

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 2025 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 06/30/2010
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) RED RIVER COMMODITIES, INC. 501 NW 42ND STREET FARGO, ND 58102
2b	Employer Identification Number (EIN) 45-0321457
2c	Plan Sponsor's telephone number 701-277-3523
2d	Business code (see instructions) 523140

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	09/07/2026	MARTI JENSEN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor RED RIVER COMMODITIES, INC. 501 NW 42ND STREET FARGO, ND 58102	3b Administrator's EIN 45-0321457 3c Administrator's telephone number 701-277-3523
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	5 128
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	 6a(1) 28 6a(2) 28 6b 10 6c 90 6d 128 6e 0 6f 128 6g(1) 6g(2) 6h 0
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 Characteristic Codes in the instructions:

1A 1I

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 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 SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF RED RIVER COMMODITIES, INC.	D Employer Identification Number (EIN) 45-0321457
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2025			
2	Assets:			
a	Market value	2a	4328911	
b	Actuarial value	2b	4134568	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	10	1741030	1741030
b	For terminated vested participants	90	1907984	1907984
c	For active participants	28	1095423	1097642
d	Total	128	4744437	4746656
4	If the plan is in at-risk status, check the box and complete lines (a) and (b). ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.36 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	0	
c	Target normal cost	6c	0	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Signature of actuary DELBERT ZAMORA Type or print name of actuary PENTEGRA SERVICES, INC. Firm name 2261 MARKET STREET SUITE 86302 SAN FRANCISCO, CA 94114 Address of the firm	07/10/2026 Date 26-07322 Most recent enrollment number 864-370-5801 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	0
10 Interest on line 9 using prior year's actual return of <u>9.59</u> %	0	0
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1362
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.13</u> %		70
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		1432
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14 Funding target attainment percentage	14	87.10 %
15 Adjusted funding target attainment percentage	15	87.10 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	87.98 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/10/2025	14952	0			
07/09/2025	14952	0			
12/18/2025	20072	0			
01/14/2026	40555	0			
Totals ►			18(b)	90531	18(c) 0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	86689

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☒ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
5.07 %2nd segment:
5.31 %3rd segment:
5.50 %☐ N/A, full yield curve used**b** Applicable month (enter code) **21b** 4**22** Weighted average retirement age **22** 64**23** Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute**Part VI Miscellaneous Items****24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**26** Demographic and benefit information**a** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**b** Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment. **27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years **28** 0**29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) **29** 0**30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29) **30** 0**Part VIII Minimum Required Contribution For Current Year****31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6c) **31a** 0**b** Excess assets, if applicable, but not greater than line 31a **31b** 0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	612088	67573
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) **34** 67573

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35) **36** 67573**37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) **37** 86689**38** Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36) **38a** 19116**b** Portion included in line 38a attributable to use of prefunding and funding standard carryover balances **38b** 0**39** Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) **39** 0**40** Unpaid minimum required contributions for all years **40** 0**Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)****41** If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2025
		This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 RED RIVER COMMODITIES, INC.	D Employer Identification Number (EIN) 45-0321457	

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

- 1 Information on Persons Receiving Only Eligible Indirect Compensation
- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection.
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.	B Three-digit plan number (PN) ▶	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 RED RIVER COMMODITIES, INC.	D Employer Identification Number (EIN) 45-0321457	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	VALUE EQUITY COLLECTIVE FUND
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b Name of sponsor of entity listed in (a):	DEPRINCE RACE AND ZOLLO MASTER TRUST
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c EIN-PN 45-6755963-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 256488
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
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b Name of sponsor of entity listed in (a):	
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c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	
---	--

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**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)**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)**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
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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 2025 This Form is Open to Public Inspection
	For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
	A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 RED RIVER COMMODITIES, INC.	D Employer Identification Number (EIN) 45-0321457	

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)	17830	40555
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	81365
(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)	274267	256488
(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)	4036814	4068826
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	4328911	4447234

Liabilities

1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

1l Net assets (subtract line 1k from line 1f)	1l	4328911	4447234
--	-----------	---------	---------

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)	90531	
(B) Participants	2a(1)(B)		
(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)		90531
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)		0
(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)	266554	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		266554
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	30460	
(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)		30460
(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)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		238425
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		625970

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	507647	
(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)		507647
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)		
(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)		0
j Total expenses. Add all expense amounts in column (b) and enter total	2j		507647

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		118323
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: EIDE BAILLY

(2) EIN: 45-0250958

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 568896.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection.
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 RED RIVER COMMODITIES, INC.		D Employer Identification Number (EIN) 45-0321457
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 25-1926855		
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 0
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2025 v. 250312		

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
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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
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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 <u>02 / 28 / 2023</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q705218A</u> .	

Financial Statements

December 31, 2025 and 2024

**Employees' Pension Plan of
Red River Commodities, Inc.**

Employees' Pension Plan of Red River Commodities, Inc.

Table of Contents

December 31, 2025 and 2024

Independent Auditor's Report	1
Financial Statements	
Statements of Net Assets Available for Benefits	5
Statements of Changes in Net Assets Available for Benefits	6
Statement of Accumulated Plan Benefits	7
Statement of Changes in Accumulated Plan Benefits.....	8
Notes to Financial Statements	9
Supplementary Information	
Schedule H, Line 4i - Schedule of Assets Held at End of Year	16
Schedule H, Line 4j – Schedule of Reportable Transactions	17



Independent Auditor's Report

The Plan Administrator
Employees' Pension Plan of Red River Commodities, Inc.
Fargo, North Dakota

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

We have performed audits of the financial statements of Employees' Pension Plan of Red River Commodities, Inc., 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, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years then ended, and the statement of accumulated plan benefits as of December 31, 2024, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Employees' Pension Plan of Red River Commodities, Inc.'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 (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note 6 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 Auditor's Responsibilities for the Audit of the Financial Statements section:

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Employees' Pension Plan of Red River Commodities, Inc. and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 Employees' Pension Plan of Red River Commodities, Inc.'s ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Employees' Pension Plan of Red River Commodities, Inc.'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 Employees' Pension Plan of Red River Commodities, Inc.'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

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule H, line 4i-schedule of assets held at end of year, and schedule H, line 4j - schedule of reportable transactions as of or for the year ended December 31, 2025, are presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by 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).

