

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2023

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning 10/01/2023 and ending 09/30/2024

- A This return/report is for: [ ] a multiemployer plan [ ] a multiple-employer plan... [X] a single-employer plan [ ] a DFE... B This return/report is: [ ] the first return/report [ ] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [X] Form 5558 [ ] automatic extension... 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: COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 06/01/1962
2a Plan sponsor's name (employer, if for a single-employer plan): COASTAL AGROBUSINESS, INC.
2b Employer Identification Number (EIN): 56-0586507
2c Plan Sponsor's telephone number: 252-756-1120
2d Business code (see instructions): 424600

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.

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Rows include plan administrator, employer/plan sponsor, and DFE.

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

Form 5500 (2023) v. 230707

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	241
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits ..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> . ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits ..... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> . ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	224
	<b>6a(2)</b>	224
	<b>6b</b>	25
	<b>6c</b>	0
	<b>6d</b>	249
	<b>6e</b>	0
	<b>6f</b>	249
	<b>6g(1)</b>	
<b>6g(2)</b>	249	
<b>6h</b>	11	
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	<b>7</b>	

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
2E 3D

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

<b>9a</b> Plan funding arrangement (check all that apply)	<b>9b</b> Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<b>a Pension Schedules</b>	<b>b General Schedules</b>
(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)
(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached _____
(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)
(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)

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

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**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.

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

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**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 \_\_\_\_\_

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<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2023</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

<b>A</b> Name of plan <b>COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>COASTAL AGROBUSINESS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>56-0586507</b>	

**Part I Service Provider Information (see instructions)**

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

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

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

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

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

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

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

FIRST CITIZENS BANK & TRUST COMPANY

PO BOX 29522  
RALEIGH, NC 27626-0522

56-1484847

(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?
		59606	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**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.

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

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

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

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

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

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<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> 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)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2023</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2023 or fiscal plan year beginning **10/01/2023** and ending **09/30/2024**

<b>A</b> Name of plan <b>COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN</b>	<b>B</b> Three-digit plan number (PN)	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>COASTAL AGROBUSINESS, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>56-0586507</b>	

**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.

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>		
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	1160272	1620873
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>	39890	34796
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	618164	745558
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>		
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>		
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>		
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	19979184	24242440
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>		
<b>(15)</b> Other .....	<b>1c(15)</b>		

<b>1d</b> Employer-related investments:		<b>(a)</b> Beginning of Year	<b>(b)</b> End of Year
(1) Employer securities .....	<b>1d(1)</b>		
(2) Employer real property .....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation .....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e) .....	<b>1f</b>	21797510	26643667
<b>Liabilities</b>			
<b>g</b> Benefit claims payable .....	<b>1g</b>		
<b>h</b> Operating payables .....	<b>1h</b>		
<b>i</b> Acquisition indebtedness .....	<b>1i</b>		
<b>j</b> Other liabilities .....	<b>1j</b>		
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j) .....	<b>1k</b>		
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f) .....	<b>1l</b>	21797510	26643667

**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.

<b>Income</b>		<b>(a)</b> Amount	<b>(b)</b> Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers .....	<b>2a(1)(A)</b>	1620873	
<b>(B)</b> Participants .....	<b>2a(1)(B)</b>		
<b>(C)</b> Others (including rollovers) .....	<b>2a(1)(C)</b>		
(2) Noncash contributions .....	<b>2a(2)</b>		1620873
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....	<b>2b(1)(A)</b>	30318	
<b>(B)</b> U.S. Government securities .....	<b>2b(1)(B)</b>		
<b>(C)</b> Corporate debt instruments .....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants) .....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans .....	<b>2b(1)(E)</b>		
<b>(F)</b> Other .....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		30318
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock .....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock .....	<b>2b(2)(B)</b>		
<b>(C)</b> Registered investment company shares (e.g. mutual funds) .....	<b>2b(2)(C)</b>	543999	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		543999
<b>(3)</b> Rents .....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds .....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions) .....	<b>2b(4)(B)</b>		
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....	<b>2b(4)(C)</b>		
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate .....	<b>2b(5)(A)</b>		
<b>(B)</b> Other .....	<b>2b(5)(B)</b>		
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts.....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts.....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities.....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		4579768
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		6774958

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	1869195	
(2) To insurance carriers for the provision of benefits.....	<b>2e(2)</b>		
(3) Other.....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		1869195
<b>f</b> Corrective distributions (see instructions).....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		
<b>h</b> Interest expense .....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances.....	<b>2i(1)</b>		
(2) Contract administrator fees.....	<b>2i(2)</b>		
(3) Recordkeeping fees.....	<b>2i(3)</b>		
(4) IQPA audit fees.....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	59606	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>		
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses .....	<b>2i(11)</b>		
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		59606
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		1928801

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		4846157
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		
(2) From this plan .....	<b>2l(2)</b>		

**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: **SULLIVAN, SHEARIN & COMPANY**

(2) EIN: **56-1350306**

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

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2023</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2023 or fiscal plan year beginning 10/01/2023 and ending 09/30/2024

<b>A</b> Name of plan <u>COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>COASTAL AGROBUSINESS, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>56-0586507</u>	

<b>Part I</b>	<b>Distributions</b>
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**All references to distributions relate only to payments of benefits during the plan year.**

<b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
<b>2</b> 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): <u>75-3182674</u>		
<b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>		
<b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....	3	

<b>Part II</b>	<b>Funding Information</b> (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.)
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<b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>If the plan is a defined benefit plan, go to line 8.</b>			
<b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____ <b>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</b>			
<b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....	6a		
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....	6b		
<b>c</b> 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		
<b>If you completed line 6c, skip lines 8 and 9.</b>			
<b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>8</b> 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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

