Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
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.**	**2024** **This Form is Open to Public Inspection**

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 (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ____

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
WILSON UNION AND CRES/PRO HOURLY 401(K) PLAN

1b Three-digit plan number (PN) ▶ 006

1c Effective date of plan
08/01/1999

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PYXUS INTERNATIONAL INC.

6001 HOSPITALITY COURT, SUITE 100
MORRISVILLE, NC 27560-2009

6001 HOSPITALITY COURT, SUITE 100
MORRISVILLE, NC 27560-2009

2b Employer Identification Number (EIN)
85-2386250

2c Plan Sponsor's telephone number
919-379-4300

2d Business code (see instructions)
312200

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	TRICIA COLBECK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	TRICIA COLBECK
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	1303
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	1279
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1438
b	Retired or separated participants receiving benefits	**6b**	3
c	Other retired or separated participants entitled to future benefits	**6c**	22
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1463
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	9
f	Total. Add lines **6d** and **6e**.	**6f**	1472
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	384
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	374
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2G 2J 2T 3D

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

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] Trust
- **(4)** [ ] General assets of the sponsor

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached ______
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached ______
- **(4)** [ ] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .... ☐ Yes ☐ No

If “Yes” is checked, complete lines 11b and 11c.

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

11c Enter the Receipt Confirmation Code for the 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______________________

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information. This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	OMB No. 1210-0110 **2024** **This Form is Open to Public Inspection.**

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

A Name of plan WILSON UNION AND CRES/PRO HOURLY 401(K) PLAN	**B** Three-digit plan number (PN) ▶ 006
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 PYXUS INTERNATIONAL INC.	**D** Employer Identification Number (EIN) 85-2386250

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: TRP STABLE VALUE FUND - N

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-1309931-001	C	4831

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2005 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
61-6434302-001	C	5825

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2010 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
32-6199795-001	C	28436

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2015 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
35-6941654-001	C	104960

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2020 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
36-7594871-001	C	132661

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2025 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
37-6495447-001	C	110029

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2030 TR A

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-7010946-001	C	105776

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2035 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 36-7595013-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 119558
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2040 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-6941729-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 88541
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2045 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 32-6199848-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 42731
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2050 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 30-6303214-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19802
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2055 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-6941728-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17912
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2060 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 47-1088316-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10243
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE RETIRE 2065 TR A		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 85-1763138-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3159
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	# Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	OMB No. 1210-0110 **2024** **This Form is Open to Public Inspection**

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

A Name of plan
WILSON UNION AND CRES/PRO HOURLY 401(K) PLAN

B Three-digit plan number (PN) ▶ 006

C Plan sponsor's name as shown on line 2a of Form 5500
PYXUS INTERNATIONAL INC.

D Employer Identification Number (EIN)
85-2386250

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	71122	0
(2) Participant contributions	1b(2)	0	9865
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	678487	794464
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2453	1124
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	752062	805453
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k		
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	752062	805453

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	44000	
(B) Participants	2a(1)(B)	61672	
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		105672
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	48	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		48
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		81638
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		332
c Other income	2c		56
d Total income. Add all **income** amounts in column (b) and enter total	2d		187746

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	130044	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		130044
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	4311	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		4311
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		134355

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		53391
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [X] 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: HARRIS, HARVEY, NEAL & CO., LLP **(2)** EIN: 54-0643136

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

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**	X		7959
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No
If "Yes," enter the amount of any plan assets that reverted to the employer this year ______________.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) .... ☐ Yes ☒ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year ____________________.

SCHEDULE R (Form 5500)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ **File as an attachment to Form 5500.**	**2024** **This Form is Open to Public Inspection.**

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

A Name of plan
WILSON UNION AND CRES/PRO HOURLY 401(K) PLAN

B Three-digit plan number (PN) ▶ 006

C Plan sponsor's name as shown on line 2a of Form 5500
PYXUS INTERNATIONAL INC.

D Employer Identification Number (EIN)
85-2386250

Part I Distributions

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

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

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

EIN(s): 37-6495447 ______

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

a Name of contributing employer

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

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

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

a Name of contributing employer

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

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

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

a Name of contributing employer

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

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

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

a Name of contributing employer

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

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

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

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

ALLIANCE ONE INTERNATIONAL INC. - WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN

FINANCIAL REPORT

DECEMBER 31, 2024

C O N T E N T S

HHN&Co.

