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

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
AFFILIATED PENSION PLAN

1b Three-digit plan number (PN) ▶ 005

1c Effective date of plan 01/01/1991

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)
PETRO-HUNT, L.L.C.

2101 CEDAR SPRINGS ROAD
STE 600
DALLAS, TX 75201

2b Employer Identification Number (EIN) 75-2756884

2c Plan Sponsor's telephone number 214-880-8400

2d Business code (see instructions) 211130

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2026	SUSIE SKIDMORE
	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 [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	387
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	81
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	75
b	Retired or separated participants receiving benefits	**6b**	124
c	Other retired or separated participants entitled to future benefits	**6c**	69
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	268
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	14
f	Total. Add lines **6d** and **6e**.	**6f**	282
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**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

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **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

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
AFFILIATED PENSION PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
PETRO-HUNT, L.L.C.

D Employer Identification Number (EIN)
75-2756884

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [X] 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**	95684809
b Actuarial value	**2b**	95684809

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	237	54436985	54436985
b For terminated vested participants	75	6809729	6809729
c For active participants	81	31260124	31858396
d Total	393	92506838	93105110

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**	5.34 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	1569964
b Expected plan-related expenses	**6b**	343059
c Target normal cost	**6c**	1913023

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

09/30/2026
Date

CORINNE RUSSELL
Type or print name of actuary

26-07037
Most recent enrollment number

MANULIFE JOHN HANCOCK
Firm name

781-619-2000
Telephone number (including area code)

200 BERKELEY STREET
BOSTON, MA 02116
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

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 6.33 %	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)		436360
	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 5.18 %		22603
	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		458963
	d Portion of (c) to be added to prefunding balance		
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	102.77 %
15	Adjusted funding target attainment percentage	15	102.77 %
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	100.68 %
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
			Totals ► 18(b)	0	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	0

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: 5.00 %	2nd segment: 5.27 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
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**	1913023
b Excess assets, if applicable, but not greater than line 31a	**31b**	1913023

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
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**	0

	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**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**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
AFFILIATED PENSION PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
PETRO-HUNT, L.L.C.

D Employer Identification Number (EIN)
75-2756884

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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)

RTW FINANCIAL ADVISORS

14114 DALLAS PKWY
#530
DALLAS, TX 75254-1346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	RETAINED BY CLIENT	183857	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

JOHN HANCOCK RETIRMENT PLAN SRVCS

01-0233346

(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?
11 15 62 64	RETAINED BY EMPLOYER	127805	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

OCTOBER THREE CONSULTING

233 S WACKER DR STE 8350
CHICAGO, IL 60606

(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?
17	RETAINED BY EMPLOYER	50000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

BROOKMONT CAPITAL MANAGEMENT LLC

26-0704921

(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?
17	RETAINED BY EMPLOYER	46501	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MOSS ADAMS LLP

91-0189318

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	RETAINED BY EMPLOYER	27951	Yes [ ] No [X]	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

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(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 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
AFFILIATED PENSION PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
PETRO-HUNT, L.L.C.

D Employer Identification Number (EIN)
75-2756884

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	1794835	4005156
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	757090	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	30812	55354
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	5820675	3989089
(2) U.S. Government securities	1c(2)	10345808	8863893
(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)	16565960	16352480
(5) Partnership/joint venture interests	1c(5)	39846914	33277002
(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)		
(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)	20632110	22519374
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	154245	152676

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(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	95948449	89215024
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h	253749	427185
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	253749	427185
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	95694700	88787839

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)	0	
(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)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	203046	
(B) U.S. Government securities	2b(1)(B)	1195388	
(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)		1398434
(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)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	884535	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		884535

		(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)		
c Other income	2c		2893366
d Total income. Add all **income** amounts in column (b) and enter total	2d		5176335
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5047485	
(2) To insurance carriers for the provision of benefits	2e(2)	6589663	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		11637148
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)	127805	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	27951	
(5) Investment advisory and investment management fees	2i(5)	183857	
(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)	106435	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		446048
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		12083196
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-6906861
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] 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: BAKER TILLY US, LLP **(2)** EIN: 30-1413443

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e Was this plan covered by a fidelity bond?	4e	X		20000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 586790.

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
AFFILIATED PENSION PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500
PETRO-HUNT, L.L.C.

D Employer Identification Number (EIN)
75-2756884

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): 80-0709115

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**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

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

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

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

Report of Independent Auditors and
Financial Statements with
Supplemental Schedule

Affiliated Pension Plan

December 31, 2025 and 2024

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Report of Independent Auditors

The Plan Administrative Committee of
Affiliated Pension Plan

Report on the Audit of the Financial Statements

Opinion

We have audited the financial statements of Affiliated Pension Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for 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 related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of Affiliated Pension Plan as of December 31, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended in accordance with accounting principles generally accepted in the United States of America (GAAP).

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 Affiliated Pension Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

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 Affiliated Pension Plan's ability to continue as a going concern within 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.

Baker Tilly Advisory Group, LP and Baker Tilly US, LLP, trading as Baker Tilly, are members of the global network of Baker Tilly International Ltd., the members of which are separate and independent legal entities. Baker Tilly US, LLP is a licensed CPA firm that provides assurance services to its clients. Baker Tilly Advisory Group, LP and its subsidiary entities provide tax and consulting services to their clients and are not licensed CPA firms.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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 Affiliated Pension Plan's internal control. Accordingly, no such opinion is expressed.
- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Affiliated Pension Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) as of December 31, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the 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.

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

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

Baker Tilly US, LLP

Dallas, Texas
October 13, 2026

Financial Statements

Affiliated Pension Plan
Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
ASSETS		
Cash and cash equivalents	$ 4,062,304	$ 1,820,547
Investments, at fair value	86,369,569	94,702,509
Accrued interest and dividends	55,354	30,812
Contribution receivable	-	757,090
Total assets	90,487,227	97,310,958
LIABILITIES		
Accounts payable	433,280	257,384
NET ASSETS AVAILABLE FOR BENEFITS	$ 90,053,947	$ 97,053,574

See accompanying notes.

Affiliated Pension Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2025 and 2024

	2025	2024
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment income		
Dividends and interest income	$ 1,418,388	$ 1,079,370
Limited partnership operating income	3,182,790	73,448
Net appreciation in fair value of investments	897,156	4,692,096
Oil and gas royalty income	67,337	83,097
Total investment income	5,565,671	5,928,011
Employer contributions	-	2,138,142
Total additions	5,565,671	8,066,153
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Benefits paid to participants	5,098,128	4,766,693
Benefits paid to insurance carrier	7,014,757	-
General and administrative expenses	452,413	436,812
Total deductions	12,565,298	5,203,505
NET CHANGE IN NET ASSETS AVAILABLE FOR BENEFITS	(6,999,627)	2,862,648
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	97,053,574	94,190,926
End of year	$ 90,053,947	$ 97,053,574

See accompanying notes.