<b>Part III</b>	<b>Amendments</b>
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<b>9</b> 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. ....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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<b>Part IV</b>	<b>ESOPs</b> (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.
----------------	---

<b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>11 a</b> Does the ESOP hold any preferred stock? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>b</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.) .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

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

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

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

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

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

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

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

**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:

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year .....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year .....	<b>15b</b>	

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

<b>a</b> Enter the number of employers who withdrew during the preceding plan year .....	<b>16a</b>	
<b>b</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 .....	<b>16b</b>	

**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 \_\_\_\_\_.

COASTAL AGROBUSINESS, INC.  
EMPLOYEE PROFIT-SHARING PLAN

PN 001

EIN #56-0586507

FORM 5500

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Year Ended September 30, 2024

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## INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of  
The Coastal Agrobusiness Inc  
Employee Profit-Sharing Plan

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

We have performed audits of the accompanying financial statements of the Coastal Agrobusiness Employee Profit-Sharing 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 September 30, 2024 and 2023 and the related statement of changes in net assets available for benefits for the year ended September 30, 2024, and the related notes to the financial statements.

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

Management has obtained a certification from a qualified institution as of and for the year ended September 30, 2024 and 2023, stating that the certified investment information, as described in Note C to the financial statements, is complete and accurate.

### Opinion

In our opinion, based on our audit 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 financial statements referred to above, 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.
- the information in the financial statements referred to above 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 audit in accordance with the auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Coastal Agrobusiness Employee Profit-Sharing Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

### Responsibility of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. 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 Coastal Agrobusiness Employee Profit-Sharing Plan's ability to continue as a going concern for one year after the date of the financial statements are available to be issued.

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

## Auditor's Responsibility 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 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 generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

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

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 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 accounting principles generally accepted in the United States of America.

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 accounting principles generally accepted in the United States of America.

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

## Other Matters - Supplemental Schedules Required by ERISA

The supplemental schedules of Schedule H, line 4i-Schedule of Assets (Held at End of Year), Schedule H, line 4j-Schedule of Assets Acquired and Disposed of within year, and Schedule H, line 4j-Schedule of Reportable Transactions are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investments information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agrees 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulation for Reporting and Disclosure under ERISA.

In our opinion—

- The form and content of the supplemental schedules, 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 Department of Labor'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 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).



Sullivan, Shearin & Company  
Greenville, North Carolina  
June 24, 2025

COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN  
STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS  
SEPTEMBER 30, 2024 AND 2023

	2024	2023
ASSETS		
Investments (at fair value):		
Cash	\$ 745,558	\$ 618,164
Mutual Funds	24,242,440	19,979,184
	\$ 24,987,998	\$ 20,597,348
Employer contribution receivable	\$ 1,620,873	\$ 1,160,272
Accrued investment earnings	34,796	39,890
	\$ 1,655,669	\$ 1,200,162
TOTAL ASSETS	\$ 26,643,667	\$ 21,797,510
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	\$ 26,643,667	\$ 21,797,510

The accompanying notes are an integral part of these financial statements

COASTAL AGROBUSINESS, INC. EMPLOYEE PROFIT-SHARING PLAN  
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
YEAR ENDED SEPTEMBER 30, 2024 AND 2023

ADDITIONS TO NET ASSETS ATTRIBUTED TO:	2024	2023
Investment Income:		
Interest and dividends	\$ 574,317	\$ 576,188
Net realized appreciation in fair value of investments	2,150,565	-
Net unrealized appreciation in fair value of investments	<u>2,429,203</u>	<u>1,782,592</u>
	<u>\$ 5,154,085</u>	<u>\$ 2,358,780</u>
Contributions:		
Employer	<u>\$ 1,620,873</u>	<u>\$ 1,160,272</u>
	<u>\$ 1,620,873</u>	<u>\$ 1,160,272</u>
 TOTAL ADDITIONS	 <u>\$ 6,774,958</u>	 <u>\$ 3,519,052</u>
 DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants	\$ 1,869,195	\$ 883,081
Net realized depreciation in fair value of investments	\$ -	\$ 155,429
Investment Fees	<u>59,606</u>	<u>50,867</u>
 TOTAL DEDUCTIONS	 <u>\$ 1,928,801</u>	 <u>\$ 1,089,377</u>
 NET INCREASE (DECREASE)	 \$ 4,846,157	 \$ 2,429,675
 NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	\$ 21,797,510	\$ 19,367,835
End of year	<u>\$ 26,643,667</u>	<u>\$ 21,797,510</u>

The accompanying notes are an integral part of these financial statements

COASTAL AGROBUSINESS, INC. EMPLOYEE  
PROFIT-SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

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NOTE A - DESCRIPTION OF PLAN

The following description of the Coastal Agrobusiness, Inc. Employee Profit-Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

*General.* The Plan is a defined contribution plan covering all employees of the company who have one year of service. It is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

*Contributions.* Each year, the Company's board of directors will determine the amount, if any, it will contribute to the plan. Participant contributions are not allowed.

*Participant Accounts.* Each participant's account is credited with the allocation of (a) the Company's contribution, (b) Plan earnings, and (c) forfeitures of terminated participants' nonvested accounts and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

*Vesting.* Vesting in the Company contributions portion of their accounts plus earnings thereon is based on years of continuous service. A participant is 100% vested after six years of credited service.

*Payment of Benefits.* On termination of service due to death, disability or retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount. For termination of service due to other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

*Forfeited Accounts.* At September 30, 2024 and 2023, forfeited nonvested accounts totaled \$14,283 and \$26,004 respectively. Forfeitures will be allocated as additional Company contributions.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

*Date of Management's Review*

Subsequent events were evaluated through June 24, 2025, which is the date the financial statements were available to be issued.

*Estimates*

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

*Basis of Accounting*

The financial statements of the Plan are prepared under the accrual method of accounting.