Harris, Harvey, Neal & Co., LLP
Certified Public Accountants

2309 Riverside Drive • P.O. Box 3424 • Danville, VA 24543
434/792-3220 • Fax 434/792-8604 • www.hhncpa.com

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator
Alliance One International, Inc. -
Wilson Union and CRES/PRO Hourly 401(k) Plan

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

We have performed audits of the accompanying financial statements of Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) 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 audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' 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 audits in accordance with auditing standards generally accepted in the United States of America. 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 Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management

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, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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 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 Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) 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 Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the 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 Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of delinquent participant contributions, assets held at end of year, acquired and disposed of within year, and reportable transactions are presented for purposes of additional analysis and are not a required part of the financial statements but is 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 investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental 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 Regulations 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 institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Harris Harvey Neal & Co. LLP

Danville, Virginia
October 13, 2025

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2024 and 2023
See Independent Auditors' Report

ASSETS	2024	2023
Investments at fair value	$ 795,588	$ 680,940
Receivables:		
Employer's contribution	-	71,122
Participants' contribution	9,865	-
Total Receivables	9,865	71,122
Total Assets	805,453	752,062
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 805,453	$ 752,062

See Notes to Financial Statements.

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Years Ended December 31, 2024 and 2023
See Independent Auditors' Report

	2024	2023
Investment income:		
Net appreciation in fair value of investments	$ 81,809	$ 99,216
Interest, dividends, and capital gains	209	187
	82,018	99,403
Contributions:		
Employer	44,000	71,122
Participants	61,672	62,610
Rollovers	-	710
	105,672	134,442
Other additions	56	91
Total additions	187,746	233,936
Benefits paid to participants	130,044	108,572
Administrative expenses	4,311	3,378
Total deductions	134,355	111,950
Net increase	53,391	121,986
Net assets available for benefits:		
Beginning	752,062	630,076
Ending	$ 805,453	$ 752,062

See Notes to Financial Statements.

NOTES TO FINANCIAL STATEMENTS

Note 1. Significant Accounting Policies

Basis of accounting:

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America.

Use of estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and when applicable, disclosure of contingent assets and liabilities at the date of the financial statements. Accordingly, actual results could vary from these estimates.

Payment of benefits:

Benefits are recorded when paid.

Investment valuation and income recognitions:

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers, the trustees, and insurance company. See Note 6 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Appreciation (depreciation) in the fair market value of investments includes currently realized gains and losses on the sale of assets as well as unrealized gains and losses resulting from yearly changes in market values of assets held in the portfolio.

Administrative expenses:

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

Note 1. Significant Accounting Policies (Continued)

Risks and uncertainties:

The Plan invests in registered investment companies and a common collective trust which invests in various securities including U.S. Government securities, corporate debt instruments, and corporate stocks, which in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with these securities, it is reasonably possible that changes in the values of investments will occur in the near-term and that such changes could materially affect the amounts reported in the financial statements.

Note 2. Plan Description

The following description of the Alliance One International, Inc. - Wilson Union and CRES/PRO Hourly 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General:

The Plan is a defined contribution plan, subject to the provisions of the *Employee Retirement Income Security Act of 1974* (ERISA), as amended, covering all employees of Pyxus International, Inc. (the Employer) whose employment is subject to the terms and conditions of the collective bargaining agreement (the CBA) entered into by the Company and Local Union 270-T Bakery, Confectionery, Tobacco Workers and Grain Millers International Union, AFL-CIO-CLC.

Contributions:

For each Plan year during which the Employer meets the incentive goals specified in the CBA, the Employer shall make discretionary contributions to the Plan. For the year ended December 31, 2024, each participant who qualified received a contribution called an Incentive Pay Contribution based on employee classification and contract objectives. The objectives for the Incentive Pay Contribution for Wilson Union is based on each hour worked during the Employer’s year ended March 31, 2023. The objectives for the Incentive Pay Contribution for CRES/PRO is based on each hour worked during the Plan’s year ended December 31, 2024, and December 31, 2023, respectively. Making Incentive Pay Contributions for any Plan year is entirely discretionary as to the total amount.