Note 1 – Description of Plan

The following description of the Affiliated Pension Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General – The Plan was established and adopted in 1991 by Petro-Hunt, LLC (the Participating Employer), Pursue Energy Corporation, and Petrol Marine Corporation to provide retirement benefits to their employees. The Plan is a noncontributory defined benefit plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan established the Affiliated Pension Trust to hold the assets of the Plan. Petrol Marine Corporation was a participating employer until they ceased operations on August 31, 1992, at which time all employees became fully vested and Petro-Hunt assumed fiduciary responsibilities.

Pursue Energy Corporation ceased operations and terminated all employees on October 31, 2017. Effective December 31, 2017, the participants and plan assets of Pursue Energy Corporation were merged into the plan of Petro-Hunt, LLC.

Participation – Effective January 1, 2014, the Plan was placed under a soft freeze. Under the soft freeze, employees hired as of and subsequent to January 1, 2014, are not eligible to participate in the Plan. Prior to the soft freeze, substantially all employees of the Participating Employer who had attained the age of 21 years and had completed one year of service were automatically included in the Plan unless a contrary election was made.

Contributions – The Participating Employer is obligated to make contributions sufficient to provide for the necessary retirement benefits based on the actuarial method and assumptions described in Note 4. Any contributions, or lack thereof, made by the Participating Employer for the Plan years ended December 31, 2025 and 2024, were sufficient to meet the minimum funding requirements of ERISA but do not exceed the maximum deductible contribution under the Internal Revenue Code (IRC).

Administration – The Participating Employer has appointed an investment committee to manage the operation and administration of the Plan, and Bruce Hunt, Taylor Hunt, and James Mason as the trustees of the Plan. Administrative expenses, primarily consisting of investment and actuary fees, are paid by the Plan. Personnel costs are paid by the Participating Employer. The trustees have sole responsibility for asset management. The Plan's investment transactions are administered and controlled by the trustees.

Benefits – Under the Plan, monthly benefit payments for participants who retire at the normal retirement date at age 65 (single life option) are calculated as the greater of (1) the sum of (a) the product of 1.1% of the average monthly salary during the consecutive 60-month period of the final 120 months of employment prior to the date of retirement that produces the highest average times the number of years of credited service, plus (b) 0.3888% of the remainder of the participant's average monthly compensation, minus an amount determined for each participant equal to one-twelfth of the annual average of the taxable wage bases under the U.S. Social Security System for the 35 years ending with the year in which the participant reaches Social Security retirement age multiplied by one-twelfth of the number of completed months of credited services up to a maximum of 45; and (2) the participant's monthly accrued benefit under the Plan as of December 31, 1988, plus 1.1% of the participant's average monthly compensation multiplied by one-twelfth of the number of completed months of credited service after 1988.

Participants under the Plan become fully vested after completion of five years of service. In addition, participants at December 31, 1985, are fully vested as to accrued benefits accumulated to that date. Disability and early retirement pension benefits may also be payable after completion of ten years of service.

On November 7, 2025, the Plan entered into a group annuity contract with Mutual of America Life Insurance Company, a third-party insurance company, pursuant to which the Plan paid $7,014,757 to the insurance company in exchange for the insurance company's assumption of the obligation to make future annuity payments for certain Plan participants and beneficiaries who elected to be included in the annuity contract. As a result of the transaction, the Plan has no further obligation to provide benefits covered by the annuity contract to those participants and beneficiaries. The payment for the contract is recorded as benefits paid to insurance carriers on the statements of changes in net assets available for benefits.

Allocation of plan assets – Under Department of Labor Regulation 2510.3-101, *Definition of Plan Assets*, the assets of each of the separate plans participating in the Affiliated Pension Plan consist of their investment and undivided interest in each of the underlying assets held by the Affiliated Pension Trust, a group trust under 2510.3-101(h)(l)(i). Each plan's investment and undivided interest as of December 31, 2025 and 2024, are as follows:

	December 31, 2025	
	Undivided Interest	Total Net Assets
Petro-Hunt, L.L.C	99%	$ 88,787,839
Petrol Marine Corporation	1%	1,266,108
Total	100%	$ 90,053,947

	December 31, 2024	
	Undivided Interest	Total Net Assets
Petro-Hunt, L.L.C	99%	$ 95,694,700
Petrol Marine Corporation	1%	1,358,440
Total	100%	$ 97,053,140

The assets of the Affiliated Pension Plan are reported on a consolidated basis. The total net assets for each individual plan agrees with each plan's respective Form 5500 filed with the Department of Labor.

Note 2 – Summary of Significant Accounting Policies

Basis of accounting – The Plan's financial statements are prepared under the accrual method of accounting.

Use of estimates – The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect reported amounts of assets, liabilities, and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

A portion of the Plan's investments are in limited partnerships which invest primarily in privately held real estate and alternative investments. The fair value of these investments was determined by management as the Plan's pro rata share of the estimated fair value of each limited partnerships' equity. Amounts ultimately realized from each investment may vary significantly from the market values presented.

Investment valuation and income recognition – Marketable securities are valued at fair value on the basis of quoted market prices and, in the case of shares of mutual funds, net asset value. Investments in oil and gas royalty interest are valued at estimated fair value based on the present value of estimated future net revenues. Investment transactions are recorded on trade-date basis. Net appreciation in the fair value of investments is based on the fair value of the assets at the beginning of the Plan year or at the time of sale during the year. Interest income is recorded on the accrual basis. The Plan records dividends on the ex-dividend date. Oil and gas royalty income is recorded on the accrual basis. Contributions are recorded in the period in which the Participating Employer chooses to take the tax deduction under applicable Internal Revenue Service guidelines.

Payment of benefits – Benefits are recorded upon distribution and are paid on the first day of every month.

Expenses – The Plan's expenses are paid by the Plan, as specified in the Plan document. Expenses that are paid by the Participating Employer are excluded from these financial statements. Expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits.

Note 3 – Fair Value Measurements

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

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; and
- 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.

Equity securities (mutual funds and common stock) – Valued at the daily closing price as reported by the fund. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The funds held by the Plan are deemed to be actively traded. Mutual funds held by the Plan are open-end mutual funds that are registered with the U.S. Securities and Exchange. Common stock is valued at the closing price reported on the active market on which individual securities are traded.

Money market funds – Valued at the NAV of shares held by the Plan at year end.