*Investment Valuation and Income Recognition*

The Plan's investments are stated at fair value. See Note E for discussion of fair value measurements.

All investment transactions are recorded on a settlement-date basis.

*Payment of Benefits*

Benefits are recorded when paid.

*Operating Expenses*

All expenses of maintaining the Plan are paid by the Company.

NOTE C - INFORMATION PROVIDED BY TRUSTEE

The corporate trustee provides the plan with statements that report all transactions that occurred during the year and all assets held at the end of the period. The plan administrator has obtained certification from the trustee that the information in such statements is complete and accurate, and covers investment assets, income and transactions as well as the schedule of investments and reportable transactions

NOTE D - INVESTMENTS

The Plan's investments are held in a bank administered trust fund. The trustee directs all investments. No participant direction is allowed.

During the plan years ended September 30, 2024 and 2023, the Plan's investments (including investments bought, sold, and held during the year) appreciated/(depreciated) in value as follows:

Investments at Fair Value:	<u>2024</u>	<u>2023</u>
Mutual funds	<u>\$ 4,579,768</u>	<u>\$ 1,627,163</u>
Net change in fair value	<u>\$ 4,579,768</u>	<u>\$ 1,627,163</u>

## NOTE E – FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board (FASB) *Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the plan has the ability to access.
- Level 2 Inputs to valuation methodology include
- quoted prices for similar assets or liabilities in active markets;
  - quoted prices for identical or similar assets or liabilities in inactive markets;
  - inputs other than quoted prices that are observable for the asset or liability;
  - inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

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 September 30, 2024 and 2023.

Mutual Funds: Valued at the net asset value (NAV) of shares held by the plan at year end.

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

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of September 30, 2024 and 2023.

***Assets at Fair Value as of September 30, 2024***

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual Funds	\$ 24,242,440			24,242,440
Cash	745,558			745,558
Total assets at fair value	<u>\$ 24,987,998</u>	<u>-</u>	<u>-</u>	<u>24,987,998</u>

***Assets at Fair Value as of September 30, 2023***

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual Funds	\$ 19,979,184			19,979,184
Cash	\$ 618,164			618,164
Total assets at fair value	<u>20,597,348</u>	<u>-</u>	<u>-</u>	<u>20,597,348</u>

#### NOTE F - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Company may determine.

#### NOTE G - TAX STATUS

The Internal Revenue Service has determined that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code. The plan has been amended since receiving the determination letter. However, the Plan administrator believes that the plan is designed and is currently being operated in compliance with the applicable provisions of the Internal Revenue Code.

The plan adopted the provisions of Accounting for uncertainty in Income Taxes on January 1, 2009, which clarifies the accounting for uncertainty in income taxes recognized in an enterprise's financial statements and prescribes a threshold of more-likely-than-not for recognition of tax benefits of uncertain tax positions taken or expected to be taken in a tax return. The adoption of the standard did not have an impact on the plan financial statements.

The plan administrator believes that the Plan is no longer subject to income tax examination for Plan years prior to September 30, 2021.

#### NOTE H - RECONCILIATION OF FINANCIAL STATEMENT TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at September 30, 2024 and 2023 to Form 5500:

	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	\$ 26,643,667	\$ 21,797,510
Net assets available for benefits per Form 5500	<u>\$ 26,643,667</u>	<u>\$ 21,797,510</u>

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended September 30, 2024 and 2023, to Form 5500:

Benefits paid to participants per the financial statements	\$ 1,869,195	\$ 883,081
Benefits paid to participants per Form 5500	<u>\$ 1,869,195</u>	<u>\$ 883,081</u>

#### NOTE I - RISKS AND UNCERTAINTIES

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

SUPPLEMENTAL SCHEDULES

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

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

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	JP MORGAN US GOVERNMENT FUND	745557.92 SH	745,557.92	745,557.92
	<b>TOTAL INTEREST-BEARING CASH</b>		<b>745,557.92</b>	<b>745,557.92</b>
	AB LARGE CAP GROWTH FUND CLASS Z #2978	11171.506 SH	875,437.03	1,250,426.67
	BLACKROCK HIGH YIELD PORTFOLIO CLASS K	172170.406 SH	1,213,245.81	1,246,513.74
	COLUMBIA SMALL CAP VALUE FUND II	46136.748 SH	750,577.50	752,490.36
	DODGE & COX STOCK FUND CL X	5478.269 SH	1,340,084.13	1,502,689.19
	FIDELITY SMALL CAP GROWTH FUND CLASS 1 #1388	22332.684 SH	608,011.59	749,261.55
	FIDELITY TOTAL BOND K6 FUND	631482.837 SH	5,523,817.91	5,721,234.50
	FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	85772.477 SH	1,312,588.39	1,495,872.00
	FIDELITY INFLATION PROTECTED BOND INDEX FUND	132744.399 SH	1,201,571.14	1,245,142.46
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6	74096.814 SH	1,340,307.32	1,513,056.94
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND	40762.981 SH	1,120,833.52	1,255,907.44
	PUTNAM LARGE CAP VALUE FUND CL R6	40327.922 SH	1,247,715.81	1,503,021.65
	LORD ABBETT SHORT DURATION INCOME FUND	255675.925 SH	984,646.99	997,136.11
	PRINCIPAL INVESTORS FD INC - REAL ESTATE SECURITIES FUND - IS #4934	23901.076 SH	603,065.74	739,499.29
	VANGUARD INSTITUTIONAL INDEX FUND #94	5829.269 SH	1,727,847.00	2,763,947.90
	VANGUARD GROWTH INDEX FUND ADMIRAL #509	1268.614 SH	172,359.97	250,817.67
	FEDERATED HERMES MDT MID CAP GROWTH FUND	25211.098 SH	1,054,138.64	1,255,008.46
	JP MORGAN EMERGING MARKETS EQUITY FUND R6 #1261	12.628 SH	467.10	414.32
	<b>TOTAL MUTUAL FUNDS</b>		<b>21,076,715.59</b>	<b>24,242,440.25</b>

