. The Sponsor does not believe the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

There were no circumstances noted in which issuers may terminate at an amount other than contract value.

At December 31, 2023 and 2022, all investment contracts had open maturities.

NOTE 5: INCOME TAX STATUS

The Plan's latest tax determination letter dated May 2, 2017, from the Internal Revenue Service ("IRS") states that the Plan, as designed, is in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since the date of the letter. However, the Plan Sponsor and the Plan's tax counsel believe that the Plan is presently designed and being operated in compliance with the current requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust was tax-exempt as of the financial statement date.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and to recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Sponsor has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2023 and 2022, there were no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6: INFORMATION CERTIFIED BY CUSTODIAN

Information related to investments at fair value and cash disclosed in the statement of net assets available for benefits as of December 31, 2023 and 2022, and net appreciation in fair value of investments and interest and dividends in the statement of changes in net assets available for benefits for the year ended December 31, 2023 was obtained or derived from information provided to the Sponsor and certified as complete and accurate by Charles Schwab Trust Bank, the Custodian. Investments at contract value in the statement of net assets available for benefits as of December 31, 2023 and the supplemental schedule including investments held at December 31, 2023, was obtained or derived from information provided to the Sponsor and certified as complete and accurate by Invesco Trust Company, the Custodian for the Stable Value Fund. All investment balances and investment information in Note 3, Fair Value Measurements has been certified by the Custodian, except for the classification and level of investments.

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 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 those changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

NOTE 8: PARTY-IN-INTEREST TRANSACTIONS

The Sponsor pays certain expenses of administering the Plan and provides the Plan with office space, equipment and personnel necessary to administer the Plan.

Transactions involving the following assets are considered to be party-in-interest transactions. Plan investments during 2023 and 2022 included amounts in a Schwab Bank Government Money Fund and a Schwab Bank MMDA, respectively. Accordingly, transactions involving the Schwab Bank Government Money Fund and Schwab Bank MMDA are considered to be allowable transactions conducted with a party-in-interest under ERISA. As of December 31, 2023 and 2022, the Plan held approximately \$21 million and \$23 million in the Schwab Bank Government Money Fund and Schwab Bank MMDA, respectively. Certain assets of the Plan during 2023 and 2022 consisted of notes receivable from participants. The collective trust funds within the Stable Value Fund and certain mutual funds are managed by Invesco Trust Company, who also serves as the Custodian for the Stable Value Fund. As of December 31, 2023 and 2022, the Plan held approximately \$649 million and \$665 million, respectively in the Stable Value Fund. During the year ended December 31, 2023, the Plan paid Invesco \$0.5 million in administrative expenses.

NOTE 9: SUBSEQUENT EVENTS

Effective June 1, 2024 the Plan Custodian and Recordkeeper was changed to Fidelity Investments Institutional Operations Co, LLC.

Supplemental Schedule

Tyson Foods, Inc.
Retirement Savings Plan
Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
EIN 71-0225165
Plan #004
As of December 31, 2023 (in thousands)

(a)	(b) Identity of Issue	(c) Description	Number of Shares	(d) Cost	(e) Current Value
Participant Directed Account Investments					
Mutual Funds					
***	Schwab Government Money Fund	Mutual Funds	21,018	* \$	21,018 **
	Blackrock Multi-Asset Credit Fund	Mutual Funds	8,989	* \$	83,773 **
	Parnassus Core Equity Fund	Mutual Funds	37,714	*	403,856 **
	PIMCO Total Return Fund	Mutual Funds	25,565	*	231,948 **
	State Street Bloomberg Roll Fund	Mutual Funds	3,385	*	36,627 **
	State Street Global Real Estate Fund	Mutual Funds	10,187	*	88,419 **
Total Mutual Funds				\$	865,641
Collective Investment Trusts					
	Earnest Partners SMID CAP Core Found	Collective Investment Trust	17,477	*	277,709 **
	GQG Partners International Equity	Collective Investment Trust	46,762	*	492,408 **
	SS Russell SMID CAP IDX Lend CL II	Collective Investment Trust	8,139	*	127,914 **
	State Street Global ALLCAP EQ EX US IDX II	Collective Investment Trust	11,111	*	147,838 **
	State Street US Bond INDX SL CL XIV	Collective Investment Trust	2,416	*	25,646 **
	State Street S&P 500 Index Fund II	Collective Investment Trust	32,700	*	677,085 **
	State Street U.S. Inflation	Collective Investment Trust	5,371	*	59,484 **
	Strategic Completion Non-Lendable	Collective Investment Trust	547	*	7,091 **
Total Collective Investment Trusts					1,815,175
Synthetic Guaranteed Investment Contracts					
***	Lincoln National Life Ins Contract #BVW0061I	Wrapper		*	7,131 **
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust		*	17,376 **
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust		*	20,790 **
***	IGT Jennison Intermediate Fund	Common Collective Trust		*	31,473 **

