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
INVARIANT CORPORATION EMPLOYEE STOCK OWNERSHIP PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 01/01/2023

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)
INVARIANT CORPORATION

4040 CHRIS DR SW SUITE 100
HUNTSVILLE, AL 35802

2b Employer Identification Number (EIN)
63-1274152

2c Plan Sponsor's telephone number
256-885-9794

2d Business code (see instructions)
541330

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.	10/15/2026	STACY RILEY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2026	STACY RILEY
	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**	164
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)**	152
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	188
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	21
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	209
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	209
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)**	157
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)**	194
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	8
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:

2I 2P 2Q 3I

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached 0
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached _____
- **(4)** [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 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
INVARIANT CORPORATION EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INVARIANT CORPORATION

D Employer Identification Number (EIN)
63-1274152

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

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

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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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
INVARIANT CORPORATION EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INVARIANT CORPORATION

D Employer Identification Number (EIN)
63-1274152

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1508964	281290
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	11278	27484
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	12613860	31668840
(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	14134102	31977614
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	35633776	34142461
1k Total liabilities (add all amounts in lines 1g through1j)	1k	35633776	34142461
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	-21499674	-2164847

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)	1861949	
(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)		1861949
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	9108	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		9108
(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)	19054980	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		19054980

		(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		75
d Total income. Add all **income** amounts in column (b) and enter total	2d		20926112
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4502	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		4502
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		1586723
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	60	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		60
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1591285
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		19334827
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: BRAND BLACKWELL & COMPANY, P.C. **(2)** EIN: 63-0861852

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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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

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

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

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

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

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

SCHEDULE R (Form 5500)

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
INVARIANT CORPORATION EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INVARIANT CORPORATION

D Employer Identification Number (EIN)
63-1274152

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): 42-0127290

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

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

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

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

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

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

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

6 a	Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b	Enter the amount contributed by the employer to the plan for this plan year	6b	
c	Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c	

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

Invariant Corporation
Employee Stock Ownership Plan
Financial Statements and
Supplemental Schedule
December 31, 2025 and 2024

BrandBlackwell
CERTIFIED PUBLIC ACCOUNTANTS

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Employee Stock Ownership Plan — December 31, 2025 and 2024

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BrandBlackwell
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITOR'S REPORT

Board of Directors, Invariant Corporation, as Plan Administrator
Invariant Corporation Employee Stock Ownership Plan
Huntsville, Alabama

Opinion

We have audited the accompanying financial statements of Invariant Corporation Employee Stock Ownership Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets (deficit) available for benefits as of December 31, 2025 and 2024 and the related statement of changes in net assets (deficit) available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets (deficit) available for benefits of Invariant Corporation Employee Stock Ownership Plan as of December 31, 2025 and 2024, and the changes in its net assets (deficit) available for benefits for the year ended December 31, 2025, in accordance with accounting principles generally accepted in the United States of America.

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

Responsibilities of Management for the Financial Statements

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

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 Invariant Corporation Employee Stock Ownership 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.

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 Invariant Corporation Employee Stock Ownership 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 Invariant Corporation Employee Stock Ownership 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 H, Line 4i – 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.



Brand, Blackwell & Company, P.C.
Certified Public Accountants

Huntsville, Alabama
October 15, 2026

STATEMENTS OF NET ASSETS (DEFICIT) AVAILABLE FOR BENEFITS

Invariant Corporation
Employee Stock Ownership Plan — December 31, 2025 and 2024

ASSETS

	2025			2024		
	Allocated	Unallocated	Total	Allocated	Unallocated	Total
Investment in Invariant Corporation common stock, at fair value	$ 3,803,214	$27,865,626	$ 31,668,840	$ 1,274,575	$ 11,339,285	$ 12,613,860
Employer contributions receivable	263,641	17,649	281,290	-	1,508,964	1,508,964
Cash and cash equivalents	27,484	-	27,484	11,278	-	11,278
Total assets	$ 4,094,339	$27,883,275	$ 31,977,614	$ 1,285,853	$ 12,848,249	$ 14,134,102

LIABILITIES

Accrued interest payable	$ -	$ -	$ -	$ -	$ 58,673	$ 58,673
ESOP Loan payable	-	34,142,461	34,142,461	-	35,575,103	35,575,103
Total liabilities	-	34,142,461	34,142,461	-	35,633,776	35,633,776
Net assets (deficit) available for benefits	$ 4,094,339	$ (6,259,186)	$ (2,164,847)	$ 1,285,853	$ (22,785,527)	$ (21,499,674)

The accompanying notes are an integral part of these financial statements.