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

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

(a) Identity of issue, borrower, lessor, or similar party	(b) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(c) Cost of acquisitions	(d) Proceeds of dispositions
COLUMBIA DIVIDEND INCOME FUND INTL #6271	1237.486 SH	37,966.06	38,436.32
DODGE AND COX STOCK FUND CLASS I	268.966 SH	65,708.39	69,242.48
DODGE AND COX STOCK FUND CLASS I	99.683 SH	24,352.55	25,634.60
DODGE AND COX STOCK FUND CLASS I	69.714 SH	17,031.13	19,024.26
DODGE AND COX STOCK FUND CL I	90.962 SH	21,910.80	22,221.11
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1904.285 SH	79,484.86	87,977.98
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	695.286 SH	29,021.24	32,699.30
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	765.069 SH	31,933.98	38,023.95
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	4339.131 SH	66,388.70	71,639.05
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1988.54 SH	30,424.66	33,049.54
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1071.097 SH	16,387.78	18,754.91
HARTFORD INTERNATIONAL VALUE FUND CLASS R6	3396.506 SH	61,442.79	64,261.90
HARTFORD INTERNATIONAL VALUE FUND CLASS R6	2418.358 SH	43,748.10	49,044.30
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	1075.594 SH	29,568.08	31,073.91
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	1265.133 SH	34,778.51	37,587.11
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	861.115 SH	23,672.05	26,367.35
MFS MID CAP VALUE R6	528.88 SH	15,591.39	16,358.26
PUTNAM LARGE CAP VALUE FUND CL R6	961.929 SH	29,762.08	31,647.47
PUTNAM LARGE CAP VALUE FUND CL R6	2225.901 SH	68,869.38	76,815.84
PUTNAM LARGE CAP VALUE FUND CL R6	1205.127 SH	37,286.63	42,203.56
PUTNAM LARGE CAP VALUE FUND CL R6	573.295 SH	17,737.75	21,229.12
BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K	3122.555 SH	22,014.01	22,045.24
FEDERATED HERMES INSTITUTIONAL HIGH YIELD BOND FUND	1555.668 SH	13,088.39	13,752.11
FIDELITY INFLATION PROTECTED BOND INDEX FUND INSTL	1718.694 SH	15,571.37	15,536.99
FIDELITY INFLATION PROTECTED BOND INDEX FUND INSTL	1397.8 SH	12,664.07	12,789.87
LORD ABBETT SHORT DURATION INCOME FUND CLASS R6	2598.592 SH	10,004.58	10,004.58
VANGUARD INFLATION PROTECTED SECURITIES FUND IV	2131.762 SH	24,799.77	25,026.89

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	BLACKROCK MID-CAP GROWTH EQUITY PORTFOLIO 30971.716 SH	1,116,398.74	1,200,463.71			1,116,398.74	1,200,463.71	84,064.97
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 131542.406 SH	927,373.96				927,373.96	927,373.96	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1643.311 SH	11,536.04				11,536.04	11,536.04	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 39360.474 SH	276,704.13				276,704.13	276,704.13	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 3122.555 SH	22,014.01	22,045.24			22,014.01	22,045.24	31.23
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1123.462 SH	7,909.17				7,909.17	7,909.17	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1623.308 SH	11,736.52				11,736.52	11,736.52	
	COLUMBIA DIVIDEND INCOME FUND INSTL 1237.486 SH	37,966.06				37,966.06	37,966.06	
	COLUMBIA DIVIDEND INCOME FUND INSTL 42732.263 SH	1,126,315.09	1,327,264.09			1,126,315.09	1,327,264.09	200,949.00
	DFA INTERNATIONAL CORE EQUITY 87081.196 SH	1,149,321.54	1,332,342.30			1,149,321.54	1,332,342.30	183,020.76
	DODGE AND COX STOCK FUND CLASS I 5694.069 SH	1,391,060.94				1,391,060.94	1,391,060.94	
	DODGE AND COX STOCK FUND CLASS I 20.306 SH	4,970.03				4,970.03	4,970.03	
	DODGE AND COX STOCK FUND CLASS I 83.23 SH	20,893.33				20,893.33	20,893.33	
	DODGE AND COX STOCK FUND CLASS I 119.027 SH	30,251.90				30,251.90	30,251.90	
	DODGE AND COX STOCK FUND CLASS I 268.966 SH	65,708.39	69,242.48			65,708.39	69,242.48	3,534.09
	DODGE AND COX STOCK FUND CLASS I 99.683 SH	24,352.55	25,634.60			24,352.55	25,634.60	1,282.05
	DODGE AND COX STOCK FUND CLASS I 69.714 SH	17,031.13	19,024.26			17,031.13	19,024.26	1,993.13
	DODGE AND COX STOCK FUND CL I 89.744 SH	21,617.50				21,617.50	21,617.50	
	DODGE AND COX STOCK FUND CL I 1.218 SH	293.30				293.30	293.30	
	DODGE AND COX STOCK FUND CL I							

