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. . . . . ▶ [X]

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
HEIDELBERG MATERIALS US PENSION PLAN

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 04/01/1950

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)
HM US SERVICES, LLC

300 E JOHN CARPENTER FRWY, STE 1645
IRVING, TX 75062

2b Employer Identification Number (EIN)
81-4086708

2c Plan Sponsor's telephone number
972-653-5500

2d Business code (see instructions)
327300

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	SCOTT SEALE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

RETIREMENT PLANS COMMITTEE

300 E JOHN CARPENTER FRWY, STE 1645
IRVING, TX 75062

3b Administrator's EIN
22-3478453

3c Administrator's telephone number
972-653-5500

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

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	6643
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)**	973
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	874
b	Retired or separated participants receiving benefits	**6b**	2332
c	Other retired or separated participants entitled to future benefits	**6c**	2367
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	5573
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	655
f	Total. Add lines **6d** and **6e**.	**6f**	6228
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 1I 3H

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

9a Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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
HEIDELBERG MATERIALS US PENSION PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
HM US SERVICES, LLC

D Employer Identification Number (EIN)
81-4086708

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

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	518544447
b Actuarial value	**2b**	517221816

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	3003	358365040	358365040
b For terminated vested participants	2667	105419950	105419950
c For active participants	973	68919082	71157584
d Total	6643	532704072	534942574

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**	5.31 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	3071000
c Target normal cost	**6c**	3071000

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

08/31/2026
Date

ALLISON LOGAN
Type or print name of actuary

26-07749
Most recent enrollment number

AON CONSULTING, INC.
Firm name

214-989-2641
Telephone number (including area code)

5005 LBJ FREEWAY
SUITE 1400
DALLAS, TX 75244
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	161442468
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	12613086
9	Amount remaining (line 7 minus line 8)	0	148829382
10	Interest on line 9 using prior year's actual return of 3.17 %	0	4717891
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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 5.11 %		0
	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		0
	d Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	0	64279517
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	89267756

Part III Funding Percentages

14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.00 %
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	88.81 %
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? [X] Yes [ ] No

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:

a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used
b Applicable month (enter code)			**21b**	
22 Weighted average retirement age			**22**	62

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] 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. [X] Yes [ ] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [X] 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. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] 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**	3071000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	106988514	10858594
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**	13929594

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	13929594	13929594

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 [X] 2021

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
HEIDELBERG MATERIALS US PENSION PLAN

B Three-digit plan number (PN) ▶ 003

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
HM US SERVICES, LLC

D Employer Identification Number (EIN)
81-4086708

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: HEIDELBERG MATERIALS US PENSION TRU

b Name of sponsor of entity listed in (a): NORTHERN TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
51-0482898-001	M	517488090

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

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a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

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
HEIDELBERG MATERIALS US PENSION PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
HM US SERVICES, LLC

D Employer Identification Number (EIN)
81-4086708

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)	0	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	518544447	517488090
(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)		
(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	518544447	517488090
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	188739	348360
1k Total liabilities (add all amounts in lines 1g through1j)	1k	188739	348360
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	518355708	517139730

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)		
(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)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(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)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		40599483
(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		
d Total income. Add all **income** amounts in column (b) and enter total	2d		40599483
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	59250542	
(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)		59250542
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		59250542
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-18651059
l Transfers of assets:			
(1) To this plan	2l(1)		22687557
(2) From this plan	2l(2)		5252476

Part III Accountant's Opinion

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

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

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

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

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: WHITLEY PENN LLP **(2)** EIN: 75-2393478

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		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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)
HEIDELBERG MATERIALS US PENSION TRUST	51-0482898	001

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 626501.

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
HEIDELBERG MATERIALS US PENSION PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
HM US SERVICES, LLC

D Employer Identification Number (EIN)
81-4086708

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): 13-3795042

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 | 151

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: 94.7 %

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: 4.5 % Other: 0.8 %

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_____.

HEIDELBERG MATERIALS US PENSION PLAN

FINANCIAL STATEMENTS

Years Ended December 31, 2025 and 2024
with Report of Independent Auditors

HEIDELBERG MATERIALS US PENSION PLAN

FINANCIAL STATEMENTS

Years Ended December 31, 2025 and 2024

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REPORT OF INDEPENDENT AUDITORS

To the Retirement Plans Committee and Participants of the
Heidelberg Materials US Pension Plan

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

We have performed audits of the financial statements of the Heidelberg Materials US Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 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.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note E to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").

- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

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.

Whitley Penn LLP

Plano, Texas
October 14, 2026

HEIDELBERG MATERIALS US PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31, 2025	December 31, 2024
Assets		
Beneficial interest in the Heidelberg Materials US Pension Trust		
Investments, at fair value	$ 27,515,436	$ 518,544,447
Investment, at contract value	489,972,654	-
Total beneficial interest in the Heidelberg Materials US Pension Trust	517,488,090	518,544,447
Total assets	517,488,090	518,544,447
Liabilities		
Accrued expenses	348,360	188,739
Net assets available for benefits	$ 517,139,730	$ 518,355,708

See accompanying notes to financial statements.

HEIDELBERG MATERIALS US PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Years Ended December 31, 2025	2024
Additions to Net Assets		
Investment income:		
Net increase in the beneficial interest in the Heidelberg Materials US Pension Trust resulting from investment activities	$ 40,599,483	$ 25,737,716
Total investment income	40,599,483	25,737,716
Other income	7,219,289	6,411,904
Total additions to net assets	47,818,772	32,149,620
Deductions from Net Assets		
Benefits paid to participants	59,250,542	93,544,078
Premium paid for transfer of benefit obligation	-	291,556,873
Administrative expenses	5,252,476	4,779,319
Total deductions from net assets	64,503,018	389,880,270
Net decrease in net assets available for benefits	(16,684,246)	(357,730,650)
Transfers to Plan	15,468,268	-
Net assets available for benefits at beginning of year	518,355,708	876,086,358
Net assets available for benefits at end of year	$ 517,139,730	$ 518,355,708

See accompanying notes to financial statements.

HEIDELBERG MATERIALS US PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

A. Description of the Plan

The following description of Heidelberg Materials US Pension Plan (the "Plan" and formerly known as the Lehigh Hanson Pension Plan) is provided for general information purposes only. Participants should refer to the plan document for a more complete description of the Plan's provisions. The Plan was effective April 1, 1950 and amended and restated most recently effective January 1, 2018.

The Plan is sponsored by HM US Services, LLC (the "Plan Sponsor" or "Heidelberg Materials" and formerly known as Lehigh Hanson Services, LLC). Information about the Plan's agreements, vesting and benefit provisions, and the Pension Benefit Guaranty Corporation's ("PBGC") benefit guarantee, is contained in the Plan's Summary Plan Description. Participants should refer to the Plan's Summary Plan Description for more complete information. Copies of these documents for the Plan are available at the corporate office of the Plan Sponsor.

General

The Plan is a noncontributory defined benefit pension plan covering substantially all salaried employees of ESSROC Cement Corp. (the "Company"). It also covers certain other defined employee groups whose previous plans merged into the current plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Plan is governed by the Heidelberg Materials Retirement Plans Committee ("Committee"). The Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan Sponsor's Board of Directors.

The Plan's trustee is The Northern Trust Company (the "Trustee") and the Plan's benefits administration is outsourced to Alight Solutions LLC.

The Plan is fully frozen with respect to new participants, credited service, and benefit accruals.

The investments of the Plan are held in the Heidelberg Materials US Pension Trust ("Master Trust" and formerly known as the Lehigh Hanson Pension Trust) which was created in November 1996 for the purpose of investing the pooled assets of the various defined benefit plans of the Plan Sponsor and its subsidiaries and affiliates. Each participating retirement plan has an undivided interest in the Master Trust. See Note C for investments held by the Master Trust.

Prior to January 1, 2018, the Plan was amended and restated to provide for the mergers of the ESSROC Defined Benefit Plan for Frederick/Front Royal/Nazareth Hourly Employees and the ESSROC Defined Benefit Plan for Speed/Martinsburg/Essexville Hourly Employees with and into the Plan and freeze the benefit accruals as of December 31, 2017, for Logansport weekly salaried employees. Effective October 8, 2018, the Plan was amended to reflect the merger of the accrued benefits and related assets for certain participants in the Retirement Plan for Employees of Heidelberg Materials. Effective with this merger, the Plan is the only plan participating in the Master Trust.