STATEMENT OF CHANGES IN NET ASSETS (DEFICIT) AVAILABLE FOR BENEFITS

Invariant Corporation
Employee Stock Ownership Plan

For the year ended
December 31, 2025

	Allocated	Unallocated	Total
Additions to net assets attributed to:			
Investment income (loss):			
Net appreciation (depreciation) in fair value of investments	$ 1,925,422	$ 17,129,558	$ 19,054,980
Interest income	9,108	-	9,108
	1,934,530	17,129,558	19,064,088
Employer contributions	$ 275,226	$ 1,586,723	$ 1,861,949
Other income	75	-	75
Allocation of 85,200.1040 shares of Company stock, at fair value	603,217	-	603,217
	878,518	1,586,723	2,465,241
Total additions (loss)	2,813,048	18,716,281	21,529,329
Deductions from net assets attributed to:			
Benefits paid to participants	$ 4,502	$ -	$ 4,502
Interest expense	-	1,586,723	1,586,723
Administration expenses	60	-	60
Allocation of 85,200.1040 shares of Company stock, at fair value	-	603,217	603,217
Total deductions	4,562	2,189,940	2,194,502
Net increase (decrease)	2,808,486	16,526,341	19,334,827
Net assets (deficit) available for plan benefits:			
Beginning of year	1,285,853	(22,785,527)	(21,499,674)
End of year	$ 4,094,339	$ (6,259,186)	$ (2,164,847)

The accompanying notes are an integral part of these financial statements.

Note 1: DESCRIPTION OF THE PLAN

Invariant Corporation (Company) established the Invariant Corporation Employee Stock Ownership Plan (the Plan) effective January 1, 2023. The Plan is designed to operate as a leveraged employee stock ownership plan (ESOP) and to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code of 1986, as amended (IRC), and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Company is the Plan Administrator, and the Board of Directors serves as the Plan Committee. Ventura Trust Company is the Plan's trustee.

The following description of the Invariant Corporation (the Company) Employee Stock Ownership Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

a) Eligibility: The Plan is a defined contribution plan covering substantially all employees who have completed three months of service, that are 1) at least 18 years of age, 2) not members of a collective bargaining unit, 3) not a non-resident alien and 4) not leased employees.

b) Contributions: The Company may contribute an annual profit-sharing contribution in Company stock or cash to the Plan as determined for the year by the Company's Board of Directors. Company contributions are allocated to participant accounts based on the ratio that each employee's annual compensation bears to total annual compensation, as determined by the Plan provisions. Employee contributions are not permitted.

c) Voting Rights: All Company Stock held by the Trustee shall be voted by the Trustee. Participants are entitled to direct the Trustee as to the voting of any voting shares of Company Stock allocated to their Company Stock Accounts with respect to any vote required for approval or disapproval of any corporate merger or consolidation, recapitalization, reclassification, liquidation, dissolution or sale of substantially all the assets or the business. The Trustee will provide participants with proxy/information statements and other materials provided to Company shareholders in connection with each shareholder meeting, together with a form upon which confidential voting instructions may be given to the Trustee. The Trustee shall not disclose the voting instructions of any Participant to the Company or Plan Committee.

d) Participant Accounts: The Plan is a defined contribution plan under which a separate individual account is established for each participant. The benefit to which a participant is entitled is the amount that can be provided from the participant's vested account.

Company Stock Account: Participant's Company Stock Account will be credited with the Participant's allocated share of Company Stock, forfeitures of Company Stock and stock dividends on Company Stock held in the participant's Company Stock Account.

Other Investment Account: Participant's Other Investment Account is credited with all cash, contributions and forfeitures, and will be credited or debited as of the last day of the plan year with the participant's share of net income or loss of the Trust, and with S Corporation distributions during S Corporation Years that are not used to make payments on a Securities Acquisition Loan.

e) Vesting: Participants vest in their Company Stock and Other Investments Accounts based on Years of Service, including service recognized under the Company's 401(k) plan, at 30% after one year, 60% after two years and 100% after three years. Participants become 100% vested upon death, Disability or attainment of Normal Retirement Age. Lateral Transfer Accounts, including Company stock acquired with Lateral Transfer Assets, are 100% vested and nonforfeitable at all times.