Participants may be eligible for additional non-elective contributions from the Employer called “service pay.” In order to be eligible, participants must: (1) satisfy the total consecutive years worked required to receive the service pay in accordance with the chart below; and (2) while employed by the Employer either: (a) attain age 65 or above; or (b) terminate employment with the Employer prior to age 65 because of disability. An initial contribution will be made to the Plan in the calendar year in which

Note 2. Plan Description (Continued)

Contributions (continued):

the participant: (1) has attained age 65 or becomes disabled; and (2) has satisfied one of the years of consecutive service requirements in the chart below (the "initial contribution"). If the participant remains employed by the Employer after receiving the initial contribution, the participant will receive an additional contribution for the calendar year in which the participant attains the added service years. All contributions are 100% vested. Participants may only withdraw the service pay benefit from the Plan upon termination. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

Total Years	Increment	Cumulative
15		$ 4,500
20	$ 1,100	$ 5,600
25	$ 500	$ 6,100
30	$ 300	$ 6,400
35	$ 300	$ 6,700

Each participant may elect to contribute a part of his pay to the Plan by payroll deduction. Contributions are subject to certain limitations under ERISA.

Participant accounts:

Each participant's account is credited with the participant's contributions and Employer contributions, as well as allocations of Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Subject to an investment policy established by the Plan Administrator, participants can direct how some (or all) of their account will be invested. The participants can choose from any investment options approved by the Plan, including but not limited to savings and/or money market accounts, stocks, bonds, mutual funds, and insurance company funds. The participants can switch between investments as often as is permitted under the investment options they choose. All earnings and losses on their directed investments will be credited directly to their account. Investment results will reflect any fees and investment expenses for the investments they select. The participants may request more information on fees associated with an investment option from the Plan Administrator. At the appropriate time, the Plan will provide each participant with more detailed information about the directed investment options permitted under the terms of the Plan's investment policy.

Note 2. Plan Description (Continued)

Participant accounts (continued):

The Plan intends to comply with Section 404(c) of ERISA. This means that if participants are permitted to exercise independent control over the investment of their account and they are offered a reasonably diverse selection of well managed investment options, then the fiduciaries of the Plan, including the Plan Administrator and the Company, may be relieved of certain liabilities for any losses which occur because the participants exercise control.

Vesting:

The participant's portion of contributions, the incentive pay portion of contributions, and all associated earnings are 100% vested at all times.

Payment of benefits:

On termination of service due to death, disability, retirement, or other reasons, a participant may elect to receive either a lump sum amount equal to the value of the participant's vested interest in his or her account, or roll over their vested account balance into an IRA or other qualified plan.

Participant-directed investments in funds:

Each participant may direct how his/her account balance and future contributions are invested by choosing between the available investment funds offered by the Plan. Any such investment direction remains effective until changed by a new election. The right to direct the investment continues at termination or retirement of the participant until the distribution of the entire account balance.

Forfeited accounts:

For each of the years ended December 31, 2024 and 2023, the Plan had no forfeited nonvested accounts.

Note 3. Tax Status

The Plan has been informed by T. Rowe Price Trust Company that the Plan is part of a prototype Profit Sharing Plan referred to as a Base Plan Document #01 for which the trustee has an opinion letter dated March 31, 2014 issued by the Internal Revenue Service as evidence that the Plan is qualified under Section 401 of the *Internal Revenue Code*. Therefore, the Plan is not subject to tax under current income tax law. The Plan has been amended since receiving the opinion letter. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the *Internal Revenue Code* and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

Note 3. Tax Status (Continued)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes the Plan is no longer subject to income tax examinations for the years prior to 2021.

Note 4. Plan Termination

Defined contribution plans are not eligible for Pension Benefit Guaranty Insurance. While the Employer expects to continue the Plan indefinitely, continuance of the Plan is not a contractual obligation, and the Employer shall have the right to terminate the Plan at any time and for any reason. In the event of termination, all participants' vested benefits will be nonforfeitable and will be available for distribution to the participants at such time.

Note 5. Information Prepared and Certified by Trustee

The following information included in the accompanying financial statements and supplemental schedules was obtained from data that has been prepared and certified as complete and accurate by the trustees.

- Investment assets, at fair value
- Investment transactions
- Investment income (loss)
- Schedule of assets (held at end of year)
- Schedule of assets (acquired and disposed of within year)
- Schedule of reportable transactions

Note 6. Fair Value Measurements

Fair value is based on the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The established framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The three levels of the fair value hierarchy are described as follows:

Level 1 Fair Value Measurements

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.

Note 6. Fair Value Measurements (Continued)

Level 2 Fair Value Measurements

Inputs to the valuation methodology that are observable, either directly or indirectly, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities. 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 Fair Value Measurements

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

A financial instrument's categorization within the valuation hierarchy is based upon the lowest level of 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. The following is a description of the valuation methodologies used for the Plan's instruments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy. There have been no changes in the methodologies used as of December 31, 2024 and 2023.