Eide Bailly LLP

Fargo, North Dakota
August 18, 2026

Employees' Pension Plan of Red River Commodities, Inc.
Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Assets		
Investments, at fair value	\$ 4,406,679	\$ 4,311,081
Receivable Employer contributions	<u>40,555</u>	<u>17,830</u>
Net Assets Available for Benefits	<u><u>\$ 4,447,234</u></u>	<u><u>\$ 4,328,911</u></u>

Employees' Pension Plan of Red River Commodities, Inc.
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2025 and 2024

	<u>2025</u>	<u>2024</u>
Additions		
Investment income		
Interest and dividends	\$ 266,554	\$ 166,378
Net appreciation in fair value of investments	<u>268,885</u>	<u>216,187</u>
	<u>535,439</u>	<u>382,565</u>
Employer contributions	<u>90,531</u>	<u>63,193</u>
	<u>625,970</u>	<u>445,758</u>
Deductions		
Benefits paid to participants	<u>507,647</u>	<u>169,024</u>
Total deductions	<u>507,647</u>	<u>169,024</u>
Net Increase	118,323	276,734
Net Assets Available for Benefits		
Beginning of year	<u>4,328,911</u>	<u>4,052,177</u>
End of year	<u>\$ 4,447,234</u>	<u>\$ 4,328,911</u>

Employees' Pension Plan of Red River Commodities, Inc.

Statement of Accumulated Plan Benefits

Year Ended December 31, 2024

Actuarial Present Value of Accumulated Plan Benefits

Vested benefits

Retired participants	\$ 1,646,393
Terminated vested participants	2,145,531
Active participants	<u>1,206,180</u>
	4,998,104

Nonvested benefits	<u>8,565</u>
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Total actuarial present value of accumulated plan benefits	<u><u>\$ 5,006,669</u></u>
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Employees' Pension Plan of Red River Commodities, Inc.
Statement of Changes in Accumulated Plan Benefits
Year Ended December 31, 2024

Actuarial Present Value of Accumulated Plan Benefits, Beginning of Year	\$ 4,917,287
Increase (decrease) during the year attributable to	
Benefits accumulated	(19,756)
Increase for interest due to decrease in discount period	289,967
Benefits paid	(169,024)
Change in actuarial assumptions	<u>(11,805)</u>
Net Increase	<u>89,382</u>
Actuarial Present Value of Accumulated Plan Benefits, End of Year	<u><u>\$ 5,006,669</u></u>

Note 1 - Description of Plan

The following brief description of the Employees' Pension Plan of Red River Commodities, Inc. (the Plan) is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is noncontributory defined benefit plan covering substantially all employees of Red River Commodities Inc. (the Company) who had a benefit under the Imperial Commodities Corporation plan as of June 30, 2010. The Plan was amended under the combined Imperial Commodities Corporation and Red River Commodities, Inc., so that any eligible employee who has not entered the plan as of June 1, 2008 will not be eligible to enter the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Pension Benefits

Employees with five or more years of service are entitled to annual pension benefits beginning at normal retirement age (65) equal to the greater of (a) the sum of 1.20 percent times their average monthly compensation for each year of benefit service times the number of Plan years of service completed by the participant or (b) the sum of the frozen accrued benefit as of December 31, 1994, based on Plan years of service through December 31, 1994, the average monthly compensation through March 31, 1995, and the additional Accrued Benefit determined under the retirement benefit formula effective January 1, 1995, for the participant's Plan years of service arising on or after January 1, 1995. The plan permits early retirement at age 55, with ten years of service. If an employee terminates service before rendering five years of service, they forfeit the right to receive a portion of their accumulated plan benefits. The normal form of benefit payment is a joint and 50% survivor annuity for married participants and a life annuity for participants who are not married. A participant may elect to receive the vested value of their accumulated plan benefits in the form of one lump-sum payment in cash, joint and survivor annuity, installment payments in the form of a life annuity, or installment payments in the form of a life annuity with a period certain guarantee.

Death and Disability Benefits

In the event of a death of a participant prior to retirement, the beneficiary will receive a death benefit equal to the value of the employee's accumulated pension benefits. Active employees who become totally disabled receive annual disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they become disabled. Disability benefits are paid until normal retirement age at which time disabled participants begin receiving normal retirement benefits computed as though they had been employed to normal retirement age with their annual compensation remaining the same as at the time they became disabled.

Employees' Pension Plan of Red River Commodities, Inc.

Notes to Financial Statements
December 31, 2025 and 2024

Vesting

The percentage of the benefit an employee is eligible to receive before retirement is based on years of credited service as follows:

<u>Participants Years of Service</u>	<u>Non-Forfeitable Percentage</u>
Less than 5	0%
5 or more	100%

Plan Termination

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Note 2 - Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

The preparation of the 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, liabilities, and changes therein, disclosures of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan Administrator determines the Plan's valuation policies utilizing information provided by its investment advisers and custodians. 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. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as those held during the year.

The classification of investments and investment earnings per the financial statements may differ from the Form 5500 due to different reporting requirements of Form 5500.

Payments of Benefits

Benefit payments to participants are recorded upon distribution.

Expenses

The Plan's expenses are paid by either the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. In addition, certain investment related expenses are included in net appreciation (depreciation) of fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Subsequent Events

The Plan sponsor has evaluated subsequent events through August 18, 2026, the date which the financial statements were available to be issued.

Note 3 - Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump sum distributions that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on employees' annual compensation during their years of credited service. The accumulated plan benefits for active employees are based on their compensation on the date which the benefit information is presented (the valuation date). Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount which results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Employees' Pension Plan of Red River Commodities, Inc.

