

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

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 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

- 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... D Check box if filing under: [X] Form 5558 [ ] automatic extension... E If this is a retroactively adopted plan...

Part II Basic Plan Information—enter all requested information

1a Name of plan: COMPORIUM INC RETIREE MEDICAL PLAN
1b Three-digit plan number (PN): 503
1c Effective date of plan: 12/31/1993
2a Plan sponsor's name (employer, if for a single-employer plan): COMPORIUM, INC.
2b Employer Identification Number (EIN): 57-0236160
2c Plan Sponsor's telephone number: 803-326-7280
2d Business code (see instructions): 517000

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 of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

Form 5500 (2024) v. 240311

<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>	223
<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>	207
	<b>6a(2)</b>	218
	<b>6b</b>	0
	<b>6c</b>	10
	<b>6d</b>	228
	<b>6e</b>	
	<b>6f</b>	228
	<b>6g(1)</b>	
<b>6g(2)</b>		
<b>6h</b>		
<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:

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:  
4A

<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 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 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

**11c** Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 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>	OMB No. 1210-0110  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>COMPORIUM INC RETIREE MEDICAL PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>503</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>COMPORIUM, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>57-0236160</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
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**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	11841	42232
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>		
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>	750	500
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	217173	134675
<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>	7150441	7644771
<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>	45061	30037

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(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>	7425266	7852215
<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>	7425266	7852215

**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>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>		
<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>		
(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>		
<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>	1789	
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		1789
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>	260446	
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>		
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		260446
<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>	519580	
<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>		
<b>c</b> Other income .....	<b>2c</b>		61012
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		842827

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	382488	
(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>		382488
<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>	13859	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	19497	
(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>	34	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		33390
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		415878

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		426949
<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: **BAUKNIGHT PIETRAS & STORMER, P.A.**

(2) EIN: **57-0940019**

**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.)			
<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 \_\_\_\_\_.

The information in this electronic document is confidential and may be legally privileged. It is intended solely for the specified recipients. Access to this document by anyone else is unauthorized.

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Financial Statements  
and Supplemental Schedules

Comporium, Inc.  
Retiree Medical Plan

*Years Ended December 31, 2024 and 2023  
with Report of Independent Auditors*

Comporium, Inc. Retiree Medical Plan  
Financial Statements  
and Supplemental Schedules  
Years Ended December 31, 2024 and 2023

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## Report of Independent Auditors

Administrative Committee  
Comporium, Inc. Retiree Medical Plan

### Opinion

We have audited the financial statements of the Comporium, Inc. Retiree Medical Plan (the “Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (“ERISA”), which comprise the statements of net assets available for plan benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for plan benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States.

### Basis for Opinion

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

### Responsibilities of Management for the Financial Statements

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

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

Administrative Committee  
Comporium, Inc. Retiree Medical Plan

### **Responsibilities of Management for the Financial Statements (continued)**

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.

### **Auditors' Responsibilities for the Audit of the Financial Statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 auditing standards generally accepted in the United States 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 auditing standards generally accepted in the United States, we:

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



**BPS**

Tax / Assurance / Consulting

Administrative Committee  
Comporium, Inc. Retiree Medical Plan

### **Auditors' Responsibilities for the Audit of the Financial Statements (continued)**

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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.

### **Supplemental Schedules Required by ERISA**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, as listed in the table of contents, as of or for the year ended December 31, 2024, 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 2024 financial statements. The information has been subjected to the auditing procedures applied in the audit of the 2024 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2024 financial statements or to the 2024 financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States.

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

In our opinion, the information in the accompanying schedules are fairly stated, in all material respects, in relation to the 2024 financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

*BauKnight Pietras + Stormer, P.A.*

Columbia, South Carolina  
September 25, 2025

Comporium, Inc. Retiree Medical Plan  
Statements of Net Assets Available for Plan Benefits

	December 31,	
	2024	2023
<b>Assets</b>		
Cash	\$ 100,814	\$ 124,012
Investments, at fair value:		
Cash equivalent	76,093	105,000
Mutual funds and exchange-traded funds	7,644,771	7,150,444
Municipal bonds	30,037	45,061
Accrued investment income	500	750
Total assets	7,852,215	7,425,267
<b>Liabilities</b>		
Plan liabilities	--	--
Net assets available for plan benefits	\$ 7,852,215	\$ 7,425,267