Certificates of deposit – Valued using pricing models maximizing the use of observable inputs for similar securities which includes basing value on interest rates currently available on comparable securities of issuers with similar credit rating. When quoted prices are not available for identical or similar certificates, the certificates are valued under a discounted cash flow approach that maximizes observable inputs, such as current interest rates or similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Fixed-income bonds – Valued using pricing models maximizing the use of observable inputs for similar securities which includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, those corporate bonds are valued under a discounted cash flow approach that maximizes observable inputs, such as current yields or similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks.

Oil and gas royalties – Valued at the net present value of future cash flow of proved reserves.

Real estate and alternative investments – Real estate and alternative investments include ownership in various real estate and other limited partnership investments. These limited partnership investments are valued at the Plan's pro-rata share of the underlying fair value of the partnerships' net assets.

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

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

	Investments at Fair Value as of December 31, 2025			
	Level 1	Level 2	Level 3	Total
Equity securities	$39,426,510	$ -	$ -	$39,426,510
Money market funds	4,046,009	-	-	4,046,009
Fixed-income bonds	-	8,990,370	-	8,990,370
Real estate	-	-	9,803,689	9,803,689
Alternative investments	-	-	23,948,137	23,948,137
Oil and gas royalties	-	-	154,854	154,854
Total investments at fair value	$43,472,519	$ 8,990,370	$33,906,680	$86,369,569

	Investments at Fair Value as of December 31, 2024			
	Level 1	Level 2	Level 3	Total
Equity securities	$37,730,945	$ -	$ -	$37,730,945
Money market funds	5,677,961	-	-	5,677,961
Certificates of deposit	-	226,097	-	226,097
Fixed-income bonds	-	10,494,015	-	10,494,015
Real estate	-	-	11,643,173	11,643,173
Alternative investments	-	-	28,774,562	28,774,562
Oil and gas royalties	-	-	155,756	155,756
Total investments at fair value	$43,408,906	$10,720,112	$40,573,491	$94,702,509

The following table summarizes certain changes in the fair value of the Plan's Level 3 investments for the years ended December 31, 2025 and 2024:

	Real Estate	Alternative Investments	Oil and Gas Royalties	Total
Purchases during the year ended December 31, 2025	$ -	$ 757,142	$ -	$ 757,142
Purchases during the year ended December 31, 2024	$ 127,500	$ 2,089,029	$ -	$ 2,216,529

Note 4 – 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' compensation during their last five years of credited service. The accumulated plan benefits for active employees are based on their average compensation during the five years ending on the date as of 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 the Plan's consulting actuaries and are the amounts which result from applying actuarial assumptions to adjust accumulated plan benefits to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuations as of December 31, 2023, were (a) annual return on investments of 8%; (b) Pri-2012 Total Dataset Mortality Table with Scale MP-2021; and (c) probabilities of retirement for all remaining employees at the indicated age, as follows: age 60, 10%; age 61, 10%; age 62, 40%; age 63, 30%; age 64, 20%; and age 65 and over, 100%.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were 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 accumulated plan benefits were made as of January 1, 2025. Had the valuation been performed as of December 31, 2024, there would be no material differences.

A summary of the Plan's actuarial present value of accumulated plan benefits at December 31, 2024, is as follows:

Actuarial present value of accumulated plan benefits	
Vested benefits	
Retired employees and terminated employees with vested rights	$ 50,308,448
Active participants	23,558,924
Total vested benefits	73,867,372
Nonvested benefits	474,216
Total actuarial present value of accumulated plan benefits	$ 74,341,588

Changes in the Plan's actuarial present value of accumulated plan benefits for the year ended December 31, 2024, are as follows:

Actuarial present value of accumulated plan benefits for the year ended December 31, 2023	$ 72,120,280
Increase (decrease) during the year due to	
Additional benefits accumulated	1,405,378
Change in discount period	5,582,623
Benefits paid	(4,766,693)
Net increase	2,221,308
Actuarial present value of accumulated plan benefits for the year ended December 31, 2024	$ 74,341,588

The actuarial present value of accumulated plan benefits for Petro-Hunt's plan is $73,516,134 at December 31, 2024.

Note 5 – Funding Policy

Contributions by participants are not required or permitted by the Plan. The Participating Employer has voluntarily agreed to make contributions to the Plan sufficient to provide the Plan with assets to pay pension benefits to plan participants employed by them. The Participating Employer may terminate its pension plan agreement at any time (see Note 6).

The Participating Employer made the minimum required contribution of $2,138,142 to the Petro-Hunt plan during the year ended December 31, 2024. There were no required contributions for the plan year ending December 31, 2025.

Note 6 – Plan Termination

Although it has not expressed any intention to do so, the Participating Employer has the right under the Plan to discontinue its contributions at any time and to terminate or modify the Plan, subject to the provisions of ERISA.

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:

a) Annuity benefits former employees (or their beneficiaries) have been receiving for at least three years or 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 Plan provisions in effect at any time during the five years preceding plan termination;

b) Other benefits insured by the Pensions Benefit Guaranty Corporation (the PBGC), a U.S. governmental agency, up to the applicable limits (discussed below);

c) All other vested benefits; and

d) All other nonvested benefits.

Certain benefits under the Plan are insured by the 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. However, there is a statutory ceiling on the amount of an individual's monthly benefit that the PBGC guarantees. For Plan terminations occurring during 2026 that ceiling is $7,790 per month. The ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or Plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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 Participating Employer and the level of benefits guaranteed by the PBGC.

Note 7 – Tax Status

The Internal Revenue Service has determined and informed the Participating Employer by letter dated May 28, 2002, that the plan for Petrol Marine Corporation and related trust are designed in accordance with applicable sections of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. The Plan has been amended since receipt of the letter; however, the trustees believe that the Plan is designed and is currently operated in compliance with the applicable requirements of the IRC. The Internal Revenue Service has determined and informed the Participating Employer by letter dated December 2, 2015, that the plan for Petro-Hunt and related trust are designed in accordance with applicable sections of the IRC. The Plan has been amended since receipt of the letter; however, the trustees believe that the Plan is designed and is currently being 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.

In accordance with guidance on accounting for uncertainty in income taxes, the trustees have evaluated the Plan's tax positions and do not believe the Plan has any uncertain tax positions that require disclosure or adjustment to the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8 – Significant Risk and Uncertainties

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

The 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 estimate and assumption 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.

Note 9 – Party-in-Interest Transactions

The Plan paid expenses related to the Plan's operations and investment management to various service providers.