A. Description of the Plan – continued

General – continued

The Company entered into an annuity purchase agreement between the Company and Massachusetts Mutual Life Insurance Company on October 10, 2024. The Plan paid an insurance premium of approximately $292 million in relation to the transfer of benefit obligation for 6,681 Plan participants. The agreement impacted certain participants and beneficiaries currently receiving benefits under $700 or over $3,000.

The Company entered into a commitment agreement with The Prudential Insurance Company of America ("Prudential") for the issuance of a single-premium, nonparticipating group annuity contract (the "Contract") on November 18, 2025. See further discussion in Note E.

Plan Transfer

Effective August 31, 2025, the Plan received a transfer of certain participant accounts, related accrued benefits, and corresponding assets from the Retirement Plan for Hourly Employees of Giant Cement Company (the "Giant Plan"). The transferred participants became participants in the Plan as of the transfer date. Assets totaling approximately $15,468,000 are included as transfers to plan on the Statement of Changes in Net Assets Available for Benefits.

The transfer included pension obligations with a projected benefit obligation of approximately $14,081,000.

The Plan is a frozen defined benefit pension plan. The merger did not result in the establishment of new benefit accruals under the Plan. Certain accrued benefit rights and features applicable to transferred participants continue to be governed by provisions of the pre-merger plan to the extent required by the merger amendment and applicable law.

Retirement Benefits

Employees are eligible for normal retirement benefits at age 65 or the fifth anniversary of participation, if later. The Plan also has provisions for early retirement benefits. The normal retirement pension is payable monthly as long as the participant lives, with payments ceasing upon the participant's death. If the present value of the pension does not exceed $5,000, a lump sum payment is automatic. Retirement benefits can also be paid in the form of a lump sum, joint and survivor annuity, or life annuity with certain period.

Upon termination of employment other than by retirement, disability, or death, a participant may elect to receive a lump sum payment equal to the present value of the pension, as soon as administratively possible after termination of employment.

A. Description of the Plan – continued

Death and Disability Benefits

Participants are eligible for pre-retirement death benefits if death occurs after five years of credited service. The spouse will receive a benefit as though the participant retired on the date of death and elected a 50 percent qualified joint and survivor annuity. Participants are eligible for disability benefits if disability occurs after fifteen years of credited service. The benefit will be the participant's accrued benefit to the date of disability.

Vesting

A participant's retirement benefits vest upon completion of five years of service.

B. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting, except for benefit payments, which are recorded when paid.

Use of Estimates

The preparation of the Plan's financial statements in conformity with accounting principles generally accepted in the United States ("GAAP") requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from these estimates.

Investment Valuation and Income

The investment of the Plan is stated at fair value, except for investment contracts, which are reported at contract value as of the end of the year, and is subject to market or credit risks customarily associated with equity investments. Fair value measurements are determined in accordance with GAAP, which defines fair value, establishes a framework for measuring fair value, and expands disclosures about assets and liabilities measured at fair value. See Note D for information related to the Plan's valuation methodologies.

Investment gains and losses are accounted for using the average cost basis of the securities sold. The net realized and unrealized gains and losses on investments include realized gains and losses on sales of investments during the year and unrealized increases or decreases in the market value of investments held at year end. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

B. Summary of Significant Accounting Policies – continued

Administrative Expenses

Administrative expenses that are plan-related are paid primarily by the Plan; all other expenses are paid by the Plan Sponsor. All administrative expenses paid by the Plan Sponsor are not reflected in the accompanying financial statements.

Employer Contributions

Heidelberg Materials' funding policy for the Plan is to contribute at least the minimum amount required under ERISA and the Internal Revenue Code (the "Code"). The Plan has met the ERISA minimum funding requirements for the years ended December 31, 2025 and 2024.

Contributions to the Plan are made and the actuarial present value of accumulated plan benefits is 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 estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

Accumulated Plan Benefits

Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions, which are attributable under the plan provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries and (b) present employees or their beneficiaries. 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.