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	5522.494 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1,282,682.12	1,349,090.06			1,282,682.12	1,349,090.06	66,407.94
	27772.339 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1,159,217.45				1,159,217.45	1,159,217.45	
	389.001 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	16,174.66				16,174.66	16,174.66	
	1904.285 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	79,484.86	87,977.98			79,484.86	87,977.98	8,493.12
	695.286 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	29,021.24	32,699.30			29,021.24	32,699.30	3,678.06
	414.398 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	19,186.61				19,186.61	19,186.61	
	765.069 SH FIDELITY TOTAL BOND K6 FUND	31,933.98	38,023.95			31,933.98	38,023.95	6,089.97
	25262.513 SH FIDELITY TOTAL BOND K6 FUND	225,341.62				225,341.62	225,341.62	
	9417.623 SH FIDELITY TOTAL BOND K6 FUND	83,440.14				83,440.14	83,440.14	
	160667.645 SH FIDELITY TOTAL BOND K6 FUND	1,405,841.89				1,405,841.89	1,405,841.89	
	9037.693 SH FIDELITY TOTAL BOND K6 FUND	79,350.94	79,441.32			79,350.94	79,441.32	90.38
	1633.3 SH FIDELITY TOTAL BOND K6 FUND	14,340.37				14,340.37	14,340.37	
	2439.873 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	22,178.45				22,178.45	22,178.45	
	90919.016 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1,391,060.94				1,391,060.94	1,391,060.94	
	1825.087 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	27,595.32				27,595.32	27,595.32	
	4339.131 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	66,388.70	71,639.05			66,388.70	71,639.05	5,250.35
	1988.54 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	30,424.66	33,049.54			30,424.66	33,049.54	2,624.88
	427.142 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	7,133.27				7,133.27	7,133.27	
	1071.097 SH FIDELITY INFLATION PROTECTED BOND INDEX FUND	16,387.78	18,754.91			16,387.78	18,754.91	2,367.13
	102359.157 SH	927,373.96				927,373.96	927,373.96	

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1488.316 SH	13,439.49				13,439.49	13,439.49	
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 30632.867 SH	276,002.13				276,002.13	276,002.13	
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1718.694 SH	15,571.37	15,536.99			15,571.37	15,536.99	(34.38)
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1397.8 SH	12,664.07	12,789.87			12,664.07	12,789.87	125.80
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1380.553 SH	12,991.00				12,991.00	12,991.00	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 76896.68 SH	1,391,060.94				1,391,060.94	1,391,060.94	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 1256.789 SH	22,483.95				22,483.95	22,483.95	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 1698.445 SH	30,826.77				30,826.77	30,826.77	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 3396.506 SH	61,442.79	64,261.90			61,442.79	64,261.90	2,819.11
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 59.764 SH	1,126.55				1,126.55	1,126.55	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 2418.358 SH	43,748.10	49,044.30			43,748.10	49,044.30	5,296.20
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 42168.696 SH	1,159,217.45				1,159,217.45	1,159,217.45	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1042.075 SH	28,083.91				28,083.91	28,083.91	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1075.594 SH	29,568.08	31,073.91			29,568.08	31,073.91	1,505.83
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1265.133 SH	34,778.51	37,587.11			34,778.51	37,587.11	2,808.60
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 754.052 SH	21,550.80				21,550.80	21,550.80	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 861.115 SH	23,672.05	26,367.35			23,672.05	26,367.35	2,695.30
	JP MORGAN US GOVERNMENT #3164 2820756.79 SH	2,820,756.79				2,820,756.79	2,820,756.79	
	JP MORGAN US GOVERNMENT #3164 2693363.13 SH	2,693,363.13	2,693,363.13			2,693,363.13	2,693,363.13	
	MFS MID CAP VALUE R6							

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(I) Net gain or loss
	525.88 SH MFS MID CAP VALUE R6	15,591.39				15,591.39	15,591.39	
	36558.34 SH MORGAN STANLEY INSTITUTIONAL FUND INC INTERNATIONAL ADVANTAGE	964,890.78	1,130,749.46			964,890.78	1,130,749.46	165,858.68
	62509.108 SH PUTNAM LARGE CAP VALUE FUND CL R6	1,434,617.54	1,407,080.02			1,434,617.54	1,407,080.02	(27,537.52)
	44959.653 SH PUTNAM LARGE CAP VALUE FUND CL R6	1,391,060.94				1,391,060.94	1,391,060.94	
	334.221 SH PUTNAM LARGE CAP VALUE FUND CL R6	10,310.71				10,310.71	10,310.71	
	961.929 SH PUTNAM LARGE CAP VALUE FUND CL R6	29,762.08	31,647.47			29,762.08	31,647.47	1,885.39
	2225.901 SH PUTNAM LARGE CAP VALUE FUND CL R6	68,869.38	76,815.84			68,869.38	76,815.84	7,946.46
	1205.127 SH PUTNAM LARGE CAP VALUE FUND CL R6	37,286.63	42,203.56			37,286.63	42,203.56	4,916.93
	573.295 SH VANGUARD INSTITUTIONAL INDEX FD #94	17,737.75	21,229.12			17,737.75	21,229.12	3,491.37
	33.138 SH VANGUARD INSTITUTIONAL INDEX FD #94	13,069.24				13,069.24	13,069.24	
	93.904 SH VANGUARD INSTITUTIONAL INDEX FD #94	37,034.85				37,034.85	37,034.85	
	.107 SH VANGUARD INSTITUTIONAL INDEX FD #94	42.06				42.06	42.06	
	76.944 SH VANGUARD INSTITUTIONAL INDEX FD #94	30,360.61				30,360.61	30,360.61	
	48.193 SH VANGUARD INSTITUTIONAL INDEX FD #94	19,012.11				19,012.11	19,012.11	
	2005.791 SH VANGUARD INSTITUTIONAL INDEX FD #94	317,309.67	851,117.20			317,309.67	851,117.20	533,807.53
	20.608 SH VANGUARD INSTITUTIONAL INDEX FD #94	8,874.69				8,874.69	8,874.69	
	16.193 SH VANGUARD INSTITUTIONAL INDEX FD #94	6,973.32				6,973.32	6,973.32	
	1.094 SH VANGUARD INSTITUTIONAL INDEX FD #94	471.25				471.25	471.25	
	162.32 SH VANGUARD INSTITUTIONAL INDEX FD #94	25,678.50	70,101.01			25,678.50	70,101.01	44,422.51
	273.565 SH	43,277.10	123,517.25			43,277.10	123,517.25	80,240.15