Common Trust Funds. The stable value common trust fund is composed primarily of fully benefit-responsive investment contracts that is valued at the NAV of units of a collective trust. The remaining common trust funds are comprised primarily of stocks, bonds, and cash allocated based on the investor's target retirement date and are valued at the NAV of units of a collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the funds, the investment adviser reserves the right to temporarily delay withdrawal from the Trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Mutual Funds. Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Security and Exchange Commission (SEC). These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Note 6. Fair Value Measurements (Continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023:

		Fair Value Measurements at Reporting Date Using		
	Fair Value	Level 1	Level 2	Level 3
December 31, 2024				
Mutual funds	$ 1,124	$ 1,124	$ -	$ -
Total assets in the fair value hierarchy	1,124	$ 1,124	$ -	$ -
Investments measured at net asset value (a)	794,464			
Investments at fair value	$ 795,588			

(a) In accordance with FASB ASC 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

		Fair Value Measurements at Reporting Date Using		
	Fair Value	Level 1	Level 2	Level 3
December 31, 2023				
Mutual funds	$ 2,452	$ 2,452	$ -	$ -
Total assets in the fair value hierarchy	2,452	$ 2,452	$ -	$ -
Investments measured at net asset value (a)	678,488			
Investments at fair value	$ 680,940			

(a) In accordance with FASB ASC 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Note 6. Fair Value Measurements (Continued)

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2024:

	December 31, 2024			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
T ROWE PRICE RETIRE 2005 TR A	$ 5,825	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2010 TR A	$ 28,436	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2015 TR A	$ 104,960	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2020 TR A	$ 132,661	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2025 TR A	$ 110,029	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2030 TR A	$ 105,776	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2035 TR A	$ 119,558	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2040 TR A	$ 88,541	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2045 TR A	$ 42,731	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2050 TR A	$ 19,802	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2055 TR A	$ 17,912	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2060 TR A	$ 10,243	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2065 TR A	$ 3,159	N/A	Daily	30 Days
TRP STABLE VALUE FUND - N	$ 4,831	N/A	Daily	30 Days

Note 6. Fair Value Measurements (Continued)

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2023:

	December 31, 2023			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
T ROWE PRICE RETIRE 2005 TR A	$ 15,705	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2010 TR A	$ 25,144	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2015 TR A	$ 80,767	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2020 TR A	$ 116,896	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2025 TR A	$ 86,561	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2030 TR A	$ 101,407	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2035 TR A	$ 95,278	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2040 TR A	$ 69,932	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2045 TR A	$ 33,182	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2050 TR A	$ 15,063	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2055 TR A	$ 17,173	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2060 TR A	$ 7,897	N/A	Daily	30 Days
T ROWE PRICE RETIRE 2065 TR A	$ 5,198	N/A	Daily	30 Days
TRP STABLE VALUE FUND - N	$ 8,284	N/A	Daily	30 Days

Note 7. Investments in Common Trust Funds

The Stable Value Common Trust Fund (the Trust), is a bank-sponsored collective investment fund that seeks to obtain a competitive return consistent with the preservation of principal value. To achieve its objective, the Trust invests primarily in a portfolio of Guaranteed Investment Contracts (GICs), Bank Investment Contracts (BICs), and Synthetic Investment (SIC) reduce risk through diversification and credit analysis. The Trust diversifies its GIC, BIC, and SIC investments by issuer and maturity, adhering to the following investment guidelines:

Issuer Diversification: The Trust will generally limit its total investment in GICs and BICs of any one issuer to 10% of the Trust's total value at the time of purchase. In no event will the Trust's exposure to any single issuer of investment contracts, including SICs, exceed 20% of the Trust's total value at the time of purchase.

Maturity Diversification: The Trust will purchase GICs, BICs, and SICs with maturities of up to seven years, positioning the Trust to respond to changing interest rate levels. From time to time, the Trust may invest in other investment contracts or income-producing instruments such as group annuity contracts.

The Other Common Trust Funds (the Trusts) seek to provide the highest total return over time consistent with an emphasis on both capital growth and income. The Trusts invests in underlying commingled T. Rowe Price Trusts, each one emphasizing a different market sector. Over time, the Trusts' allocation to bonds will increase and its allocation to stocks will decrease.

Net asset value is the relevant measurement attribute for the Trusts' fair value. Net asset value, as reported to the Plan by T. Rowe Price Trust Company, the trustee, represents contributions made under the Trusts, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at net asset value.