Note 1: DESCRIPTION OF THE PLAN - Continued

f) Payment of Benefits: Distributions of account balances less than $5,000 are to be made in a lump sum. Benefit distributions of account balances exceeding $5,000 will be made in substantially equal annual installments over a period of five years. In accordance with federal regulations, the installment period may be extended up to five additional periods for large account balances.

On termination of service due to death, disability, or retirement at normal retirement age, Plan provisions require distribution of the participant's plan benefit to commence as soon as administratively feasible.

For termination of participation other than death, disability or retirement, benefit distributions may be in the form of cash or Employer securities. Plan provisions require that any Employer securities distributed by the Trust during any S Corporation Year shall be immediately repurchased by the Employer or the Trust, at fair market value, based upon the appraised fair market value determined as of the Valuation Date coinciding with or immediately preceding the date such shares are purchased. Benefit distributions may be made in a single payment or in up to five substantially equal annual installments (with interest on the unpaid principal balance at a reasonable rate of interest) and must commence within thirty days after the Employer or the Trust notifies the participant of its intent to purchase the shares. Plan provisions prohibit a distribution of Company Stock during any S Corporation Year if such would cause the Company to fail to constitute a "small business corporation" within the meaning of the Internal Revenue Code.

Lateral Transfer Accounts are distributed in a lump sum as soon as administratively feasible after separation from service. Other vested balances of $5,000 or less are distributed in a lump sum after the close of the plan year in which employment terminates. Vested balances exceeding $5,000 are distributed in five annual installments beginning in the sixth plan year following termination, except that Company stock acquired with the ESOP loan need not be distributed until the loan is repaid.

During 2025, the Trust repurchased 1,596.3582 shares from the accounts of eleven terminated participants at $2.82 per share, the appraised value as of December 31, 2024, the Valuation Date immediately preceding the repurchase, and distributed $4,502 in cash. The repurchase was funded by Company contributions, and the repurchased shares were reallocated to eligible participants as of December 31, 2025. The Company did not repurchase shares from participants.

g) Forfeitures: A participant who terminates with no vested interest is deemed to receive a distribution upon termination, and a partially vested participant who receives a distribution of the entire vested balance forfeits the non-vested portion at that time. These forfeitures are allocated as of the December 31 coinciding with or following the later of the participant's one-year break in service or the distribution; other non-vested balances are forfeited after five consecutive one-year breaks in service. Forfeited balances are restored if the participant is rehired and repays the distribution within the period specified by the Plan. Forfeitures are reallocated to eligible participants in proportion to covered compensation. Lateral Transfer Accounts are not subject to forfeiture. The Plan had no forfeitures during 2025.

h) Plan Expenses: Administrative and investment expenses paid by the Plan are charged to participant accounts in accordance with Plan provisions. The Plan sponsor pays some Plan expenses, which are excluded from these financial statements.

i) Put Option: Under federal income tax regulations, the employer stock that is held by the Plan and its participants and is not readily tradable on an established market or is subject to trading limitations, includes a put option. The put option is a right to demand that the Company buy any shares of its stock distributed to participants for which there is no market. The put price is representative of the current appraised value of the stock. The Company can pay for the purchase with interest over a period of five years. The purpose of the put option is to ensure that the participant has the ability to ultimately obtain cash.

Note 1: DESCRIPTION OF THE PLAN - Continued

j) Diversification Election: Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company common stock into investments that are more diversified. Participants who are at least age 55 with at least 10 years of participation in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25% of the number of shares allocated to the participant's Company Stock Account, less any shares previously diversified. In the final year that the participant may make the election, the diversification percentage changes to 50%. Participants who elect to diversify may elect to invest in alternative investment options offered by the Plan, receive a cash distribution or rollover to an eligible plan. The election to diversify is made subsequent to year-end based upon the shares of employer stock in the participant's account at year-end.

k) Lateral Transfer: The Plan permitted a one-time lateral transfer of participant balances from the Invariant Corporation 401(k) Plan. During 2024, participants transferred $2,884,360, which was invested in Company stock and applied to the ESOP loan. The resulting shares were allocated to the transferring participants' Lateral Transfer Accounts, which are 100% vested.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

In accordance with accounting principles generally accepted in the United States of America, investments held by a defined contribution plan are reported at fair value.