Notes to Financial Statements
December 31, 2025 and 2024

The following is a summary of the more significant actuarial assumptions underlying the actuarial computations as of January 1, 2025:

Life expectancy of participants	Society of Actuaries Pri-2012 total data set mortality table, projected generationally with the MP-2021 mortality improvement scale
Retirement rates	2% at ages 55-61; 5% at age 62; 2% at age 63-64; and 100% at age 65 - Vested termed participants assumed to retirement at age 60
Discount rate	6.0% (4% post-retirement)
Compensation increases	None

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits.

The computations of the actuarial present value of the accumulated plan benefits were made January 1, 2025. Had the valuations been performed as of December 31, there would be no material differences.

Note 4 - Funding Policy

The Company's funding policy is to make quarterly contributions to the Plan in amounts that are estimated as necessary to fund the benefits provided, as determined by the Plan Actuary, so that all employee benefits will be fully provided by the time they retire. Minimum funding requirements have been met as of December 31, 2025 and 2024. During 2025 and 2024, the Company made contributions of \$90,531 and \$63,193, respectively.

Note 5 - Plan Termination

In the event the Plan terminates, the net assets of the Plan will be allocated as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Annuity benefits that former employees or their beneficiaries have received for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under the Plan provisions in effect at any time during the five years preceding the Plan termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a United States Governmental agency) up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All non-vested benefits.

Certain benefits under the Plan are insured by PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan Sponsor and the level of benefits guaranteed by the PBGC.

Note 6 - Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritized the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Mutual Funds (including money market mutual funds) - Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. 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.

Employees' Pension Plan of Red River Commodities, Inc.

Notes to Financial Statements
December 31, 2025 and 2024

Common Collective Trust - Valued at fair value based on the NAV of units held of the collective trust. The NAV is based on the observable market prices of the underlying investments within the fund less liabilities. The NAV for the underlying assets of the fund is a readily determinable measure of their fair value and is the basis used by the fund for current transactions.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2025 and 2024:

	2025			
	Level 1	Level 2	Level 3	Total
Money market mutual fund	\$ 81,366	\$ -	\$ -	\$ 81,366
Mutual funds	4,068,825	-	-	4,068,825
Common collective trusts	-	256,488	-	256,488
Investments at fair value	<u>\$ 4,150,191</u>	<u>\$ 256,488</u>	<u>\$ -</u>	<u>\$ 4,406,679</u>
	2024			
	Level 1	Level 2	Level 3	Total
Money market mutual fund	\$ 41,649	\$ -	\$ -	\$ 41,649
Mutual funds	3,995,165	-	-	3,995,165
Common collective trusts	-	274,267	-	274,267
Investments at fair value	<u>\$ 4,036,814</u>	<u>\$ 274,267</u>	<u>\$ -</u>	<u>\$ 4,311,081</u>

Note 7 - Certified Information

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments held at December 31, 2025 and 2024, and net appreciation (depreciation) in fair value of investments, interest and dividends for the years then ended, was obtained by management and agreed to or derived from information certified as complete and accurate by Pentegra Trust Company (the trustee of the plan).

Note 8 - Related Party and Party in-Interest Transactions

Certain Plan investments are managed by Pentegra Trust Company, the custodian as defined by the plan. As described in Note 2, the Plan sponsor paid certain expenses related to Plan operations and investment activity to various service providers. These transactions are exempt party-in-interest transactions under ERISA.

Note 9 - Tax Status

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated May 8, 2014, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (IRC). Subsequent to this issuance of the determination letter, the Plan was amended. However, the Company and Plan management believe that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

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 (or asset) 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.

Note 10 - Freezing of Plan Participation

The Administrative Committee of the Employees' Pension Plan of Red River Commodities, Inc. approved a motion to freeze participation in the Plan as of June 1, 2008. Based on this motion, the Plan no longer allows new employees to participate in the Plan and benefits no longer accrue. The Board of Directors has not made a resolution to terminate the Plan.

Note 11 - Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. 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 the amounts reported in the statements of net assets available for benefits.

Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Supplementary Information
December 31, 2025

Employees' Pension Plan of Red River Commodities, Inc.

Employees' Pension Plan of Red River Commodities, Inc.

Schedule H, Line 4i - Schedule of Assets Held at End of Year

December 31, 2025

EIN: 45-0321457

Plan: 001

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Federated Government Obligations Premier	Money market mutual fund	\$ 81,366	\$ 81,366
	DRZ Value Equity Collective Fund	Common collective trust	114,855	256,488
	American Funds Europacific Growth Fund Class R-6	Mutual fund	174,796	185,053
	Harding Loevner International Equity Institutional Z	Mutual fund	165,728	183,035
	JPMorgan Large Cap Growth Fund R6	Mutual fund	149,373	247,341
	LSV Value Equity Fund	Mutual fund	256,341	255,006
	Dodge & Cox International Stock	Mutual fund	124,916	187,340
	Neuberger Berman Genesis Fund Class R6	Mutual fund	72,713	68,116
	T. Rowe Price Institutional Large Cap Growth	Mutual fund	145,996	253,301
	Vanguard 500 Index Admiral Shares	Mutual fund	112,469	277,214
	Vanguard Mid Cap Index Fund Admiral Shares	Mutual fund	112,646	215,709
	BlackRock Advantage Small Cap Core Fund K	Mutual fund	78,141	79,178
	Fuller & Thaler Behavioral Small Cap Equity Fund R-6	Mutual fund	59,003	76,907
	Dodge & Cox Income Fund	Mutual fund	537,144	511,831
	DoubleLine Total Return Bond I	Mutual fund	585,479	509,323
	Loomis Sayles Core Plus Bond N	Mutual fund	553,708	509,604
	Metropolitan West Total Return Bond Plan	Mutual fund	575,429	509,867
	Total mutual funds		3,703,882	4,068,825
	Total investments at fair value		\$ 3,900,103	\$ 4,406,679

Employees' Pension Plan of Red River Commodities, Inc.