COASTAL AGROBUSINESS, INC.  
 FORM 5500  
 PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	VANGUARD INSTITUTIONAL INDEX FD #94 20.986 SH	9,427.70				9,427.70	9,427.70	
	VANGUARD INSTITUTIONAL INDEX FD #94 84.289 SH	13,334.25	39,878.17			13,334.25	39,878.17	26,543.92
	VANGUARD INSTITUTIONAL INDEX FD #94 18.25 SH	8,616.00				8,616.00	8,616.00	
	VANGUARD GROWTH INDEX FUND 139.46 SH	7,800.38	22,400.12			7,800.38	22,400.12	14,599.74
	VANGUARD GROWTH INDEX FUND 53.71 SH	8,635.43				8,635.43	8,635.43	
	VANGUARD GROWTH INDEX FUND 5925.707 SH	534,575.05	1,043,161.50			534,575.05	1,043,161.50	508,586.45
	VANGUARD GROWTH INDEX FUND 6.469 SH	1,148.45				1,148.45	1,148.45	
	VANGUARD GROWTH INDEX FUND 88.912 SH	11,936.44	17,155.66			11,936.44	17,155.66	5,219.22
	VANGUARD GROWTH INDEX FUND 5.453 SH	1,075.73				1,075.73	1,075.73	

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

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

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	JP MORGAN US GOVERNMENT FUND	745557.92 SH	745,557.92	745,557.92
	<b>TOTAL INTEREST-BEARING CASH</b>		<b>745,557.92</b>	<b>745,557.92</b>
	AB LARGE CAP GROWTH FUND CLASS Z #2978	11171.506 SH	875,437.03	1,250,426.67
	BLACKROCK HIGH YIELD PORTFOLIO CLASS K	172170.406 SH	1,213,245.81	1,246,513.74
	COLUMBIA SMALL CAP VALUE FUND II	46136.748 SH	750,577.50	752,490.36
	DODGE & COX STOCK FUND CL X	5478.269 SH	1,340,084.13	1,502,689.19
	FIDELITY SMALL CAP GROWTH FUND CLASS 1 #1388	22332.684 SH	608,011.59	749,261.55
	FIDELITY TOTAL BOND K6 FUND	631482.837 SH	5,523,817.91	5,721,234.50
	FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	85772.477 SH	1,312,588.39	1,495,872.00
	FIDELITY INFLATION PROTECTED BOND INDEX FUND	132744.399 SH	1,201,571.14	1,245,142.46
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6	74096.814 SH	1,340,307.32	1,513,056.94
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND	40762.981 SH	1,120,833.52	1,255,907.44
	PUTNAM LARGE CAP VALUE FUND CL R6	40327.922 SH	1,247,715.81	1,503,021.65
	LORD ABBETT SHORT DURATION INCOME FUND	255675.925 SH	984,646.99	997,136.11
	PRINCIPAL INVESTORS FD INC - REAL ESTATE SECURITIES FUND - IS #4934	23901.076 SH	603,065.74	739,499.29
	VANGUARD INSTITUTIONAL INDEX FUND #94	5829.269 SH	1,727,847.00	2,763,947.90
	VANGUARD GROWTH INDEX FUND ADMIRAL #509	1268.614 SH	172,359.97	250,817.67
	FEDERATED HERMES MDT MID CAP GROWTH FUND	25211.098 SH	1,054,138.64	1,255,008.46
	JP MORGAN EMERGING MARKETS EQUITY FUND R6 #1261	12.628 SH	467.10	414.32
	<b>TOTAL MUTUAL FUNDS</b>		<b>21,076,715.59</b>	<b>24,242,440.25</b>

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	BLACKROCK MID-CAP GROWTH EQUITY PORTFOLIO 30971.716 SH	1,116,398.74	1,200,463.71			1,116,398.74	1,200,463.71	84,064.97
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 131542.406 SH	927,373.96				927,373.96	927,373.96	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1643.311 SH	11,536.04				11,536.04	11,536.04	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 39360.474 SH	276,704.13				276,704.13	276,704.13	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 3122.555 SH	22,014.01	22,045.24			22,014.01	22,045.24	31.23
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1123.462 SH	7,909.17				7,909.17	7,909.17	
	BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K 1623.308 SH	11,736.52				11,736.52	11,736.52	
	COLUMBIA DIVIDEND INCOME FUND INSTL 1237.486 SH	37,966.06				37,966.06	37,966.06	
	COLUMBIA DIVIDEND INCOME FUND INSTL 42732.263 SH	1,126,315.09	1,327,264.09			1,126,315.09	1,327,264.09	200,949.00
	DFA INTERNATIONAL CORE EQUITY 87081.196 SH	1,149,321.54	1,332,342.30			1,149,321.54	1,332,342.30	183,020.76
	DODGE AND COX STOCK FUND CLASS I 5694.069 SH	1,391,060.94				1,391,060.94	1,391,060.94	
	DODGE AND COX STOCK FUND CLASS I 20.306 SH	4,970.03				4,970.03	4,970.03	
	DODGE AND COX STOCK FUND CLASS I 83.23 SH	20,893.33				20,893.33	20,893.33	
	DODGE AND COX STOCK FUND CLASS I 119.027 SH	30,251.90				30,251.90	30,251.90	
	DODGE AND COX STOCK FUND CLASS I 268.966 SH	65,708.39	69,242.48			65,708.39	69,242.48	3,534.09
	DODGE AND COX STOCK FUND CLASS I 99.683 SH	24,352.55	25,634.60			24,352.55	25,634.60	1,282.05
	DODGE AND COX STOCK FUND CLASS I 69.714 SH	17,031.13	19,024.26			17,031.13	19,024.26	1,993.13
	DODGE AND COX STOCK FUND CL I 89.744 SH	21,617.50				21,617.50	21,617.50	
	DODGE AND COX STOCK FUND CL I 1.218 SH	293.30				293.30	293.30	
	DODGE AND COX STOCK FUND CL I							