Investment Valuation and Income Recognition

Company Stock Valuation: Shares of Company common stock are reported at fair value based on an independent appraisal of the Company. The appraisal is based on a combination of the market and income valuation techniques. The valuation process involves the selection of a qualified appraiser by the trustee. Plan management accumulates the data for the appraiser from historical and projected financial information of the Company. The appraiser prepares a report of the estimated per-share value that a participant will receive upon distribution. Plan management and the Plan trustee, review in detail, discuss and approve the appraisal report. Fair value calculated under this method may not be indicative of net realizable value or reflective of future fair values. Furthermore, although Plan management believes valuation methods are appropriate and consistent with other market participants, the use of different methodologies and assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the report date.

Other Investment Valuation: Pursuant to the Trust Agreement, the Trustee invests funds under the Plan in other investments as the Trustee deems prudent for the Trust, or such funds may be held in non-interest-bearing bank accounts, as necessary, on a temporary basis. Cost of money market accounts and certificates of deposit approximate fair value.

Purchases and sales of Company Stock and other investment securities are recorded on a trade-date basis. Interest income on investments is recorded on the accrual basis. Dividend income is accrued on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments purchased and sold, as well as, held during the year.

Contributions Receivable and Credit Losses

Contributions receivable are amounts due to the Plan from the Plan Sponsor. Plan management has evaluated the collectability of contributions based on credit worthiness of the employer and determined no allowance for credit losses is required. Interest received on past due amounts is recorded in the period received. Receivables are considered past due after employer's income tax filing deadline. As of December 31, 2025, there are no receivables considered past due.

Note 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES – (Continued)

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates. Significant estimates include valuation of investments.

Allocations

The financial statements of the Plan present separately the assets and liabilities and changes therein pertaining to the accounts of participants with rights in allocated stock (Allocated) and stock not yet allocated to participants (Unallocated), including shares that are committed to be released. Shares are released from collateral and become allocated generally in the period in which debt service is actually paid.

Payment of Benefits

Benefits are recorded when paid.

Note 3: TAX STATUS AND OTHER MATTERS

Tax Status

The Plan is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code of 1986, as amended (IRC), and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated August 7, 2025, stating that the plan is qualified under the Internal Revenue Code (IRC) and, therefore, the related trust is exempt from taxation, and required to operate in conformity with the IRC to maintain its qualification.

Accounting principles generally accepted in the United States of America prescribe requirements for the recognition, measurement, classification, and disclosure in the financial statements of uncertain tax positions taken or expected to be taken by the Plan. Management has evaluated the Plan's design and operation and has concluded that the Plan is designed and is operating in compliance with the applicable requirements of the Internal Revenue Code. Further, management believes that the Plan has maintained its tax-exempt status and has taken no uncertain tax positions that qualify for either recognition or disclosure in the financial statements for the year ended December 31, 2025. The Plan is subject to audit by the IRS and US Department of Labor (DOL), and generally, the Plan's tax filings remain open for federal examination for three years from the date of filing.

Plan Amendments

The Company reserves the right to amend the Plan from time to time by action of the Board of Directors. Such amendments may not reduce the value of a Participant's nonforfeitable benefits prior to the adoption of the amendment or return any part of the Trust to the Employer.

Note 4: RISKS, UNCERTAINTIES, AND CONCENTRATIONS

The Plan invests primarily in the Company's common stock, but the Trustee may invest in other investment securities. All investments are exposed to various risks, such as interest rate, market and credit risks, as well as valuation assumptions based on earnings, cash flows and other such techniques. Due to the level of risk associated with the investment in the common stock and to uncertainties inherent in estimates and assumptions, it is at least reasonably possible that changes in the value of the common stock will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

The Plan Sponsor is located in north Alabama and provides hardware, sensor and software development services, specializing in data acquisition and control, simulation technologies and optical engineering services to customers. The Plan Sponsor is obligated for 100% of contributions receivable.

Note 5: PLAN TERMINATION

The Company has the right to discontinue its contributions at any time and to terminate the Plan, subject to the Plan provisions and ERISA regulations. Upon termination of the Plan, all Participant accounts will become 100% vested and Plan assets distributed as directed by the Company.