*See accompanying notes.*

Comporium, Inc. Retiree Medical Plan  
Statements of Changes in Net Assets Available for Plan Benefits

	<b>Years Ended December 31,</b>	
	<b>2024</b>	<b>2023</b>
<b>Additions to net assets attributed to:</b>		
Investment income:		
Net appreciation in fair value of investments	\$ 519,580	\$ 730,509
Dividends and interest	262,235	235,636
Income tax benefit	61,012	--
Total additions	842,827	966,145
 <b>Deductions from net assets attributed to:</b>		
Benefits paid	382,488	376,623
Administrative expenses	33,391	31,921
Total deductions	415,879	408,544
 Net changes	426,948	557,601
 Net assets available for plan benefits, beginning	7,425,267	6,867,666
 Net assets available for plan benefits, ending	\$ 7,852,215	\$ 7,425,267

Comporium, Inc. Retiree Medical Plan  
Notes to Financial Statements  
December 31, 2024 and 2023

## **1. Description of Plan**

### **Organization**

Comporium, Inc. (the “Company” or “Sponsor”) sponsors a health and welfare retirement plan and trust (the “Plan”) for the purpose of reimbursing covered employees’ post-retirement Medicare Part B premiums. The Plan has been restated and amended periodically, as necessary, to comply with applicable requirements of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (“IRC”), and to help achieve the business objectives of the Sponsor. The Company funded the trust in years prior to 2023. The Company, at its sole discretion, may make additional contributions to the Plan at any time. Participants may also be required to contribute to the Plan. During the years ended December 31, 2024 and 2023, the Company made no contributions and there were no participant contributions.

Participants may refer to the Plan’s documents for more complete information.

### **Eligibility of Participants**

An employee becomes eligible to participate in the Plan when the individual either retires at a minimum of 65 years of age with at least 20 years of service with the Company, or the retiree is at least 65 years of age during the Plan year and satisfies the rule of 85, which states that the sum of the individual’s age at the time of retirement and number of years of service with the Company must equal or exceed 85. An employee may also become eligible under early retirement if they are at least 60 years of age at the time of retirement, approved by management, and in conjunction with the rule of 85 to participate in the Plan. Upon death of the participant, all benefits under the Plan cease. Neither spouse nor dependent coverage is offered under the Plan.

### **Distribution of Benefits**

Benefits under the Plan are payable for requested reimbursement of eligible Medicare Part B annual premiums.

### **Termination of the Plan**

The Company reserves the right to terminate the Plan at any time at the Company’s discretion. Upon termination of the Plan, all benefits will cease. Plan assets existing at the time of termination will be allocated first to expenses associated with administering the Plan followed by benefit expenses incurred but unpaid as of the date of termination and then to projected liabilities for post-retirement medical benefits payable to or on behalf of then-existing participants under the Plan, calculated as of the date of termination. The Company will then provide for the distribution of any remaining assets to a successor trust or among active participants at the time of Plan termination, or will provide for the payment of other welfare benefits for participants in a manner determined to be in the best interest of the participants. Should the Company ever become insolvent, all benefits will cease and the trust’s assets will revert to the Company.

Comporium, Inc. Retiree Medical Plan  
Notes to Financial Statements  
December 31, 2024 and 2023

## **2. Summary of Significant Accounting Policies**

### **Basis of Accounting**

The accompanying financial statements are prepared in accordance with accounting principles generally accepted in the United States (“US GAAP”).

### **Estimates**

The preparation of financial statements in conformity with US GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

### **Risks and Uncertainties**

The Plan invests in investment securities that are exposed to various risks, such as interest rate, market, and credit risk. 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 2024 statement of net assets available for plan benefits.

### **Investment Valuation and Income Recognition**

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest and dividends are recorded when received. Net appreciation includes the Plan’s gains and losses on investments bought and sold as well as held during the year.

### **Payment of Benefits**

Benefits are recorded when paid.