Note 10 – Reconciliation to Form 5500

The net assets available for benefits per the financial statements are reported on a consolidated basis as described in Note 1. The net assets available for benefits per the Form 5500 for the Petro-Hunt, LLC Affiliated Pension Plan is reported on Petro-Hunt's undivided interest of the Plan's assets as of December 31, 2025. The net assets available for benefits per Form 5500 is $88,787,839, which agrees to Petro-Hunt's undivided interest of net assets available for benefits as disclosed in Note 1. The Form 5500 for the Petro-Hunt, LLC Affiliated Pension Plan has certain items that differ from amounts shown on the accompanying financial statements. These differences relate to classification only and have no effect upon net assets available for benefits for either period.

Note 11 – Subsequent Events

We have evaluated subsequent events through October 13, 2026, the date that these financial statements were available for issuance.

Supplemental Schedule

Affiliated Pension Plan
Employer Identification Number: 75-2756884 Plan #: 005
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Money market funds				
	Bank of East Asia	Money market fund	$ 16	$ 16	$ 16
	Centennial Bank	Money market fund	16	16	16
	Citibank N.A.	Money market fund	224,009	224,009	220,874
	ConnectOne Bank	Money market fund	16	16	16
	East West Bank	Money market fund	16	16	16
	Fidelity Government Cash Reserves	Interest bearing cash, 3.5% interest	375,234	375,234	369,982
	First Bank NJ	Money market fund	17	17	17
	Merrick Bank	Money market fund	16	16	16
	Pacific Western Bank	Money market fund	17	17	17
	Peapack-Gladstone Bank	Money market fund	17	17	17
	Pinnacle Bank	Money market fund	16	16	16
	Plains Capital Bank	Money market fund	248,232	248,232	244,758
	Poppy Bank	Money market fund	16	16	16
	Third Coast Bank SSB	Money market fund	16	16	16
	TriState Capital Bank	Money market fund	354,402	354,402	349,441
	Truist Bank	Money market fund	16	16	16
	Western Alliance Bank	Money market fund	9	9	9
	JPMorgan	Interest bearing cash, 1.7% interest	2,843,928	2,843,928	2,804,120
	Total money market funds		4,046,009	4,046,009	3,989,379
	Mutual funds				
	American Century Equity Income Fund	15,143 shares	126,119	128,111	126,318
	American Mutual Fund CL F2	29,684 shares	1,347,428	1,764,686	1,739,986
	American FDS Growth Fund of America Fund F2	19,035 shares	1,152,775	1,524,906	1,503,562
	American FDS New World FD CL F2	7,781 shares	498,509	722,710	712,594
	American Fundamental Invest Fund F2	16,456 shares	1,114,132	1,511,513	1,490,357
	American Funds Washington Mutual F2	32,455 shares	1,681,564	2,112,478	2,082,910
	Columbia Contrarian Core FD CL I	46,966 shares	1,372,984	1,818,058	1,792,611
	Dodge & Cox Stock Fund	155,146 shares	1,620,250	2,573,869	2,537,843
	PrimeCap Odyssey Growth Fund	63,650 shares	2,183,011	2,336,599	2,303,894
	T Rowe Price Equity Income Fund	3,603 shares	103,654	139,041	137,095
	Vanguard Small Cap Value Index Admiral	11,204 shares	662,092	1,189,007	1,172,365
	Vanguard Small Cap Growth Index Admiral	13,115 shares	673,246	1,193,768	1,177,059
	Vanguard Total Stock Mkt Idx Adm	22,414 shares	2,105,271	3,658,030	3,606,829
	Vanguard Mid Cap Index Admiral	2,939 shares	499,841	1,056,337	1,041,553
	Vanguard High Dividend Yield Index Adm	3,676 shares	102,920	159,046	156,821
	Vanguard International Growth Adm	8,356 shares	822,018	952,540	939,208
	Total mutual funds		16,065,814	22,840,699	22,521,005

Affiliated Pension Plan
Employer Identification Number: 75-2756884 Plan #: 005
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Common stocks				
	Abbott Laboratories	1,997 shares	202,271	250,204	246,702
	Accenture PLC	594 shares	185,454	159,370	157,139
	Analog Devices Inc.	709 shares	109,675	192,281	189,590
	Arthur J Gallagher & Co	822 shares	167,312	212,725	209,748
	Aztrazeneca PLC	3,122 shares	221,480	287,006	282,989
	Bank of America NT&SA	3,703 shares	125,324	203,665	200,814
	Bridgeway Blue Chip 35 Index	119,690 shares	1,260,380	1,826,472	1,800,907
	Chevron Corporation	6,278 shares	801,133	956,830	943,437
	Comcast UK Cable	5,113 shares	187,518	152,828	150,689
	Conoco Phillips	12,657 shares	786,185	1,184,822	1,168,238
	Dupont De Nemours Inc	3,270 shares	188,073	131,454	129,614
	Eastman Chem Co	799 shares	75,452	51,000	50,286
	Equinix Inc Com	176 shares	140,296	134,844	132,957
	Enterprise Products Partners	34,852 shares	1,035,455	1,117,355	1,101,716
	Evergy Inc	897 shares	62,651	65,024	64,114
	ExxonMobil Corporation	6,875 shares	488,852	827,338	815,758
	Gilead Sciences Inc	2,671 shares	179,891	244,007	240,592
	Home Depot Inc	633 shares	187,441	217,815	214,766
	Honeywell International Inc	1,042 shares	200,122	203,284	200,439
	Ishares Silver Trust	19,000 shares	250,004	1,223,980	1,206,848
	Johnson & Johnson	483 shares	78,729	99,957	98,558
	JPMorgan Chase Bank	899 shares	102,539	289,676	285,621
	Kayne Anderson BDC, Inc.	124,724 shares	689,297	1,786,033	1,761,034
	L3Harris Technologies Inc.	982 shares	227,950	288,286	284,251
	McDonalds Corp	734 shares	187,566	224,332	221,192
	Microchip Technology Inc.	1,900 shares	79,061	121,068	119,373
	Microsoft Corporation	541 shares	187,559	261,638	257,976
	Netease Inc.	580 shares	81,936	79,820	78,703
	Novo Nordisk	4,299 shares	284,092	218,733	215,671
	Pepsico Inc	719 shares	125,304	103,191	101,747
	Phillips 66	7,110 shares	656,092	917,474	904,632
	PNC Financial Services Group	782 shares	125,300	163,227	160,942
	Procter & Gamble Company	1,325 shares	187,726	189,886	187,228
	Qnity Electronics Inc.	1,635 shares	109,647	133,498	131,629
	Raytheon Technologies Corp	552 shares	50,900	101,237	99,820
	Sempra Com	860 shares	62,593	75,929	74,866
	Shell	3,283 shares	182,634	241,235	237,858
	Solstice Advanced Materials Inc.	1,752 shares	79,087	85,112	83,921
	SPDR Gold Trust	2,000 shares	288,680	792,620	781,526
	United Parcel Service	1,152 shares	215,836	114,267	112,668
	US Bancorp	3,915 shares	165,394	208,904	205,980
	Waste Management Inc.	731 shares	160,873	160,608	158,360
	Wells Fargo & Co	3,077 shares	135,157	286,776	282,761
	Total Common stocks		11,318,921	16,585,811	16,353,660