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2025

Plan: 001

EIN: 45-0321457

(a)	(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Number of Transactions	Purchase Price	Selling Price	Lease Rental	Expenses Incurred with Transactions	Cost of Asset	Current Value of Asset on Transaction date	Net Gain or (Loss)
<i>Series in same security</i>									
Federated Government Obligations Premier	Money market fund	9	\$ 357,788	\$ -	\$ -	\$ -	\$ 357,788	\$ 357,788	\$ -
Federated Government Obligations Premier	Money market fund	14	-	320,731	-	-	320,731	320,731	-

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, line 26 - Schedule of Active Participant Data
(EIN: 45-0321457/PN: 001)**

Age	Years of Credited Service									
	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.
< 25	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0
40-44	0	0	2	0	0	0	0	0	0	0
45-49	1	2	2	0	0	0	0	0	0	0
50-54	1	1	3	2	0	0	0	0	0	0
55-59	0	0	1	1	2	1	0	0	0	0
60-64	0	0	1	0	0	2	0	0	0	0
65-69	0	2	0	0	0	1	0	0	0	0
> 69	0	0	1	2	0	0	0	0	0	0
Total	2	5	10	5	2	4	0	0	0	0

Grand Total: 28

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, line 26 - Schedule of Active Participant Data
(EIN: 45-0321457/PN: 001)**

Age	Years of Credited Service									
	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.
< 25	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0
40-44	0	0	2	0	0	0	0	0	0	0
45-49	1	2	2	0	0	0	0	0	0	0
50-54	1	1	3	2	0	0	0	0	0	0
55-59	0	0	1	1	2	1	0	0	0	0
60-64	0	0	1	0	0	2	0	0	0	0
65-69	0	2	0	0	0	1	0	0	0	0
> 69	0	0	1	2	0	0	0	0	0	0
Total	2	5	10	5	2	4	0	0	0	0

Grand Total: 28

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Actuarial Cost Method

Liabilities shown in this report are computed in accordance with the Pension Protection Act of 2006 and subsequent guidance issued by the Internal Revenue Service. The target normal cost is the present value of all benefits that have accrued or have been earned (or that are expected to accrue or to be earned) under the plan during the plan year. The funding target of the plan for the plan year is the present value of all benefits that have been accrued or earned under the plan as of the first day of the plan year.

The benefits taken into account in determining the funding target and target normal cost are all benefits earned or accrued under the plan, including retirement-type and ancillary benefits. The determination of the funding target and target normal cost is based on plan provisions that are adopted no later than the valuation date for the plan year and that become effective during that plan year.

Asset Valuation Method

Two-year smoothed value of plan assets determined in accordance with IRS Notice 2009-22.

Actuarial Assumptions

The actuarial assumptions summarized below are either prescribed by law, or when not prescribed by law, selected by the plan's actuary as the best predictor of future experience, based on all available prior experience and future expectations. For any assumption not prescribed by law or selected by the plan's actuary, the individual or organization selecting such assumption is identified separately, and the report will note if the actuary has any disagreement with the appropriateness of the assumption.

Three-Segment Interest Rates	<u>Years</u>	<u>ARPA</u>	<u>Pre-MAP21</u>
	1-5	5.07%	5.07%
	6-20	5.31%	5.33%
	21+	5.50%	5.36%

Effective Interest Rate	5.36%
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Mortality Table	2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3)
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Compensation Increases	None
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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Termination Rates

Actuaries Pension Handbook, Table T-2, varying by age.

Representative rates are as follows:

Age	Male and Female %
25	5.29%
30	5.07%
35	4.70%
40	3.50%
45	1.77%
50	0.40%
55	0.00%
60	0.00%

Turnover rates are further adjusted varying by service. For 0-2 years of service a 3.0 multiple of the T-2 value is used; for 2-5 years of service the multiple is 2.0; for 5-10 years of service the multiple is 1.5; 1.0 thereafter.

Retirement Rates

Representative rates, based on the heavy retirement table, are as follows:

Age	Male and Female %
55 - 61	2.00%
62	5.00%
63	2.00%
64	2.00%
65	100.00%

Vested Terminated Participants are assumed to retire at age 60.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Disability Rates

Representative rates are as follows:

<u>Age</u>	<u>Male and Female %</u>
25	0.0568%
30	0.0794%
35	0.1137%
40	0.1591%
45	0.2842%
50	0.5227%
55	0.9318%
60	1.4091%

Marriage Assumption

It is assumed that 90% of active participants are married, with males three years older than their spouses.

Expenses

Administrative-related expenses for the previous year equal zero.

Assumption Bias

In the actuary's professional judgment, the combined effect of the assumptions herein is expected to have no significant bias (i.e., it is not significantly optimistic or pessimistic). This statement applies to assumptions and methods other than 1) those set by law and 2) those that the actuary has not selected and is unable to assess for reasonableness for the purpose of the measurement.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Changes Since Prior Year

Method Changes

There have been no method changes in the funding valuation since the prior year.

Assumption Changes - Funding

The valuation interest rates were changed to the 24-month segment rates for September 2024 from the 24-month segment rates for September 2023, each adjusted as applicable to fall within the 25-year average interest rate stabilization corridor.

The mortality assumption was changed to the 2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3) from the 2024 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3).

Other Assumption Changes - Funding

None.

Assumption Changes - ASC960

The valuation interest rate remained the same at 6.00%.

The Society of Actuaries kept mortality improvement rates unchanged from last year. Therefore, this plan's mortality assumption did not change and the mortality table used to value plan benefits remained as: Pri-2012 white collar worker table, projected forward generationally with the 2024 IRS adjusted mortality improvement scale MP-2021.