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	5522.494 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1,282,682.12	1,349,090.06			1,282,682.12	1,349,090.06	66,407.94
	27772.339 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1,159,217.45				1,159,217.45	1,159,217.45	
	389.001 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	16,174.66				16,174.66	16,174.66	
	1904.285 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	79,484.86	87,977.98			79,484.86	87,977.98	8,493.12
	695.286 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	29,021.24	32,699.30			29,021.24	32,699.30	3,678.06
	414.398 SH FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	19,186.61				19,186.61	19,186.61	
	765.069 SH FIDELITY TOTAL BOND K6 FUND	31,933.98	38,023.95			31,933.98	38,023.95	6,089.97
	25262.513 SH FIDELITY TOTAL BOND K6 FUND	225,341.62				225,341.62	225,341.62	
	9417.623 SH FIDELITY TOTAL BOND K6 FUND	83,440.14				83,440.14	83,440.14	
	160667.645 SH FIDELITY TOTAL BOND K6 FUND	1,405,841.89				1,405,841.89	1,405,841.89	
	9037.693 SH FIDELITY TOTAL BOND K6 FUND	79,350.94	79,441.32			79,350.94	79,441.32	90.38
	1633.3 SH FIDELITY TOTAL BOND K6 FUND	14,340.37				14,340.37	14,340.37	
	2439.873 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	22,178.45				22,178.45	22,178.45	
	90919.016 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1,391,060.94				1,391,060.94	1,391,060.94	
	1825.087 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	27,595.32				27,595.32	27,595.32	
	4339.131 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	66,388.70	71,639.05			66,388.70	71,639.05	5,250.35
	1988.54 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	30,424.66	33,049.54			30,424.66	33,049.54	2,624.88
	427.142 SH FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	7,133.27				7,133.27	7,133.27	
	1071.097 SH FIDELITY INFLATION PROTECTED BOND INDEX FUND	16,387.78	18,754.91			16,387.78	18,754.91	2,367.13
	102359.157 SH	927,373.96				927,373.96	927,373.96	

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1488.316 SH	13,439.49				13,439.49	13,439.49	
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 30632.867 SH	276,002.13				276,002.13	276,002.13	
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1718.694 SH	15,571.37	15,536.99			15,571.37	15,536.99	(34.38)
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1397.8 SH	12,664.07	12,789.87			12,664.07	12,789.87	125.80
	FIDELITY INFLATION PROTECTED BOND INDEX FUND 1380.553 SH	12,991.00				12,991.00	12,991.00	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 76896.68 SH	1,391,060.94				1,391,060.94	1,391,060.94	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 1256.789 SH	22,483.95				22,483.95	22,483.95	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 1698.445 SH	30,826.77				30,826.77	30,826.77	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 3396.506 SH	61,442.79	64,261.90			61,442.79	64,261.90	2,819.11
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 59.764 SH	1,126.55				1,126.55	1,126.55	
	HARTFORD INTERNATIONAL VALUE FUND CLASS R6 2418.358 SH	43,748.10	49,044.30			43,748.10	49,044.30	5,296.20
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 42168.696 SH	1,159,217.45				1,159,217.45	1,159,217.45	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1042.075 SH	28,083.91				28,083.91	28,083.91	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1075.594 SH	29,568.08	31,073.91			29,568.08	31,073.91	1,505.83
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 1265.133 SH	34,778.51	37,587.11			34,778.51	37,587.11	2,808.60
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 754.052 SH	21,550.80				21,550.80	21,550.80	
	JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6 861.115 SH	23,672.05	26,367.35			23,672.05	26,367.35	2,695.30
	JP MORGAN US GOVERNMENT #3164 2820756.79 SH	2,820,756.79				2,820,756.79	2,820,756.79	
	JP MORGAN US GOVERNMENT #3164 2693363.13 SH	2,693,363.13	2,693,363.13			2,693,363.13	2,693,363.13	
	MFS MID CAP VALUE R6							

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(I) Net gain or loss
	525.88 SH MFS MID CAP VALUE R6	15,591.39				15,591.39	15,591.39	
	36558.34 SH MORGAN STANLEY INSTITUTIONAL FUND INC INTERNATIONAL ADVANTAGE	964,890.78	1,130,749.46			964,890.78	1,130,749.46	165,858.68
	62509.108 SH PUTNAM LARGE CAP VALUE FUND CL R6	1,434,617.54	1,407,080.02			1,434,617.54	1,407,080.02	(27,537.52)
	44959.653 SH PUTNAM LARGE CAP VALUE FUND CL R6	1,391,060.94				1,391,060.94	1,391,060.94	
	334.221 SH PUTNAM LARGE CAP VALUE FUND CL R6	10,310.71				10,310.71	10,310.71	
	961.929 SH PUTNAM LARGE CAP VALUE FUND CL R6	29,762.08	31,647.47			29,762.08	31,647.47	1,885.39
	2225.901 SH PUTNAM LARGE CAP VALUE FUND CL R6	68,869.38	76,815.84			68,869.38	76,815.84	7,946.46
	1205.127 SH PUTNAM LARGE CAP VALUE FUND CL R6	37,286.63	42,203.56			37,286.63	42,203.56	4,916.93
	573.295 SH VANGUARD INSTITUTIONAL INDEX FD #94	17,737.75	21,229.12			17,737.75	21,229.12	3,491.37
	33.138 SH VANGUARD INSTITUTIONAL INDEX FD #94	13,069.24				13,069.24	13,069.24	
	93.904 SH VANGUARD INSTITUTIONAL INDEX FD #94	37,034.85				37,034.85	37,034.85	
	.107 SH VANGUARD INSTITUTIONAL INDEX FD #94	42.06				42.06	42.06	
	76.944 SH VANGUARD INSTITUTIONAL INDEX FD #94	30,360.61				30,360.61	30,360.61	
	48.193 SH VANGUARD INSTITUTIONAL INDEX FD #94	19,012.11				19,012.11	19,012.11	
	2005.791 SH VANGUARD INSTITUTIONAL INDEX FD #94	317,309.67	851,117.20			317,309.67	851,117.20	533,807.53
	20.608 SH VANGUARD INSTITUTIONAL INDEX FD #94	8,874.69				8,874.69	8,874.69	
	16.193 SH VANGUARD INSTITUTIONAL INDEX FD #94	6,973.32				6,973.32	6,973.32	
	1.094 SH VANGUARD INSTITUTIONAL INDEX FD #94	471.25				471.25	471.25	
	162.32 SH VANGUARD INSTITUTIONAL INDEX FD #94	25,678.50	70,101.01			25,678.50	70,101.01	44,422.51
	273.565 SH	43,277.10	123,517.25			43,277.10	123,517.25	80,240.15