Tyson Foods, Inc.
Retirement Savings Plan
Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
EIN 71-0225165
Plan #004
As of December 31, 2023 (in thousands)

under guaranteed investment contract at fair value

Synthetic Guaranteed Investment Contracts (continued)
Lincoln National Life Ins
Contract #BVW0061I (continued)

***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,177	**
***	IGT PIMCO Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	27,553	**
***	Nationwide Life Insurance Contract #INV_TYS_IP_0919	Wrapper	*	5,837	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	52,295	**
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	2,865	**
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,747	**
***	IGT Loomis Sayles Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	2,389	**
***	IGT PIMCO Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	22,008	**
***	Prudential Ins Co Contract #GA-62458	Wrapper	*	5,230	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	43,971	**
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	14,261	**
***	IGT PIMCO Intermediate Fund	Common Collective Trust	*	2,595	**

Tyson Foods, Inc.
Retirement Savings Plan
Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
EIN 71-0225165
Plan #004
As of December 31, 2023 (in thousands)

under guaranteed investment contract at fair value
Synthetic Guaranteed Investment Contracts (continued)
Prudential Ins Co
Contract #GA-62458 (continued)

***	IGT Jennison Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,129	**
***	IGT PIMCO Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	10,412	**
***	RGA Contract #TYSON-0812-01	Wrapper	*	6,415	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	64,996	**
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	10,860	**
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	11,417	**
***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	11,407	**
***	IGT Loomis Sayles Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	9,797	**
***	State Street Bank Contract #103044	Wrapper	*	7,321	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	75,860	**
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	20,513	**
***	IGT Loomis Sayles Core Fixed Income Fund	Common Collective Trust	*	20,524	**

Tyson Foods, Inc.
Retirement Savings Plan
Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
EIN 71-0225165
Plan #004
As of December 31, 2023 (in thousands)

under guaranteed investment contract at fair value				
Synthetic Guaranteed Investment Contracts (continued)				
***	Transamerica Contract #MDA00545TR	Wrapper		5,762 **
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	34,410 **
***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	5,522 **
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	18,398 **
***	IGT PIMCO Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	1,841 **
***	IGT Jennison Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	17,482 **
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	9,216 **
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	5,066 **
Total Synthetic Guaranteed Investment Contracts			\$	649,046
Total Investments			\$	3,329,862
***	Notes Receivable From Participants	Maturity 0-9 years; Interest 3.25% - 9.50%	\$	196,597

* Cost omitted for participant-directed investments.

** The Custodian has certified that the above investment information as of December 31, 2023, is complete and accurate.

*** A party-in-interest as defined by ERISA

Tyson Foods, Inc.
Retirement Savings Plan
Schedule H, Line 4i
Schedule of Assets (Held at End of Year)
EIN 71-0225165
Plan #004
As of December 31, 2023 (in thousands)