Affiliated Pension Plan
Employer Identification Number: 75-2756884 Plan #: 005
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Fixed income bonds				
	United States Treasury Bills	Due 01/13/2026	8,974,319	8,990,370	8,864,533
	Total certificates of deposit		8,974,319	8,990,370	8,864,533
	Oil and gas royalty interests and other		154,854	154,854	152,687
	Limited partnership interests				
	Backcast Credit Opportunities Fund I, LP		1,479,015	1,670,075	1,646,699
	Encap Energy Capital Legacy Fund VIII LP		33,995	73,251	72,226
	Energy Spectrum Partners VI LP		8,495	7,680	7,573
	GoldenTree Distressed Debt Fund LP		722,898	397,863	392,294
	Encap Energy Capital Fund IX		380,709	675,266	665,814
	JMC Platform Fund I-B-LP		4,533,778	2,719,656	2,681,589
	Tailwater Energy Fund II LP		911,074	772,815	761,998
	Golden Tree Distressed Debt 2014 (Cayman) LP		495,114	464,570	458,067
	Energy Spectrum Partners VII LP		155,275	676,756	667,284
	Kayne Senior Credit II Offshore		200,740	130,895	129,063
	Encap Energy Capital Fund X-C		698,545	604,363	595,904
	Kayne Anderson Real Estate Partners IV, LP		1,466,130	936,284	923,179
	Encap Flatrock Midstream Fund III-C, LP		675,242	610,893	602,342
	Kayne Partners Fund IV (QP) LP		2,627,019	3,287,095	3,241,086
	LKCM Headwater II Sidecar Partnership LP		1,928,068	3,209,520	3,164,597
	Kayne Anderson Real Estate Partners V, L.P.		2,131,287	2,126,309	2,096,547
	Kayne Senior Credit III Offshore		1,601,223	1,425,754	1,405,798
	Velocis Secondary Partners II, LP		450,364	791,318	780,242
	Kayne Anderson Real Estate Debt IV LP		1,375,164	1,436,577	1,416,469
	Velocis Fund III, LP		1,195,581	538,202	530,669
	Buckhorn Minerals V LP		690,487	1,040,879	1,026,310
	IFRG Investors II, LP		59,674	59,572	58,738
	Invision Capital III-A LP		341,536	1,466,516	1,445,989
	Corbel Capital Partners SBIC II		511,546	609,550	601,018
	Kayne Commercial Real Estate Debt LP		4,225,580	3,974,999	3,919,361
	Backcast - BCAST 2022 - A Issuer		1,536,995	1,031,286	1,016,851
	KA Credit Advisors Holdco LLC		2,240	22,427	22,113
	Buckhorn Minerals VI LP		796,856	975,139	961,490
	Guardian FS Holdings LLC		1,000,000	1,193,403	1,176,699
	Buckhorn Minerals VI I LP		799,394	822,913	811,395
	Total limited partnership investments		33,034,024	33,751,826	33,279,404
	Total assets held for investment		$ 73,593,941	$ 86,369,569	$ 85,160,668

* Identified as a party-in-interest to the Plan.

Attachment to 2025 Form 5500
Schedule SB, line 26: schedule of active participant data

Plan name: Affiliated Pension Plan of Petro-Hunt, L.L.C. **EIN:** 75-2756884
Plan sponsor: Petro-Hunt, L.L.C. **PN:** 005

Schedule of active participant data

Years of credited service

	<1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	>40	Total
Attained Age											
<25											
25–29											
30–34				2							2
35–39				12	1						13
40–44				15	7	1					23
45–49				2	2	1					5
50–54				2		1	3				6
55–59				2		1	1		1		5
60–64				1	4	1		2	1	3	12
65–69				1	2	1	1	2	1	3	11
>70							1			3	4
Total				37	16	6	6	4	3	9	81

Plan name:	Affiliated Pension Plan of Petro-Hunt, L.L.C.	**EIN:**	75-2756884
Plan sponsor:	Petro-Hunt, L.L.C.	**PN:**	005

Actuarial cost method

Funding target and target normal cost

An actuarial cost method allocates the expected cost of a pension plan on a year-by-year basis. The primary objective is to accumulate enough assets prior to each participant's retirement to provide the promised pension benefits.

The Pension Protection Act of 2006 (PPA) requires plan sponsors to use the Traditional Unit Credit actuarial cost method in which the estimated accrued benefit is based on service and, if applicable, earnings as of the valuation date. The funding target is equal to the actuarial present value of all accrued benefits as of the valuation date. The target normal cost is the actuarial present value, as of the valuation date, of the expected increases in projected accrued benefits attributable to service expected to be completed during the plan year (i.e., if applicable, one year's salary growth is reflected in the determination of target normal cost).

For tax deduction purposes, the funding target may reflect the value of future pay increases on accrued benefits, if applicable.

PPA discounting method

The plan sponsor must choose between full yield curve spot rates or a segmented yield curve of 24-month average corporate bond rates. If the segmented yield curve is selected, the plan sponsor can use either the rates as of the month of the valuation or as of a lookback month, up to 4 months prior to the valuation date. If the full yield curve is selected, the rates as of the month of valuation must be used.

For purposes of this valuation, the following discounting method was used and is assumed to be approved by the plan sponsor:

January 2025 segment rates, adjusted so each segment rate is no less than the applicable minimum percentage* of the corresponding 25-year average segment rate for the calendar year that contains the first day of the plan year and no more than the applicable maximum percentage of that 25-year average segment rate. The 25-year average cannot be less than 5.0% prior to application of the corridor.**

Asset valuation method

Plan assets for purposes of this actuarial valuation are valued at their fair market value, including, if applicable, discounted receivable contributions.