Comporium, Inc. Retiree Medical Plan  
Notes to Financial Statements  
December 31, 2024 and 2023

**3. Fair Value Measurements**

The Plan's investments are reported at fair value in the accompanying statements of net assets available for plan benefits. US GAAP establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable inputs other than quoted prices for identical assets; and Level 3 inputs to the valuation methodology are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

The following table presents fair value measurement information for the Plan's investments as of December 31, 2024:

	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Cash equivalents	\$ 76,093	\$ --	\$ --	\$ 76,093
Mutual funds and exchange-traded funds	7,644,771	--	--	7,644,771
Municipal bonds	--	30,037	--	30,037
Total investments, at fair value	<u>\$ 7,720,864</u>	<u>\$ 30,037</u>	<u>\$ --</u>	<u>\$ 7,750,901</u>

Comporium, Inc. Retiree Medical Plan  
Notes to Financial Statements  
December 31, 2024 and 2023

**3. Fair Value Measurements (continued)**

The following table presents fair value measurement information for the Plan's investments as of December 31, 2023:

	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Cash equivalents	\$ 105,000	\$ --	\$ --	\$ 105,000
Mutual funds and exchange-traded funds	7,150,444	--	--	7,150,444
Municipal bonds	--	45,061	--	45,061
Total investments, at fair value	<u>\$ 7,255,444</u>	<u>\$ 45,061</u>	<u>\$ --</u>	<u>\$ 7,300,505</u>

*Level 1 Fair Value Measurements* – Cash equivalents are valued at the closing price reported by the fund sponsor. The fair values of mutual funds and exchange-traded funds are based on quoted market prices of the shares held by the Plan at year end.

*Level 2 Fair Value Measurements* – The fair value of municipal bonds is derived from quoted prices for identical or similar assets in markets that are not active.

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

**4. Party-in-Interest and Related Party Transactions**

Certain investment funds held by the Plan are managed by Charles Schwab, the custodian. All transactions with Charles Schwab qualify as party-in-interest transactions. Fees paid directly by the Plan for custodial, recordkeeping, investment advisory, and other services for the years ended December 31, 2024 and 2023 amounted to approximately \$33,000 and \$32,000, respectively. These transactions, which qualify as party-in-interest transactions, are exempt from the prohibited transaction rules of ERISA.

Comporium, Inc. Retiree Medical Plan  
Notes to Financial Statements  
December 31, 2024 and 2023

**5. Filing Status**

The Plan's trust is a rabbi grantor trust, in which the Company is the grantor. Under this arrangement, income generated by the trust is taxed to the grantor. Therefore, no provision for income taxes has been included in the Plan's financial statements. The Company has the right, at its discretion, to charge or credit the Plan's trust account for income tax expenses or benefits it derives from the activities of the trust. Approximately \$61,000 and \$0 was reimbursed to the Plan's trust account for federal and state income tax benefits during the years ended December 31, 2024 and 2023, respectively.

The Plan administrator believes the Plan was designed and is currently being operated in compliance with the applicable requirements of the IRC.

US GAAP requires the Plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. No such liabilities were identified at December 31, 2024 and 2023. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

**6. Subsequent Events**

Management evaluated events and transactions after December 31, 2024 through September 25, 2025, the date on which the financial statements were issued, for subsequent events, and determined that there were no subsequent events to report.

## SUPPLEMENTAL SCHEDULES

Comporium, Inc. Retiree Medical Plan  
Employer ID # 57-0236160 Plan # 503  
Schedule H, Part IV Line 4i - Schedule of Assets (Held at End of Year)  
December 31, 2024

( 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
<b>Cash equivalent:</b>				
*	Schwab Value Advantage Money Fund	Money market fund	\$ 76,093	\$ 76,093
			<u>76,093</u>	<u>76,093</u>
<b>Mutual funds and exchange-traded funds:</b>				
*	Schwab US Large Cap	35,600 shares	650,091	992,173
	Vanguard Value ETF IV	5,500 shares	694,285	931,150
	PIMCO Income INSTL	68,668 shares	743,036	722,397
	PIMCO Global Bond Opps	44,081 shares	524,106	525,772
	Invesco S&P 500 Quality	7,200 shares	255,989	482,616
	ISHS MSCI Intl Quality	12,000 shares	431,953	445,440
	Vanguard FTSE All World	7,500 shares	442,398	430,575
	Vanguard Core Bond Admiral	24,029 shares	462,608	425,320
	Vanguard Total International	8,500 shares	416,584	416,925
	Vanguard Small Cap	1,270 shares	293,769	355,676
	Vanguard Mid Cap ETF	1,300 shares	214,469	343,369
	PGIM High Yield Z	70,554 shares	325,819	337,252
	NYLI Macklay High Yield C	54,122 shares	274,547	281,436
	Vanguard Small Cap Value	1,275 shares	155,664	252,680
	Ishares BRD USD INV GRD	5,000 shares	256,499	251,400
	Cohen & Steers Realty	3,510 shares	250,000	230,834
	MFS Intl Diversification	9,621 shares	180,426	219,756
			<u>6,572,243</u>	<u>7,644,771</u>
<b>Municipal bond:</b>				
	Florence Darlington Commission for Tech Edu	5.00% bond, due 3/1/2025, par value	33,241	30,037
			<u>33,241</u>	<u>30,037</u>
	Total		<u>\$ 6,681,577</u>	<u>\$ 7,750,901</u>