There are no reserves against net asset value for credit risk of the contract issuer or otherwise. The fair value of the Plan's investment in the Trusts at December 31, 2024 and 2023, was $794,464 and $678,488, respectively.

Certain events may limit the ability of the Plan to transact at net asset value with the issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan Sponsor or other Plan Sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the Trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. Plan management believes that any events that would limit the Plan's ability to transact at net asset value with participants are probable of not occurring.

Note 8. Related Party and Party-in-Interest Transactions

Certain Plan investments are managed by T. Rowe Price Trust Company. T. Rowe Price Trust Company is the trustee and recordkeeper for the Plan and, therefore, these transactions qualify as party-in-interest transactions.

Related party and party-in-interest transactions at December 31, 2024, include investments in Common Trust Funds of the trustee totaling $794,464.

All of these party-in-interest transactions are exempt from the prohibited transactions rules of ERISA.

Note 9. Administrative Fees

The Plan paid certain administration fees amounting to $4,311 and $3,378 for the years ended December 31, 2024 and 2023, respectively. All internal administrative costs have been paid by the Company.

Note 10. Late Remittance of Employee Contributions

During the year ended December 31, 2024, the Plan Sponsor did not remit certain employee contributions to the Plan within the time frame specified by the Department of Labor's regulations. The amount of contributions not remitted timely was $7,959. The Plan Sponsor has remitted all outstanding contributions subsequent to year-end. The Plan Sponsor is in the process of calculating and submitting the related lost earnings to the affected participant accounts.

Note 11. Subsequent Events

Management has evaluated subsequent events through October 13, 2025, the date which the financial statements were available for issue.

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4A - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
December 31, 2024
See Independent Auditors' Report

Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Corrected in VFCP
$ 7,959	$ -	$ -	$ 7,959	$ -

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2024
See Independent Auditors' Report

(a)	(b) Identity of Issuer, 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
	Mutual Funds			
	LOOMIS SAYLES SM CAP GROWTH N	12.9987 shares	$ 330	$ 386
	VANGUARD GLOBAL EQUITY	20.7561 shares	669	738
	Total Mutual Funds		999	1,124
	Common Trust Funds			
*	T ROWE PRICE RETIRE 2005 TR A	280.3254 shares	4,458	5,825
*	T ROWE PRICE RETIRE 2010 TR A	1,283.2055 shares	20,829	28,436
*	T ROWE PRICE RETIRE 2015 TR A	4,337.1965 shares	78,348	104,960
*	T ROWE PRICE RETIRE 2020 TR A	5,040.3081 shares	103,243	132,661
*	T ROWE PRICE RETIRE 2025 TR A	3,825.7671 shares	84,257	110,029
*	T ROWE PRICE RETIRE 2030 TR A	3,370.8180 shares	75,466	105,776
*	T ROWE PRICE RETIRE 2035 TR A	3,528.8562 shares	89,912	119,558
*	T ROWE PRICE RETIRE 2040 TR A	2,462.2108 shares	59,298	88,541
*	T ROWE PRICE RETIRE 2045 TR A	1,151.7718 shares	30,539	42,731
*	T ROWE PRICE RETIRE 2050 TR A	531.7438 shares	13,637	19,802
*	T ROWE PRICE RETIRE 2055 TR A	481.3761 shares	11,823	17,912
*	T ROWE PRICE RETIRE 2060 TR A	427.8576 shares	7,563	10,243
*	T ROWE PRICE RETIRE 2065 TR A	210.0690 shares	2,657	3,159
*	TRP STABLE VALUE FUND - N	4,831.4000 shares	4,831	4,831
	Total Common Trust Funds		586,861	794,464
	Total Investments		587,860	795,588
	Total Assets (Held at End of Year)		$ 587,860	$ 795,588

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (ACQUIRED AND DISPOSED OF WITHIN YEAR)
December 31, 2024
See Independent Auditors' Report

(a) Identity of Issuer, Borrower, Lessor or Similar Party	(b) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost of Acquisitions	(e) Proceeds of Dispositions

No reportable transactions.

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS
December 31, 2024
See Independent Auditors' Report

(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) Fair Value of Asset on Transaction Date	(i) Net Gain or or (Loss)
Category (iii) - Series of transactions in excess of 5% of plan assets.								
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2020 TR A	$ 20,913	$ 16,425	$ -	$ -	$ 14,297	$ 16,425	$ 2,128
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2025 TR A	$ 35,129	$ 21,482	$ -	$ -	$ 19,758	$ 21,482	$ 1,724
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2030 TR A	$ 15,516	$ 23,258	$ -	$ -	$ 17,119	$ 23,258	$ 6,139
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2035 TR A	$ 28,547	$ 17,842	$ -	$ -	$ 14,151	$ 17,842	$ 3,691

There were no category (i), (ii), or (iv) reportable transactions during 2024.