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* Minimum is 95% through 2030, decreasing 5% per year beginning in 2031 until 70% is reached in 2035

** Maximum is 105% through 2030 and increasing 5% per year beginning in 2031 until 130% is reached in 2035

Plan name:	Affiliated Pension Plan of Petro-Hunt, L.L.C.	**EIN:**	75-2756884
Plan sponsor:	Petro-Hunt, L.L.C.	**PN:**	005

Actuarial assumptions

Actuarial assumptions

Economic Assumptions

PPA Segment Rates	Funding Target	Maximum Deductible and PBGC Funding Target
- Segment 1: Up to Year 5	5.00%	5.00%
- Segment 2: Years 5-20	5.27%	5.27%
- Segment 3: Years 20+	5.50%	5.40%

ASC 960 Assumed Investment Return 8.00%

Annual rates of increase:

- Salaries	4.00%
- Future Social Security wage bases	4.00%
- Statutory limits on compensation and benefits	N/A

Demographic Assumptions

Mortality:

- Funding Target / PBGC — IRS Generational Mortality Table for the Current Plan Year
- ASC 960 — Pri-2012 Total Dataset Mortality Table with Scale MP-2021

Termination: Group 1: Petro-Hunt Employees
150% of the Table T-5 from the Actuary's Pension Handbook over 1951 Group Annuity Mortality Table for male lives.
Specimen rates:

Age	Female
25	11.586%
40	7.725%
55	1.409%

Termination: Group 2: Former Pursue Employees
120% of the Table T-5 from the Actuary's Pension Handbook over 1951 Group Annuity Mortality Table for male lives.
Specimen rates:

Age	Female
25	9.269%
40	6.180%
55	1.127%

Disability: 1985 Pension Disability Table (male) Class 1
Illustrative annual rates of disability are as follows:

Age	Rate
25	0.038%
40	0.117%
50	0.358%
65	1.663%

Retirement: Probabilities of retirement were assumed as follows:

Age	Rate
60	10%
61	10%
62	40%
63	30%
64	20%
65 and over	100%

Miscellaneous Assumptions

Form of Payment: Life Annuity

Expenses: Equal to prior year's actual expenses from Schedule H

Percent Married: Males: 70%
Females: 70%

Spouse's Age: Wives assumed to be 3 years younger than husbands

Rationale for Significant Assumptions

Economic Assumptions

- **ASC 960 Discount Rate:** This assumption is based on the expected return on assets assumption selected by the client with input from their investment advisor. We believe the assumption is reasonable based on the 20-year historical risk premiums for the plan's current asset allocation.

- **Salary Increase:** This assumption is based on the plan sponsor's long-term expectation of salary increases. We believe that this is representative of anticipated future experience. In addition, based on discussions with the plan sponsor, significant changes in future salary growth or compensation practices are not expected.

Actuarial assumptions

Demographic Assumptions

- **ASC 960 Mortality**: The mortality base table and projection scale is based on the most recent mortality table and improvement scale published by the Society of Actuaries and in our judgement, adequately reflects expected mortality rates as of the measurement date. The most recent improvement scale is from 2021 and does not include mortality data affected by the COVID-19 pandemic. The SOA will continue to study emerging mortality experience and assess what mortality improvement scale options might be considered to be implemented in the future. As such, we have decided not to reflect any adjustments to the most recent mortality improvement scale. The plan's relatively small size would not support a credible mortality study.

- **Termination:** We believe that this experience is representative of anticipated future experience. Historically this assumption has not produced significant gains or losses for the plan. In addition, based on discussions with the plan sponsor, significant changes in termination patterns are not expected.

- **Retirement:** We believe that this experience is representative of anticipated future experience. Historically this assumption has not produced significant gains or losses for the plan. In addition, based on discussions with the plan sponsor, significant changes in retirement patterns are not expected.

Miscellaneous Assumptions

- **Expenses:** The assumption is based on the expectation of expenses to be paid out during the plan year, assuming expenses will be similar to the prior year.

- **Form of Payment:** All optional forms are actuarially equivalent, and the assumption is based on the normal form of payment.

- **Spouse's Age and Percent Married:** The employer does not have enough credible data to analyze spousal demographics. These assumptions are based on the actuary's experience with similar plans.

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

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
AFFILIATED PENSION PLAN

B Three-digit plan number (PN) ▶ 005

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
Petro-Hunt, L.L.C.

D Employer Identification Number (EIN)
75-2756884

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [X] 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**	95,684,809
b Actuarial value	**2b**	95,684,809

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	237	54,436,985	54,436,985
b For terminated vested participants	75	6,809,729	6,809,729
c For active participants	81	31,260,124	31,858,396
d Total	393	92,506,838	93,105,110

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**	5.34%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	1,569,964
b Expected plan-related expenses	**6b**	343,059
c Target normal cost	**6c**	1,913,023

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

Corinne Russell CR
Signature of actuary

September 30, 2026
Date

CORINNE RUSSELL
Type or print name of actuary

2607037
Most recent enrollment number

MANULIFE JOHN HANCOCK
Firm name

781-619-2000
Telephone number (including area code)

200 Berkeley Street

Boston MA 02116
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

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 6.33 %	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)		436,360
	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 5.18 %		22,603
	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		458,963
	d Portion of (c) to be added to prefunding balance		
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	102.77 %
15	Adjusted funding target attainment percentage	15	102.77 %
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	100.68 %
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
			Totals ► 18(b)	0	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	0

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
5.00 %	5.27 %	5.50%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
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**	1,913,023
b Excess assets, if applicable, but not greater than line 31a	**31b**	1,913,023

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
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**	0

	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**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
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

Attachment to 2025 Form 5500
Schedule SB, line 22: description of weighted average retirement age

Plan name: Affiliated Pension Plan of Petro-Hunt, L.L.C. **EIN:** 75-2756884
Plan sponsor: Petro-Hunt, L.L.C. **PN:** 005

Description of weighted average retirement age

Age	Expected Active Headcount	Retirement Rate	Expected Retirements	Weighted Age
60	30.8575	0.1000	3.0857	185.1448
61	28.2911	0.1000	2.8291	172.5756
62	25.9831	0.4000	10.3932	644.3807
63	17.1142	0.3000	5.1343	323.4590
64	16.6453	0.2000	3.3291	213.0595
65	18.9669	1.0000	18.9669	1,232.8486
66	3.0000	1.0000	3.0000	198.0000
67	1.0000	1.0000	1.0000	67.0000
68	1.0000	1.0000	1.0000	68.0000
69	2.0000	1.0000	2.0000	138.0000
70	0.0000	1.0000	0.0000	0.0000
71	3.0000	1.0000	3.0000	213.0000
72	1.0000	1.0000	1.0000	72.0000
Total			54.7383	3,527.4682
Average				64.44

Plan name:	Affiliated Pension Plan of Petro-Hunt, L.L.C.	**EIN:**	75-2756884
Plan sponsor:	Petro-Hunt, L.L.C.	**PN:**	005