\* Indicates a party-in-interest to the Plan.

Comporium, Inc. Retiree Medical Plan  
Employer ID # 57-0236160 Plan # 503  
Schedule H, Part IV Line 4j - Schedule of Reportable Transactions  
Year Ended December 31, 2024

(a) Identity of party involved	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
*	Charles Schwab Schwab Value Advantage Money Investment	\$ 436,093	\$ --	\$ --	\$ --	\$ --	\$ --	\$ --
*	Charles Schwab Schwab Value Advantage Money Investment	--	465,000	--	--	465,000	--	--

\* Indicates a party-in-interest to the Plan.

Note: The transactions set forth herein involves a security of the same issue that, within the plan year, included a transaction with respect to such security that amounted to more than 5% of the plan assets as of the beginning of the plan year.

Comporium, Inc. Retiree Medical Plan  
Employer ID# 57-0236160 Plan #503  
For the Tax Year Ending December 31, 2024

(a) Identity of party involved	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain (loss)
*Charles Schwab Bank	Schwab Value Advantage Money Inv	\$ 436,093	\$ --	\$ --	\$ --	\$ --	\$ --	\$ --
*Charles Schwab Bank	Schwab Value Advantage Money Inv	-	465,000	-	-	465,000	465,000	-

\*Indicates a party-in-interest to the Plan.

The transaction set forth herein involves a security of the same issue that, within the plan year, included a transaction with respect to such security that amounted in the aggregate to more than 5% of the current value of plan assets.

**Comporium, Inc. Retiree Medical Plan**  
**Employer ID# 57-0236160 Plan #503**  
**Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**  
**December 31, 2024**

( a )	( b )	( c )	( d )	( e )
		Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current Value
( a )	( b )	( c )	( d )	( e )
Identity of issue, borrower, lessor, or similar party		value	Cost	Current Value
<b>Cash equivalents</b>				
Schwab Value Advantage Money Fund		Money Market fund	76,093	76,093
			76,093	76,093
<b>Mutual funds and exchange-traded funds:</b>				
Invesco S&P 500 Quality		7,200.0000 shares	255,989	482,616
IShares Brd USD Inv GRD		5,000.0000 shares	256,499	251,400
Schwab US Large Cap		35,600.0000 shares	650,091	992,172
Vanguard FTSE All World		7,500.0000 shares	442,398	430,575
Vanguard Mid CAP ETF		1,300.0000 shares	214,469	343,369
Vanguard Small Cap		1,270.0000 shares	293,769	355,676
Vanguard Small Cap Value		1,275.0000 shares	155,664	252,680
Vanguard Value ETF		5,500.0000 shares	694,285	931,150
Vanguard Total		8,500.0000 shares	416,584	416,925
PGIM High Yield Z		70,554.7470 shares	325,819	337,252
PIMCO Global Bond Opps		55,170.2420 shares	524,106	525,772
PIMCO Income INSTL		68,668.9160 shares	743,036	722,397
Vanguard Core Bond Admir		24,029.4020 shares	462,608	425,320
NYLI Mackay High Yield Corporate BD CL I		54,122.3770 Shares	274,547	281,436
Cohen & Steers Realty Shares L		3,510.2500 shares	250,000	230,834
MFS Intl Diversification		9,621.5460 shares	180,426	219,756
ISHS MSCI Intl Quality		12,000.0000 shares	431,953	445,440
			6,572,242	7,644,771
<b>Municipal bonds:</b>				
Florence Darlington Commission for Tech Edu		5.00% bond, due 3/1/2025, par value 30,000	33,241	30,037
			33,241	30,037
Total			\$ 6,681,576	\$ 7,750,901