(a)	(b) Identity of Issue	(c) Description	Number of Shares	(d) Cost	(e) Current Value
Participant Directed Account Investments					
Mutual Funds					
***	Schwab Government Money Fund	Mutual Funds	21,018	* \$	21,018 **
	Blackrock Multi-Asset Credit Fund	Mutual Funds	8,989	* \$	83,773 **
	Parnassus Core Equity Fund	Mutual Funds	37,714	*	403,856 **
	PIMCO Total Return Fund	Mutual Funds	25,565	*	231,948 **
	State Street Bloomberg Roll Fund	Mutual Funds	3,385	*	36,627 **
	State Street Global Real Estate Fund	Mutual Funds	10,187	*	88,419 **
Total Mutual Funds				\$	865,641
Collective Investment Trusts					
	Earnest Partners SMID CAP Core Found	Collective Investment Trust	17,477	*	277,709 **
	GQG Partners International Equity	Collective Investment Trust	46,762	*	492,408 **
	SS Russell SMID CAP IDX Lend CL II	Collective Investment Trust	8,139	*	127,914 **
	State Street Global ALLCAP EQ EX US IDX II	Collective Investment Trust	11,111	*	147,838 **
	State Street US Bond INDX SL CL XIV	Collective Investment Trust	2,416	*	25,646 **
	State Street S&P 500 Index Fund II	Collective Investment Trust	32,700	*	677,085 **
	State Street U.S. Inflation	Collective Investment Trust	5,371	*	59,484 **
	Strategic Completion Non-Lendable	Collective Investment Trust	547	*	7,091 **
Total Collective Investment Trusts					1,815,175
Synthetic Guaranteed Investment Contracts					
***	Lincoln National Life Ins Contract #BVW0061I	Wrapper		*	7,131 **
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust		*	17,376 **
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust		*	20,790 **
***	IGT Jennison Intermediate Fund	Common Collective Trust		*	31,473 **

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under guaranteed investment contract at fair value

Synthetic Guaranteed Investment Contracts (continued)
Lincoln National Life Ins
Contract #BVW0061I (continued)

***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,177	**
***	IGT PIMCO Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	27,553	**
***	Nationwide Life Insurance Contract #INV_TYS_IP_0919	Wrapper	*	5,837	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	52,295	**
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	2,865	**
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,747	**
***	IGT Loomis Sayles Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	2,389	**
***	IGT PIMCO Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	22,008	**
***	Prudential Ins Co Contract #GA-62458	Wrapper	*	5,230	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	43,971	**
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	14,261	**
***	IGT PIMCO Intermediate Fund	Common Collective Trust	*	2,595	**

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under guaranteed investment contract at fair value
Synthetic Guaranteed Investment Contracts (continued)
Prudential Ins Co
Contract #GA-62458 (continued)

***	IGT Jennison Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	15,129	**
***	IGT PIMCO Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	10,412	**
***	RGA Contract #TYSON-0812-01	Wrapper	*	6,415	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	64,996	**
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	10,860	**
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	11,417	**
***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	11,407	**
***	IGT Loomis Sayles Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	9,797	**
***	State Street Bank Contract #103044	Wrapper	*	7,321	**
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	75,860	**
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	20,513	**
***	IGT Loomis Sayles Core Fixed Income Fund	Common Collective Trust	*	20,524	**

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under guaranteed investment contract at fair value				
Synthetic Guaranteed Investment Contracts (continued)				
***	Transamerica Contract #MDA00545TR	Wrapper		5,762 **
***	IGT Invesco Short Term Bond Fund under guaranteed investment contract at fair value	Common Collective Trust	*	34,410 **
***	IGT Loomis Sayles Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	5,522 **
***	IGT Invesco Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	18,398 **
***	IGT PIMCO Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	1,841 **
***	IGT Jennison Intermediate Fund under guaranteed investment contract at fair value	Common Collective Trust	*	17,482 **
***	IGT Dodge & Cox Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	9,216 **
***	IGT Invesco Core Fixed Income Fund under guaranteed investment contract at fair value	Common Collective Trust	*	5,066 **
Total Synthetic Guaranteed Investment Contracts			\$	649,046
Total Investments			\$	3,329,862
***	Notes Receivable From Participants	Maturity 0-9 years; Interest 3.25% - 9.50%	\$	196,597

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