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

\*

Schedule H, line 4j - Schedule of Reportable Transactions

(a)	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transactions	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or loss
	VANGUARD INSTITUTIONAL INDEX FD #94 20.986 SH	9,427.70				9,427.70	9,427.70	
	VANGUARD INSTITUTIONAL INDEX FD #94 84.289 SH	13,334.25	39,878.17			13,334.25	39,878.17	26,543.92
	VANGUARD INSTITUTIONAL INDEX FD #94 18.25 SH	8,616.00				8,616.00	8,616.00	
	VANGUARD GROWTH INDEX FUND 139.46 SH	7,800.38	22,400.12			7,800.38	22,400.12	14,599.74
	VANGUARD GROWTH INDEX FUND 53.71 SH	8,635.43				8,635.43	8,635.43	
	VANGUARD GROWTH INDEX FUND 5925.707 SH	534,575.05	1,043,161.50			534,575.05	1,043,161.50	508,586.45
	VANGUARD GROWTH INDEX FUND 6.469 SH	1,148.45				1,148.45	1,148.45	
	VANGUARD GROWTH INDEX FUND 88.912 SH	11,936.44	17,155.66			11,936.44	17,155.66	5,219.22
	VANGUARD GROWTH INDEX FUND 5.453 SH	1,075.73				1,075.73	1,075.73	

COASTAL AGROBUSINESS, INC.  
FORM 5500  
PLAN YEAR ENDING 9-30-2024

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

(a) Identity of issue, borrower, lessor, or similar party	(b) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(c) Cost of acquisitions	(d) Proceeds of dispositions
COLUMBIA DIVIDEND INCOME FUND INTL #6271	1237.486 SH	37,966.06	38,436.32
DODGE AND COX STOCK FUND CLASS I	268.966 SH	65,708.39	69,242.48
DODGE AND COX STOCK FUND CLASS I	99.683 SH	24,352.55	25,634.60
DODGE AND COX STOCK FUND CLASS I	69.714 SH	17,031.13	19,024.26
DODGE AND COX STOCK FUND CL I	90.962 SH	21,910.80	22,221.11
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	1904.285 SH	79,484.86	87,977.98
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	695.286 SH	29,021.24	32,699.30
FEDERATED HERMES MDT MID CAP GROWTH FUND CLASS R6	765.069 SH	31,933.98	38,023.95
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	4339.131 SH	66,388.70	71,639.05
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1988.54 SH	30,424.66	33,049.54
FIDELITY INTERNATIONAL CAPITAL APPRECIATION K6 FUND	1071.097 SH	16,387.78	18,754.91
HARTFORD INTERNATIONAL VALUE FUND CLASS R6	3396.506 SH	61,442.79	64,261.90
HARTFORD INTERNATIONAL VALUE FUND CLASS R6	2418.358 SH	43,748.10	49,044.30
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	1075.594 SH	29,568.08	31,073.91
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	1265.133 SH	34,778.51	37,587.11
JOHN HANCOCK FUNDS III DISCIPLINED VALUE MID CAP FUND R6	861.115 SH	23,672.05	26,367.35
MFS MID CAP VALUE R6	528.88 SH	15,591.39	16,358.26
PUTNAM LARGE CAP VALUE FUND CL R6	961.929 SH	29,762.08	31,647.47
PUTNAM LARGE CAP VALUE FUND CL R6	2225.901 SH	68,869.38	76,815.84
PUTNAM LARGE CAP VALUE FUND CL R6	1205.127 SH	37,286.63	42,203.56
PUTNAM LARGE CAP VALUE FUND CL R6	573.295 SH	17,737.75	21,229.12
BLACKROCK HIGH YIELD BOND PORTFOLIO CLASS K	3122.555 SH	22,014.01	22,045.24
FEDERATED HERMES INSTITUTIONAL HIGH YIELD BOND FUND	1555.668 SH	13,088.39	13,752.11
FIDELITY INFLATION PROTECTED BOND INDEX FUND INSTL	1718.694 SH	15,571.37	15,536.99
FIDELITY INFLATION PROTECTED BOND INDEX FUND INSTL	1397.8 SH	12,664.07	12,789.87
LORD ABBETT SHORT DURATION INCOME FUND CLASS R6	2598.592 SH	10,004.58	10,004.58
VANGUARD INFLATION PROTECTED SECURITIES FUND IV	2131.762 SH	24,799.77	25,026.89