Other Assumption Changes - ASC960

None.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Actuarial Cost Method

Liabilities shown in this report are computed in accordance with the Pension Protection Act of 2006 and subsequent guidance issued by the Internal Revenue Service. The target normal cost is the present value of all benefits that have accrued or have been earned (or that are expected to accrue or to be earned) under the plan during the plan year. The funding target of the plan for the plan year is the present value of all benefits that have been accrued or earned under the plan as of the first day of the plan year.

The benefits taken into account in determining the funding target and target normal cost are all benefits earned or accrued under the plan, including retirement-type and ancillary benefits. The determination of the funding target and target normal cost is based on plan provisions that are adopted no later than the valuation date for the plan year and that become effective during that plan year.

Asset Valuation Method

Two-year smoothed value of plan assets determined in accordance with IRS Notice 2009-22.

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The actuarial assumptions summarized below are either prescribed by law, or when not prescribed by law, selected by the plan's actuary as the best predictor of future experience, based on all available prior experience and future expectations. For any assumption not prescribed by law or selected by the plan's actuary, the individual or organization selecting such assumption is identified separately, and the report will note if the actuary has any disagreement with the appropriateness of the assumption.

Three-Segment Interest Rates	<u>Years</u>	<u>ARPA</u>	<u>Pre-MAP21</u>
	1-5	5.07%	5.07%
	6-20	5.31%	5.33%
	21+	5.50%	5.36%

Effective Interest Rate	5.36%
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Mortality Table	2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3)
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Compensation Increases	None
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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

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50	0.40%
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60	0.00%

Turnover rates are further adjusted varying by service. For 0-2 years of service a 3.0 multiple of the T-2 value is used; for 2-5 years of service the multiple is 2.0; for 5-10 years of service the multiple is 1.5; 1.0 thereafter.

Retirement Rates

Representative rates, based on the heavy retirement table, are as follows:

Age	Male and Female %
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63	2.00%
64	2.00%
65	100.00%

Vested Terminated Participants are assumed to retire at age 60.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

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Representative rates are as follows:

<u>Age</u>	<u>Male and Female %</u>
25	0.0568%
30	0.0794%
35	0.1137%
40	0.1591%
45	0.2842%
50	0.5227%
55	0.9318%
60	1.4091%

Marriage Assumption

It is assumed that 90% of active participants are married, with males three years older than their spouses.

Expenses

Administrative-related expenses for the previous year equal zero.

Assumption Bias

In the actuary's professional judgment, the combined effect of the assumptions herein is expected to have no significant bias (i.e., it is not significantly optimistic or pessimistic). This statement applies to assumptions and methods other than 1) those set by law and 2) those that the actuary has not selected and is unable to assess for reasonableness for the purpose of the measurement.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Changes Since Prior Year

Method Changes

There have been no method changes in the funding valuation since the prior year.

Assumption Changes - Funding

The valuation interest rates were changed to the 24-month segment rates for September 2024 from the 24-month segment rates for September 2023, each adjusted as applicable to fall within the 25-year average interest rate stabilization corridor.

The mortality assumption was changed to the 2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3) from the 2024 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3).

Other Assumption Changes - Funding

None.

Assumption Changes - ASC960

The valuation interest rate remained the same at 6.00%.

The Society of Actuaries kept mortality improvement rates unchanged from last year. Therefore, this plan's mortality assumption did not change and the mortality table used to value plan benefits remained as: Pri-2012 white collar worker table, projected forward generationally with the 2024 IRS adjusted mortality improvement scale MP-2021.

Other Assumption Changes - ASC960

None.

Employees' Pension Plan of Red River Commodities, Inc.

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2025

Plan: 001

EIN: 45-0321457

(a)	(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Number of Transactions	Purchase Price	Selling Price	Lease Rental	Expenses Incurred with Transactions	Cost of Asset	Current Value of Asset on Transaction date	Net Gain or (Loss)
<i>Series in same security</i>									
Federated Government Obligations Premier	Money market fund	9	\$ 357,788	\$ -	\$ -	\$ -	\$ 357,788	\$ 357,788	\$ -
Federated Government Obligations Premier	Money market fund	14	-	320,731	-	-	320,731	320,731	-

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan EMPLOYEES PENSION PLAN OF RED RIVER COMMODITIES, INC.	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF RED RIVER COMMODITIES, INC.	D Employer Identification Number (EIN) 45-0321457
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2025			
2	Assets:			
a	Market value	2a	4,328,911	
b	Actuarial value	2b	4,134,568	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	10	1,741,030	1,741,030
b	For terminated vested participants	90	1,907,984	1,907,984
c	For active participants	28	1,095,423	1,097,642
d	Total	128	4,744,437	4,746,656
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.36%	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	0	
c	Target normal cost	6c	0	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE Delbert Zamora  Signature of actuary Delbert Zamora Type or print name of actuary PENTEGRA SERVICES, INC. Firm name 2261 Market Street SUITE 86302 San Francisco CA 94114 Address of the firm	07/10/2026 Date 2607322 Most recent enrollment number 864-370-5801 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>9.59</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		1,362
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.13</u> %		70
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		1,432
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III	Funding Percentages
----------	---------------------

14	Funding target attainment percentage.....	14	87.10 %
15	Adjusted funding target attainment percentage.....	15	87.10 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	87.98 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.....	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
04/10/2025	14,952	0					
07/09/2025	14,952	0					
12/18/2025	20,072	0					
01/14/2026	40,555	0					
			Totals ►	18(b)	90,531	18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.....	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	86,689