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2024
See Independent Auditors' Report

(a)	(b) Identity of Issuer, 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
	Mutual Funds			
	LOOMIS SAYLES SM CAP GROWTH N	12.9987 shares	$ 330	$ 386
	VANGUARD GLOBAL EQUITY	20.7561 shares	669	738
	Total Mutual Funds		999	1,124
	Common Trust Funds			
*	T ROWE PRICE RETIRE 2005 TR A	280.3254 shares	4,458	5,825
*	T ROWE PRICE RETIRE 2010 TR A	1,283.2055 shares	20,829	28,436
*	T ROWE PRICE RETIRE 2015 TR A	4,337.1965 shares	78,348	104,960
*	T ROWE PRICE RETIRE 2020 TR A	5,040.3081 shares	103,243	132,661
*	T ROWE PRICE RETIRE 2025 TR A	3,825.7671 shares	84,257	110,029
*	T ROWE PRICE RETIRE 2030 TR A	3,370.8180 shares	75,466	105,776
*	T ROWE PRICE RETIRE 2035 TR A	3,528.8562 shares	89,912	119,558
*	T ROWE PRICE RETIRE 2040 TR A	2,462.2108 shares	59,298	88,541
*	T ROWE PRICE RETIRE 2045 TR A	1,151.7718 shares	30,539	42,731
*	T ROWE PRICE RETIRE 2050 TR A	531.7438 shares	13,637	19,802
*	T ROWE PRICE RETIRE 2055 TR A	481.3761 shares	11,823	17,912
*	T ROWE PRICE RETIRE 2060 TR A	427.8576 shares	7,563	10,243
*	T ROWE PRICE RETIRE 2065 TR A	210.0690 shares	2,657	3,159
*	TRP STABLE VALUE FUND - N	4,831.4000 shares	4,831	4,831
	Total Common Trust Funds		586,861	794,464
	Total Investments		587,860	795,588
	Total Assets (Held at End of Year)		$ 587,860	$ 795,588

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210 - 0110
1210 - 0089

2024

This Form is Open to Public Inspection

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 (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ________

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

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

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

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

Part II Basic Plan Information - enter all requested information

1a Name of plan
WILSON UNION AND CRES/PRO
HOURLY 401(K) PLAN

1b Three-digit plan number (PN) ▶ 006

1c Effective date of plan
08/01/1999

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PYXUS INTERNATIONAL INC.

6001 HOSPITALITY COURT, SUITE 100

MORRISVILLE NC 27560-2009

2b Employer Identification Number (EIN)
85-2386250

2c Plan Sponsor's telephone number
(919) 379-4300

2d Business code (see instructions)
312200

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

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

SIGN HERE	Tri Colbeck Signature of plan administrator	10/13/2025 Date	TRICIA COLBECK Enter name of individual signing as plan administrator
SIGN HERE	Tri Colbeck Signature of employer/plan sponsor	10/13/2025 Date	TRICIA COLBECK Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4A - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
December 31, 2024
See Independent Auditors' Report

Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Corrected in VFCP
$ 7,959	$ -	$ -	$ 7,959	$ -

ALLIANCE ONE INTERNATIONAL, INC. -
WILSON UNION AND CRES/PRO HOURLY 401(k) PLAN
EIN: 85-2386250 PLAN NUMBER: 006
SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS
December 31, 2024
See Independent Auditors' Report

(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) Fair Value of Asset on Transaction Date	(i) Net Gain or or (Loss)
Category (iii) - Series of transactions in excess of 5% of plan assets.								
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2020 TR A	$ 20,913	$ 16,425	$ -	$ -	$ 14,297	$ 16,425	$ 2,128
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2025 TR A	$ 35,129	$ 21,482	$ -	$ -	$ 19,758	$ 21,482	$ 1,724
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2030 TR A	$ 15,516	$ 23,258	$ -	$ -	$ 17,119	$ 23,258	$ 6,139
T.Rowe Price Trust Company	T ROWE PRICE RETIRE 2035 TR A	$ 28,547	$ 17,842	$ -	$ -	$ 14,151	$ 17,842	$ 3,691

There were no category (i), (ii), or (iv) reportable transactions during 2024.