Summary of plan provisions

Summary of plan provisions

Effective Date:	Original Plan: January 1, 1991	
Eligible Employee:	Any Employee who meets the Eligibility Requirements except employees whose employment is governed by the terms of a collective bargaining agreement, unless such agreement expressly provides for coverage in this plan.	
Eligibility Requirements:	An employee will become a participant on the first day of the month coincident with or next following attainment of age twenty-one (21) and completion of one (1) year of service. In no event shall an employee hired on or after January 1, 2014 become a participant in the plan. Additionally, no employee rehired on or after January 1, 2014 shall receive credit for any additional years of credited service.	
Plan Entry Date:	An Eligible Employee will enter the plan on the first day of the month following completion of the eligibility requirements. Plan entry is frozen as of January 1, 2014.	
Year of Service:	Eligibility:	1,000 hours in a computation period.
	Benefit Accrual:	Elapsed time from date of hire to date of termination.
	Vesting:	1,000 hours in a plan year
Normal Retirement Date:	First of the month coincident with or following the attainment of age 65 and 5 years of plan participation.	
Compensation:	Base compensation paid by the employer in the plan year including deferrals to Section 401(k) and 125 plans, bonuses, overtime and other special compensation.	
Average Monthly Compensation:	The average compensation received by a participant during the sixty (60) consecutive calendar months out of the last ten (10) years of service immediately prior to the date of determination which produces the highest average compensation.	

Summary of plan provisions

Normal Retirement Benefit:	A monthly retirement income payable for the participant's lifetime equal to 1.1% of Average Monthly Compensation plus 0.3888% of Average Monthly Compensation in excess of covered compensation, multiplied by the number of Years of Credited Service. The Years of Credited Service applied to the excess portion of the benefit is limited to forty-five (45) years. The benefit will be no less than the benefit accrued as of December 31, 1988 under the old formula, plus 1.1% of Average Monthly Compensation multiplied by credited service after 1988.
Normal Form of Benefit:	Single: Life Annuity Married: 100% Joint and Survivor Annuity
Optional Forms of Benefit:	(a) Joint and survivor annuity with 50%, 66⅔%, or 100% continuation to surviving spouse. (b) Single lump-sum payment if the lump-sum is less than $1,000. (c) Five (5)-year certain and life thereafter. (d) Ten (10)-year certain and life thereafter.
Accrued Benefit:	The Normal Retirement Benefit based on Average Compensation and Credited Service to date.
Early Retirement Benefit:	Eligibility: Age 55 with 10 Years of Vesting Service Benefit: The Normal Retirement Benefit reduced by 5/12% for each month the commencement date precedes age 62. However, below age 57, the reduction increases to 6/12% for each month the date precedes age 57.
Disability Benefit:	A participant who becomes totally and permanently disabled after completion of ten (10) years of vesting service is entitled to receive his accrued benefit with payments beginning immediately, actuarially reduced for early payment if the participant does not qualifies for Social Security Disability.

Summary of plan provisions

Death Benefit:	Upon the death of a vested employee with less than 10 Years of Service, a spouse's death benefit is payable, commencing at the employee's normal retirement date, based on the employee's accrued benefit payable in a 100% joint and survivor form. Upon the death of an employee with ten (10) years of service, an immediate benefit is payable to the spouse as if the employee had retired the day before his death, with a 100% joint and survivor benefit commencing immediately with no reduction for early retirement if the participant is over age 55. If death occurs before earliest retirement age, spouse may defer to participant's earliest retirement age or may commence an actuarially equivalent reduced benefit immediately.
Vesting:	100% vested after 5 Years of Service.

John Hancock Retirement Plan Services LLC provides administrative and/or recordkeeping services to sponsors or administrators of retirement plans as well as a platform of investment alternatives that is made available without regard to the individualized needs of any plan through an open-architecture platform. John Hancock Trust Company LLC provides trust and custodial services to such plans. Unless otherwise specifically stated in writing, John Hancock Retirement Plan Services LLC does not, and is not undertaking to, provide impartial investment advice or give advice in a fiduciary capacity.

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MS-PS 34391 01/22 46453

Affiliated Pension Plan
Employer Identification Number: 75-2756884 Plan #: 005
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Money market funds				
	Bank of East Asia	Money market fund	$ 16	$ 16	$ 16
	Centennial Bank	Money market fund	16	16	16
	Citibank N.A.	Money market fund	224,009	224,009	220,874
	ConnectOne Bank	Money market fund	16	16	16
	East West Bank	Money market fund	16	16	16
	Fidelity Government Cash Reserves	Interest bearing cash, 3.5% interest	375,234	375,234	369,982
	First Bank NJ	Money market fund	17	17	17
	Merrick Bank	Money market fund	16	16	16
	Pacific Western Bank	Money market fund	17	17	17
	Peapack-Gladstone Bank	Money market fund	17	17	17
	Pinnacle Bank	Money market fund	16	16	16
	Plains Capital Bank	Money market fund	248,232	248,232	244,758
	Poppy Bank	Money market fund	16	16	16
	Third Coast Bank SSB	Money market fund	16	16	16
	TriState Capital Bank	Money market fund	354,402	354,402	349,441
	Truist Bank	Money market fund	16	16	16
	Western Alliance Bank	Money market fund	9	9	9
	JPMorgan	Interest bearing cash, 1.7% interest	2,843,928	2,843,928	2,804,120
	Total money market funds		4,046,009	4,046,009	3,989,379
	Mutual funds				
	American Century Equity Income Fund	15,143 shares	126,119	128,111	126,318
	American Mutual Fund CL F2	29,684 shares	1,347,428	1,764,686	1,739,986
	American FDS Growth Fund of America Fund F2	19,035 shares	1,152,775	1,524,906	1,503,562
	American FDS New World FD CL F2	7,781 shares	498,509	722,710	712,594
	American Fundamental Invest Fund F2	16,456 shares	1,114,132	1,511,513	1,490,357
	American Funds Washington Mutual F2	32,455 shares	1,681,564	2,112,478	2,082,910
	Columbia Contrarian Core FD CL I	46,966 shares	1,372,984	1,818,058	1,792,611
	Dodge & Cox Stock Fund	155,146 shares	1,620,250	2,573,869	2,537,843
	PrimeCap Odyssey Growth Fund	63,650 shares	2,183,011	2,336,599	2,303,894
	T Rowe Price Equity Income Fund	3,603 shares	103,654	139,041	137,095
	Vanguard Small Cap Value Index Admiral	11,204 shares	662,092	1,189,007	1,172,365
	Vanguard Small Cap Growth Index Admiral	13,115 shares	673,246	1,193,768	1,177,059
	Vanguard Total Stock Mkt Idx Adm	22,414 shares	2,105,271	3,658,030	3,606,829
	Vanguard Mid Cap Index Admiral	2,939 shares	499,841	1,056,337	1,041,553
	Vanguard High Dividend Yield Index Adm	3,676 shares	102,920	159,046	156,821
	Vanguard International Growth Adm	8,356 shares	822,018	952,540	939,208
	Total mutual funds		16,065,814	22,840,699	22,521,005