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☒ No

C If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost		
21	Discount rate:		
a	Segment rates:	1st segment: 5.07 % 2nd segment: 5.31 % 3rd segment: 5.50 %	☐ N/A, full yield curve used
b	Applicable month (enter code).....	21b	4
22	Weighted average retirement age	22	64
23	Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute		
Part VI	Miscellaneous Items		
24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
25	Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No		
26	Demographic and benefit information		
a	Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
b	Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...		☐ Yes ☒ No
27	If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	
Part VII	Reconciliation of Unpaid Minimum Required Contributions For Prior Years		
28	Unpaid minimum required contributions for all prior years	28	0
29	Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30	Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0
Part VIII	Minimum Required Contribution For Current Year		
31	Target normal cost and excess assets (see instructions):		
a	Target normal cost (line 6c).....	31a	0
b	Excess assets, if applicable, but not greater than line 31a	31b	0
32	Amortization installments:	Outstanding Balance	Installment
a	Net shortfall amortization installment	612,088	67,573
b	Waiver amortization installment	0	0
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....		34 67,573
35	Balances elected for use to offset funding requirement	0	0
36	Additional cash requirement (line 34 minus line 35).....		36 67,573
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37 86,689
38	Present value of excess contributions for current year (see instructions)		
a	Total (excess, if any, of line 37 over line 36)		38a 19,116
b	Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b 0
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39 0
40	Unpaid minimum required contributions for all years		40 0
Part IX	Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)		
41	If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021		

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, line 19 - Discounted Employer Contributions
(EIN: 45-0321457/PN: 001)

Date	Applicable Plan Year	Amount of Contribution	Amount of Contribution that is Timely	Effective Interest Rate for Timely Contributions	Discount Period for Timely Contributions	Amount of Contribution for Late Quarterly Installment	Effective Interest Rate for Late Quarterly Installments	Discount Period for Late Quarterly not subject to Penalty Interest	Discount Period for Late Quarterly Penalty Interest	Interest Adjusted Contribution
04/10/2025	1/1/2025	14,952	14,952	5.36%	0.27123	0	10.36%	0.00000	0.00000	14,742
07/09/2025	1/1/2025	14,952	14,952	5.36%	0.51781	0	10.36%	0.00000	0.00000	14,553
12/18/2025	1/1/2025	20,072	5,120	5.36%	0.96164	14,952	10.36%	0.78630	0.17534	18,974
01/14/2026	1/1/2025	40,555	40,555	5.36%	1.03562	0	10.36%	0.00000	0.00000	38,420
	Total	90,531								86,689

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, line 22 - Description of Weighted
Average Retirement Age (EIN: 45-0321457/PN: 001)**

Retirement Rates

Calculation of expected retirement age:

Age	Probability of Retirement	lx	Number of Retirement	Rate of Retirement	Weighted Retirement
55	2.00%	1,000,000	20,000	2.00%	1.1000
56	2.00%	980,000	19,600	1.96%	1.0976
57	2.00%	960,400	19,208	1.92%	1.0949
58	2.00%	941,192	18,824	1.88%	1.0918
59	2.00%	922,368	18,447	1.84%	1.0884
60	2.00%	903,921	18,078	1.81%	1.0847
61	2.00%	885,842	17,717	1.77%	1.0807
62	5.00%	868,126	43,406	4.34%	2.6912
63	2.00%	824,719	16,494	1.65%	1.0391
64	2.00%	808,225	16,164	1.62%	1.0345
65	100.00%	792,060	792,060	79.21%	51.4839

Expected Retirement Age

63.8869

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, line 26 - Schedule of Active Participant Data
(EIN: 45-0321457/PN: 001)**

Age	Years of Credited Service									
	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.	Avg. No. Comp.
< 25	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0
40-44	0	0	2	0	0	0	0	0	0	0
45-49	1	2	2	0	0	0	0	0	0	0
50-54	1	1	3	2	0	0	0	0	0	0
55-59	0	0	1	1	2	1	0	0	0	0
60-64	0	0	1	0	0	2	0	0	0	0
65-69	0	2	0	0	0	1	0	0	0	0
> 69	0	0	1	2	0	0	0	0	0	0
Total	2	5	10	5	2	4	0	0	0	0

Grand Total: 28

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Line 32 - Schedule of Amortization Bases (EIN: 45-0321457/PN: 001)

The shortfall amortization base equals the funding shortfall minus the present value of the shortfall amortization installments from previous years. The shortfall amortization installment ("SAI") is the shortfall amortization base amortized in level annual installments over fifteen years. A plan is exempt from establishing a shortfall amortization base/installment if the adjusted plan assets are at least 100% of the funding target in 2025. If plan assets, reduced by the funding balances, exceed the funding target, then prior years' funding shortfalls are considered fully amortized and the target normal cost is reduced by the excess.

1. Funding shortfall as of January 1, 2025 (Applicable percentage = 100%) 612,088
2. 15-year funding shortfall amortization factor 10.72495
3. Present value of prior years' funding shortfall amortization installments

(a.) <u>Year Established</u>	(b.) <u>SAI</u>	(c.) <u>Present Value Factor</u>	(d.) <u>Present Value of SAI</u>
2024	(17,491)	10.24030	(179,113)
2023	48,384	9.72992	470,772
2022	(21,700)	9.19244	(199,476)
2021	50,613	8.62642	436,609
	59,806		528,792

4. 2025 Shortfall amortization base (1.) - (3.d.) 83,296
5. 2025 Shortfall amortization installment (4.) / (2.) 7,767
6. 2025 Total shortfall amortization charge (3.b.) + (5.) not less than \$0 67,573

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Actuarial Cost Method

Liabilities shown in this report are computed in accordance with the Pension Protection Act of 2006 and subsequent guidance issued by the Internal Revenue Service. The target normal cost is the present value of all benefits that have accrued or have been earned (or that are expected to accrue or to be earned) under the plan during the plan year. The funding target of the plan for the plan year is the present value of all benefits that have been accrued or earned under the plan as of the first day of the plan year.

The benefits taken into account in determining the funding target and target normal cost are all benefits earned or accrued under the plan, including retirement-type and ancillary benefits. The determination of the funding target and target normal cost is based on plan provisions that are adopted no later than the valuation date for the plan year and that become effective during that plan year.

Asset Valuation Method

Two-year smoothed value of plan assets determined in accordance with IRS Notice 2009-22.