Note 6: RELATED PARTY TRANSACTIONS

The Plan invests in Company common stock, which represents related party and party-in-interest transactions. The Plan Sponsor owed contributions of $281,290 to Plan as of December 31, 2025. The Plan has a loan due to the Company, which is collateralized by unallocated Company stock. The Plan owed $34,142,461 on the ESOP Loan and accrued interest of $-0- as of December 31, 2025. The loan is considered an exempt loan under IRC Sec. 4975(d)(3) and ERISA Sec. 408(b)(3).

Investments are managed by the trustee, Ventura Trust Company, as defined by the Plan. Beginning January 1, 2024, Principal Financial Group serves as the Plan's third-party administrator and recordkeeper. Transactions with the trustee and third-party administrator qualify as party-in-interest transactions. The Plan paid no fees to the trustee or the third-party administrator for the year ended December 31, 2025.

Note 7: INVESTMENTS

Shares of Company common stock are reported at fair value based on an independent appraisal of the Company. The appraisal is based on a combination of the market and income valuation techniques. The valuation process involves the selection of a qualified appraiser. Plan management accumulates the data for the appraiser from historical and projected financial information of the Company. The appraiser prepares a report of the estimated per-share value that a participant will receive upon distribution. Plan management and the Plan trustee review in detail, discuss and approve the appraisal report. This method produces a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although Plan management believes valuation methods are appropriate and consistent with other market participants, the use of different methodologies and assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the report date.

Other Investment Valuation: Pursuant to the Trust Agreement, the Trustee invests funds under the Plan in other investments as the Trustee deems prudent for the Trust, or such funds may be held in non-interest-bearing bank accounts, as necessary, on a temporary basis. Cost of money market accounts and certificates of deposit approximate fair value. Amounts on deposit with banks may at times exceed the amounts insured by Federal Deposit Insurance Corporation (FDIC). As of December 31, 2025, the Plan did not have any deposits exceeding FDIC limit.

The Plan's investments as of December 31, are presented in the following table:

	2025		2024	
	Allocated	Unallocated	Allocated	Unallocated
Invariant Corporation Common Stock				
Number of Shares	537,177.0951	3,935,822.9049	451,976.9911	4,021,023.0089
Cost	$ 4,713,660	$ 34,536,340	$ 3,966,040	$ 35,283,960
Estimated fair value	$ 3,803,214	$ 27,865,626	$ 1,274,575	$ 11,339,285

Note 8: ESOP LOAN PAYABLE

The Plan borrowed from the Plan Sponsor to purchase 4,473,000 shares of stock at $8.7748 per share, for a total amount of $39,250,000, and pledged the shares as collateral for the ESOP loan payable to the Company on December 18, 2024. The ESOP loan agreement calls for 39 annual installments of $1,959,728, including principal and interest at 4.53%, to be funded by Company discretionary contributions and distributions on unallocated ESOP shares. The loan agreement permits prepayment of the loan. During the 2025 Plan year, the Company made additional principal payments in the amount of $1,084,466, reducing future required principal payments for 2026 through 2028, as detailed in the minimum principal payments required, in the table below. As of December 31, 2025, the ESOP loan payable in the amount of $34,142,461 was due to the Company and the Plan has accrued interest expense due to the Company in the amount of $-0-.

During 2025, 85,200.1040 shares were released from collateral and allocated to participant accounts based on principal and interest paid.

Employer discretionary contributions to the ESOP, as well as, S Corporation distributions on unallocated shares to the ESOP, are determined annually by the Company's Board of Directors and may be paid in cash or shares of Company Stock. Contributions and forfeitures are allocated to participant accounts in the proportion each participant's compensation bears to total compensation of participants for that year, as defined by the plan document. S Corporation distributions on allocated shares held by the Trust are added to each participant based on percentage of ownership in the ESOP as of the preceding anniversary date. The ESOP uses funds it receives from the Company to repay the ESOP loan. As loan repayments are made, ESOP shares are released based on the principal and interest method and allocated to participant accounts, as described above.

Minimum principal payments required under the agreement are as follows:

2026	$ -
2027	-
2028	38,926
2029	416,401
2030	435,264
Thereafter	33,251,870
	$ 34,142,461

Note 9: RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

Amounts reported in the financial statements are consistent with amounts reported in the Plan's Form 5500.