Affiliated Pension Plan
Employer Identification Number: 75-2756884 Plan #: 005
Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Common stocks				
	Abbott Laboratories	1,997 shares	202,271	250,204	246,702
	Accenture PLC	594 shares	185,454	159,370	157,139
	Analog Devices Inc.	709 shares	109,675	192,281	189,590
	Arthur J Gallagher & Co	822 shares	167,312	212,725	209,748
	Aztrazeneca PLC	3,122 shares	221,480	287,006	282,989
	Bank of America NT&SA	3,703 shares	125,324	203,665	200,814
	Bridgeway Blue Chip 35 Index	119,690 shares	1,260,380	1,826,472	1,800,907
	Chevron Corporation	6,278 shares	801,133	956,830	943,437
	Comcast UK Cable	5,113 shares	187,518	152,828	150,689
	Conoco Phillips	12,657 shares	786,185	1,184,822	1,168,238
	Dupont De Nemours Inc	3,270 shares	188,073	131,454	129,614
	Eastman Chem Co	799 shares	75,452	51,000	50,286
	Equinix Inc Com	176 shares	140,296	134,844	132,957
	Enterprise Products Partners	34,852 shares	1,035,455	1,117,355	1,101,716
	Evergy Inc	897 shares	62,651	65,024	64,114
	ExxonMobil Corporation	6,875 shares	488,852	827,338	815,758
	Gilead Sciences Inc	2,671 shares	179,891	244,007	240,592
	Home Depot Inc	633 shares	187,441	217,815	214,766
	Honeywell International Inc	1,042 shares	200,122	203,284	200,439
	Ishares Silver Trust	19,000 shares	250,004	1,223,980	1,206,848
	Johnson & Johnson	483 shares	78,729	99,957	98,558
	JPMorgan Chase Bank	899 shares	102,539	289,676	285,621
	Kayne Anderson BDC, Inc.	124,724 shares	689,297	1,786,033	1,761,034
	L3Harris Technologies Inc.	982 shares	227,950	288,286	284,251
	McDonalds Corp	734 shares	187,566	224,332	221,192
	Microchip Technology Inc.	1,900 shares	79,061	121,068	119,373
	Microsoft Corporation	541 shares	187,559	261,638	257,976
	Netease Inc.	580 shares	81,936	79,820	78,703
	Novo Nordisk	4,299 shares	284,092	218,733	215,671
	Pepsico Inc	719 shares	125,304	103,191	101,747
	Phillips 66	7,110 shares	656,092	917,474	904,632
	PNC Financial Services Group	782 shares	125,300	163,227	160,942
	Procter & Gamble Company	1,325 shares	187,726	189,886	187,228
	Qnity Electronics Inc.	1,635 shares	109,647	133,498	131,629
	Raytheon Technologies Corp	552 shares	50,900	101,237	99,820
	Sempra Com	860 shares	62,593	75,929	74,866
	Shell	3,283 shares	182,634	241,235	237,858
	Solstice Advanced Materials Inc.	1,752 shares	79,087	85,112	83,921
	SPDR Gold Trust	2,000 shares	288,680	792,620	781,526
	United Parcel Service	1,152 shares	215,836	114,267	112,668
	US Bancorp	3,915 shares	165,394	208,904	205,980
	Waste Management Inc.	731 shares	160,873	160,608	158,360
	Wells Fargo & Co	3,077 shares	135,157	286,776	282,761
	Total Common stocks		11,318,921	16,585,811	16,353,660

Affiliated Pension Plan
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Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value	(f) Petro-Hunt 99%
	Fixed income bonds				
	United States Treasury Bills	Due 01/13/2026	8,974,319	8,990,370	8,864,533
	Total certificates of deposit		8,974,319	8,990,370	8,864,533
	Oil and gas royalty interests and other		154,854	154,854	152,687
	Limited partnership interests				
	Backcast Credit Opportunities Fund I, LP		1,479,015	1,670,075	1,646,699
	Encap Energy Capital Legacy Fund VIII LP		33,995	73,251	72,226
	Energy Spectrum Partners VI LP		8,495	7,680	7,573
	GoldenTree Distressed Debt Fund LP		722,898	397,863	392,294
	Encap Energy Capital Fund IX		380,709	675,266	665,814
	JMC Platform Fund I-B-LP		4,533,778	2,719,656	2,681,589
	Tailwater Energy Fund II LP		911,074	772,815	761,998
	Golden Tree Distressed Debt 2014 (Cayman) LP		495,114	464,570	458,067
	Energy Spectrum Partners VII LP		155,275	676,756	667,284
	Kayne Senior Credit II Offshore		200,740	130,895	129,063
	Encap Energy Capital Fund X-C		698,545	604,363	595,904
	Kayne Anderson Real Estate Partners IV, LP		1,466,130	936,284	923,179
	Encap Flatrock Midstream Fund III-C, LP		675,242	610,893	602,342
	Kayne Partners Fund IV (QP) LP		2,627,019	3,287,095	3,241,086
	LKCM Headwater II Sidecar Partnership LP		1,928,068	3,209,520	3,164,597
	Kayne Anderson Real Estate Partners V, L.P.		2,131,287	2,126,309	2,096,547
	Kayne Senior Credit III Offshore		1,601,223	1,425,754	1,405,798
	Velocis Secondary Partners II, LP		450,364	791,318	780,242
	Kayne Anderson Real Estate Debt IV LP		1,375,164	1,436,577	1,416,469
	Velocis Fund III, LP		1,195,581	538,202	530,669
	Buckhorn Minerals V LP		690,487	1,040,879	1,026,310
	IFRG Investors II, LP		59,674	59,572	58,738
	Invision Capital III-A LP		341,536	1,466,516	1,445,989
	Corbel Capital Partners SBIC II		511,546	609,550	601,018
	Kayne Commercial Real Estate Debt LP		4,225,580	3,974,999	3,919,361
	Backcast - BCAST 2022 - A Issuer		1,536,995	1,031,286	1,016,851
	KA Credit Advisors Holdco LLC		2,240	22,427	22,113
	Buckhorn Minerals VI LP		796,856	975,139	961,490
	Guardian FS Holdings LLC		1,000,000	1,193,403	1,176,699
	Buckhorn Minerals VI I LP		799,394	822,913	811,395
	Total limited partnership investments		33,034,024	33,751,826	33,279,404
	Total assets held for investment		$ 73,593,941	$ 86,369,569	$ 85,160,668

* Identified as a party-in-interest to the Plan.