Actuarial Assumptions

The actuarial assumptions summarized below are either prescribed by law, or when not prescribed by law, selected by the plan's actuary as the best predictor of future experience, based on all available prior experience and future expectations. For any assumption not prescribed by law or selected by the plan's actuary, the individual or organization selecting such assumption is identified separately, and the report will note if the actuary has any disagreement with the appropriateness of the assumption.

Three-Segment Interest Rates	<u>Years</u>	<u>ARPA</u>	<u>Pre-MAP21</u>
	1-5	5.07%	5.07%
	6-20	5.31%	5.33%
	21+	5.50%	5.36%

Effective Interest Rate	5.36%
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Mortality Table	2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3)
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Compensation Increases	None
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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Termination Rates

Actuaries Pension Handbook, Table T-2, varying by age.

Representative rates are as follows:

Age	Male and Female %
25	5.29%
30	5.07%
35	4.70%
40	3.50%
45	1.77%
50	0.40%
55	0.00%
60	0.00%

Turnover rates are further adjusted varying by service. For 0-2 years of service a 3.0 multiple of the T-2 value is used; for 2-5 years of service the multiple is 2.0; for 5-10 years of service the multiple is 1.5; 1.0 thereafter.

Retirement Rates

Representative rates, based on the heavy retirement table, are as follows:

Age	Male and Female %
55 - 61	2.00%
62	5.00%
63	2.00%
64	2.00%
65	100.00%

Vested Terminated Participants are assumed to retire at age 60.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Disability Rates

Representative rates are as follows:

<u>Age</u>	<u>Male and Female %</u>
25	0.0568%
30	0.0794%
35	0.1137%
40	0.1591%
45	0.2842%
50	0.5227%
55	0.9318%
60	1.4091%

Marriage Assumption

It is assumed that 90% of active participants are married, with males three years older than their spouses.

Expenses

Administrative-related expenses for the previous year equal zero.

Assumption Bias

In the actuary's professional judgment, the combined effect of the assumptions herein is expected to have no significant bias (i.e., it is not significantly optimistic or pessimistic). This statement applies to assumptions and methods other than 1) those set by law and 2) those that the actuary has not selected and is unable to assess for reasonableness for the purpose of the measurement.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (EIN: 45-0321457/PN: 001)

Changes Since Prior Year

Method Changes

There have been no method changes in the funding valuation since the prior year.

Assumption Changes - Funding

The valuation interest rates were changed to the 24-month segment rates for September 2024 from the 24-month segment rates for September 2023, each adjusted as applicable to fall within the 25-year average interest rate stabilization corridor.

The mortality assumption was changed to the 2025 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3) from the 2024 combined male and female static mortality tables for non-annuitants and annuitants per section 430(h)(3).

Other Assumption Changes - Funding

None.

Assumption Changes - ASC960

The valuation interest rate remained the same at 6.00%.

The Society of Actuaries kept mortality improvement rates unchanged from last year. Therefore, this plan's mortality assumption did not change and the mortality table used to value plan benefits remained as: Pri-2012 white collar worker table, projected forward generationally with the 2024 IRS adjusted mortality improvement scale MP-2021.

Other Assumption Changes - ASC960

None.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions (EIN: 45-0321457/PN: 001)

Plan Year	Through May 9, 1994, the twelve months commencing on May 10 th of each year and ending the following May 9 th . Short Plan Year from May 10, 1994 to December 31, 1994. Beginning January 1, 1995, the Plan Year shall commence on January 1 st of each year and end the following December 31 st .
Effective Date	May 10, 1976. Amended and restated effective January 1, 1995. Plan frozen effective January 1, 2008.
Eligibility Requirements	Completion of 12 months of service and attainment of age 21.
Entry Date	An eligible employee who satisfies the eligibility requirements will enter the plan on the January 1 st preceding the date on which the employee first satisfies such eligibility requirements. Participation was frozen effective January 1, 2008.
Compensation	Actual base earnings in effect during the year preceding the valuation date.
Average Earnings	Average of monthly base earnings for the 60 consecutive months of service out of the last 120 months preceding the date of benefit determination which produce the highest average.
Year of Service	For purposes of vesting and benefit accrual, a year of service shall be plan years in which 1,000 or more hours of service are completed, subject to certain break in service rules.
Accrued Benefit	Greater of (a) and (b) following: (a) 1.2% times final average compensation times total plan years of service. (b) The accrued benefit under the old plan as of December 31, 1994 (using final average compensation through March 31, 1995), plus 1.2% times final average compensation times plan years of service after December 31, 1994.
Normal Retirement Date	First day of the calendar month coincident with or next following his attainment of age 65 or fifth anniversary of the commencement of participation.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions (EIN: 45-0321457/PN: 001)

Normal Retirement Benefit	The accrued benefit as of the normal retirement date.
Early Retirement Eligibility	First day of the month after age 55 and 10 years of service.
Early Retirement Benefit	(a) at normal retirement date without reduction, or (b) at early retirement date reduced 2% for each year that the early retirement date precedes normal retirement date. For participants whose age plus years of benefit service is greater than or equal to 85, the accrued benefit is not reduced at the early retirement date.
Vesting	100% after completion of 5 years of vesting service.
Vested Termination Benefit	Accrued benefit at date of termination payable at normal retirement date.
Disability Benefit Eligibility	Total and Permanent Disablement.
Disability Benefit	Commences on termination of benefits under Employer's Long Term Disability Income Plan and computed as Actuarial Equivalent of accrued benefit based on service to date of termination from the LTD Plan and final average compensation at date of disablement.
Death Before Retirement	1. Prior to Eligibility for Early Retirement If a participant is entitled to a deferred benefit at date of death, surviving spouse will receive, at participant's early retirement date, a benefit computed assuming the participant had terminated on date of death and had elected a 50% Contingent Annuitant Option at early retirement date. 2. After Eligibility for Early Retirement Surviving spouse will receive a benefit computed assuming the participant had retired on the first of the month coinciding with or next following date of death with a 50% Contingent Annuitant Option.