The allocation of released shares is presented gross in the allocated and unallocated columns and has no effect on total net assets or on the Form 5500.

Note 10: FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to measure the fair value of certain financial instruments could result in a different fair value at the reporting date.

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels:

Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority,
Level 2 inputs are based on other significant observable inputs other than quoted prices for identical assets, and
Level 3 inputs are based on significant unobservable inputs (including the Trust's own assumptions in determining the fair value of investments where there is little, if any, market activity for the investment) and have the lowest priority.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

The Plan had the following assets required to be measured at fair value at December 31, 2025 and 2024:

		Fair Value Measurement at the End of the Reporting Period Using:		
	Fair Value	Quoted Prices in Active Markets for Identical Assets Level 1	Significant Other Observable Inputs Level 2	Significant Unobservable Inputs Level 3
December 31, 2025				
Common stocks	$ 31,668,840	$ -	$ -	$ 31,668,840
December 31, 2024				
Common stocks	$ 12,613,860	$ -	$ -	$ 12,613,860

Gains and losses (realized and unrealized) included in changes in net assets for the period above are reported in net appreciation (depreciation) in the fair value of investments in the statement of changes in net assets available for benefits. The following table summarizes changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2025:

Balance January 1, 2025	$ 12,613,860
Unrealized appreciation in estimated fair value	19,054,980
Balance December 31, 2025	$ 31,668,840

Note 10: FAIR VALUE MEASUREMENTS – (Continued)

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.

Instrument	Fair Value	Valuation Technique	Unobservable Inputs
Invariant Corporation common stock	$ 31,668,840	Income	EBITDA, net income, weighted average, cost of capital, discount rate, discount for lack of marketability
		Market	Public comparables, revenue multiple, EBITDA multiple discount for lack of marketability

The valuation process involves the selection of a qualified appraiser by the Plan trustee. Plan management accumulates the data for the appraiser from historical and projected financial information of the Company. The appraiser prepares a report of the estimated per-share value that a participant will receive upon distribution. Plan management and the ESOP trustee review in detail, discuss and approve the appraisal report.

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

For years ended December 31, 2025 and 2024, there were no significant transfers between Levels 1, 2 or 3.

Note 11: REPURCHASE OBLIGATION

Because the Company common stock is not readily tradable on an established market, participants who receive distributions of Company stock have the right to require the Company to purchase the shares at fair value (put option). In addition, the Plan requires that Company stock distributed during any S Corporation year be immediately repurchased by the Company or the Trust. The Company may pay the purchase price in a lump sum or in up to five substantially equal annual installments with reasonable interest.

As of December 31, 2025 and 2024, the fair value of allocated shares subject to the repurchase obligation was $3,803,214 (537,177.0951 shares at $7.08 per share) and $1,274,575 (451,976.9911 shares at $2.82 per share), respectively. The repurchase obligation is an obligation of the Company, not the Plan, and is not reflected in the Plan's financial statements. The Plan's ability to make distributions in cash depends on the Company's ability to fund the repurchase obligation. Unallocated shares (fair value $27,865,626) will become subject to the repurchase obligation as they are released and allocated.

Note 12: SUBSEQUENT EVENTS

Plan management has evaluated subsequent events through October 15, 2026, the date the financial statements were available to be issued. Other than the collection of the contributions receivable and scheduled ESOP loan payments made in the normal course of operations, Plan management did not identify any events that require recognition or disclosure in the Plan's financial statements.

SUPPLEMENTAL SCHEDULE

SCHEDULE H – LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Invariant Corporation
Employee Stock Ownership Plan December 31, 2025

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
EIN 63-1274152
Plan Number 002

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment, including maturity date, interest rate, collateral, par or maturity value	(d) Cost	(e) Current Value
	Columbia Bank (formerly Pacific Premier Bank)	Money Market Account	$ 27,484	$ 27,484
*	Invariant Corporation	Common Stock, Par Value $.0001: 4,473,000 shares (537,177.0951 allocated and 3,935,822.9049 unallocated) not readily tradable, subject to put option and S-corporation transfer restrictions. Unallocated shares pledged as collateral for ESOP loan.	39,250,000	31,668,840
				-
				-
				-
				-
				-
				-
				-
				-
				-
			$ 39,277,484	$ 31,696,324

* Party in interest to the Plan, as defined by ERISA.