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions
(EIN: 45-0321457/PN: 001)**

Death Benefit Eligibility	Qualified married participant fully or partially vested in an accrued benefit.
Normal Form of Benefit	Monthly annuity payable for life and guaranteed for a 10 year period thereafter during his lifetime.
Optional Forms of Benefit	Life Annuity, life annuity with period certain (5, 15, 20 years); Joint and Survivor annuity with 50%, 66 2/3%, 75% or 100% to beneficiary; Lump Sum.

Summary of Significant Plan Changes Since January 1, 2024

None

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, line 22 - Description of Weighted
Average Retirement Age (EIN: 45-0321457/PN: 001)**

Retirement Rates

Calculation of expected retirement age:

Age	Probability of Retirement	lx	Number of Retirement	Rate of Retirement	Weighted Retirement
55	2.00%	1,000,000	20,000	2.00%	1.1000
56	2.00%	980,000	19,600	1.96%	1.0976
57	2.00%	960,400	19,208	1.92%	1.0949
58	2.00%	941,192	18,824	1.88%	1.0918
59	2.00%	922,368	18,447	1.84%	1.0884
60	2.00%	903,921	18,078	1.81%	1.0847
61	2.00%	885,842	17,717	1.77%	1.0807
62	5.00%	868,126	43,406	4.34%	2.6912
63	2.00%	824,719	16,494	1.65%	1.0391
64	2.00%	808,225	16,164	1.62%	1.0345
65	100.00%	792,060	792,060	79.21%	51.4839

Expected Retirement Age

63.8869

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, line 19 - Discounted Employer Contributions
(EIN: 45-0321457/PN: 001)

[illegible]

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, line 19 - Discounted Employer Contributions
(EIN: 45-0321457/PN: 001)

[illegible]

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

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Average Retirement Age (EIN: 45-0321457/PN: 001)**

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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions (EIN: 45-0321457/PN: 001)

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Employees' Pension Plan of Red River Commodities, Inc.

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2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions (EIN: 45-0321457/PN: 001)

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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions
(EIN: 45-0321457/PN: 001)**

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Summary of Significant Plan Changes Since January 1, 2024

None

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

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Employees' Pension Plan of Red River Commodities, Inc.

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Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

**2025 Form 5500 Schedule SB, Part V - Summary of Plan Provisions
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Summary of Significant Plan Changes Since January 1, 2024

None

Employees' Pension Plan of Red River Commodities, Inc.

Schedule H, Line 4i - Schedule of Assets Held at End of Year

December 31, 2025

EIN: 45-0321457

Plan: 001

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Federated Government Obligations Premier	Money market mutual fund	\$ 81,366	\$ 81,366
	DRZ Value Equity Collective Fund	Common collective trust	114,855	256,488
	American Funds Europacific Growth Fund Class R-6	Mutual fund	174,796	185,053
	Harding Loevner International Equity Institutional Z	Mutual fund	165,728	183,035
	JPMorgan Large Cap Growth Fund R6	Mutual fund	149,373	247,341
	LSV Value Equity Fund	Mutual fund	256,341	255,006
	Dodge & Cox International Stock	Mutual fund	124,916	187,340
	Neuberger Berman Genesis Fund Class R6	Mutual fund	72,713	68,116
	T. Rowe Price Institutional Large Cap Growth	Mutual fund	145,996	253,301
	Vanguard 500 Index Admiral Shares	Mutual fund	112,469	277,214
	Vanguard Mid Cap Index Fund Admiral Shares	Mutual fund	112,646	215,709
	BlackRock Advantage Small Cap Core Fund K	Mutual fund	78,141	79,178
	Fuller & Thaler Behavioral Small Cap Equity Fund R-6	Mutual fund	59,003	76,907
	Dodge & Cox Income Fund	Mutual fund	537,144	511,831
	DoubleLine Total Return Bond I	Mutual fund	585,479	509,323
	Loomis Sayles Core Plus Bond N	Mutual fund	553,708	509,604
	Metropolitan West Total Return Bond Plan	Mutual fund	575,429	509,867
	Total mutual funds		3,703,882	4,068,825
	Total investments at fair value		\$ 3,900,103	\$ 4,406,679

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Line 32 - Schedule of Amortization Bases (EIN: 45-0321457/PN: 001)

The shortfall amortization base equals the funding shortfall minus the present value of the shortfall amortization installments from previous years. The shortfall amortization installment ("SAI") is the shortfall amortization base amortized in level annual installments over fifteen years. A plan is exempt from establishing a shortfall amortization base/installment if the adjusted plan assets are at least 100% of the funding target in 2025. If plan assets, reduced by the funding balances, exceed the funding target, then prior years' funding shortfalls are considered fully amortized and the target normal cost is reduced by the excess.

1. Funding shortfall as of January 1, 2025 (Applicable percentage = 100%) 612,088
2. 15-year funding shortfall amortization factor 10.72495
3. Present value of prior years' funding shortfall amortization installments

(a.) <u>Year Established</u>	(b.) <u>SAI</u>	(c.) <u>Present Value Factor</u>	(d.) <u>Present Value of SAI</u>
2024	(17,491)	10.24030	(179,113)
2023	48,384	9.72992	470,772
2022	(21,700)	9.19244	(199,476)
2021	50,613	8.62642	436,609
	59,806		528,792

4. 2025 Shortfall amortization base (1.) - (3.d.) 83,296
5. 2025 Shortfall amortization installment (4.) / (2.) 7,767
6. 2025 Total shortfall amortization charge (3.b.) + (5.) not less than \$0 67,573

Employees' Pension Plan of Red River Commodities, Inc.

Actuarial Valuation at 1/1/2025 for Plan Year 1/1/2025 to 12/31/2025

2025 Form 5500 Schedule SB, Line 32 - Schedule of Amortization Bases (EIN: 45-0321457/PN: 001)

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