C. Master Trust

As mentioned in Note A, the Plan is the only retirement plan currently participating in the Master Trust; therefore, the details summarized below solely represent the Plan. See further discussion of the Master Trust investments at Note D. The investment contract reported at contract value is not included in the following fair value hierarchy disclosures in Note D.

C. Master Trust – continued

The following presents the investments and other assets and liabilities of the Master Trust as of December 31, 2025 and 2024:

	December 31,	
	2025	**2024**
Assets		
Investments, at fair value:		
Commingled funds and short-term investments	$ 23,630,179	$ 240,763,731
Limited partnerships	88,647	72,080,930
Mutual funds	-	29,292,131
Bonds	-	175,189,573
Total investments, at fair value	23,718,826	517,326,365
Investments at contract value	489,972,654	-
Receivables:		
Income receivable	70,844	2,127,878
Due from broker	3,725,766	43,747
Total receivables	3,796,610	2,171,625
Total assets	517,488,090	519,497,990
Liabilities		
Due to broker	-	544,923
Other payable	-	408,620
Total liabilities	-	953,543
Net assets of the Master Trust	$ 517,488,090	$ 518,544,447

During 2025 and 2024, net increase from investments in the Master Trust resulting from interest and dividend income and the appreciation in the fair value of investments bought, sold, and held are as follows:

	December 31,	
	2025	**2024**
Net appreciation in fair value	$ 24,278,213	$ 7,271,111
Interest and dividends	16,321,270	18,466,605
Net increase in the Master Trust resulting from investment activities	$ 40,599,483	$ 25,737,716

D. Fair Value Measurements

Fair value is defined under Accounting Standards Codification ("ASC") 820 as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., an exit price). To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs.

As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy in ASC 820 are described below:

Level 1 Unadjusted quoted prices in active markets that are accessible to the reporting entity at the measurement date for identical assets and liabilities.

Level 2 Inputs other than quoted prices in active markets for identical assets and liabilities that are observable either directly or indirectly for substantially the full term of the asset or liability. Level 2 inputs include the following:

- Quoted prices for similar assets and liabilities in active markets, and quoted prices for identical or similar assets or liabilities in markets that are not active.
- Observable inputs other than quoted prices that are used in the valuation of the asset or liabilities (e.g., interest rate and yield curve quotes at commonly quoted intervals).
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

Level 3 Unobservable inputs for the asset or liability (i.e., supported by little or no market activity). Level 3 inputs include assumptions that market participants would use in pricing the asset or liability (including assumptions about risk).

The level in the fair value hierarchy within which the fair value measurement is classified is determined based on the lowest-level input that is significant to the fair value measurement in its entirety.

Following is a description of the valuation techniques and inputs used for each major class of assets and liabilities measured at fair value.

Investments held by the Master Trust as of December 31, 2025 consist primarily of short-term investments, commingled funds, and interests in limited partnerships. Investments held by the Master Trust as of December 31, 2024 consist primarily of mutual funds, bonds, short-term investments, commingled funds, and interests in limited partnerships.

D. Fair Value Measurements – continued

Investments in mutual funds are valued based on published market prices, which represent the net asset values of shares held by the Master Trust or Plan at year-end which are considered Level 1 assets.

Investments in bonds are a combination of corporate, municipal, and government bonds that derive their value based on the length of the remaining term of the bond, the coupon rate of the bond, and the current interest rate. As these bonds are not publicly traded, they are not Level 1 assets. However, because the inputs to measure fair value are observable (interest rate, coupon rate, and term length), these assets qualify as Level 2 assets.

Investments in short-term investments are a combination of Treasury bills and other short-term securities that derive their value based on the length of the remaining term of the security, the coupon rate, and the current interest rate. As these securities are not publicly traded, they are not Level 1 assets. However, because the inputs to measure fair value are observable (interest rate, coupon rate, and term length), these assets qualify as Level 2 assets.

Investments in commingled funds are funds wherein multiple companies pool their contributions together and the contributions are reinvested by the commingled funds' managers in various funds, securities, and other assets. The values of the funds are derived from the net asset values based on the fair values of the underlying investments of the fund. As these funds are not publicly traded, they are not Level 1 assets. The fair value is based on the net asset value, which is an observable input; therefore, the funds qualify as Level 2 assets.

For the commingled funds, the various fund managers utilize investment strategies such that the returns of each of their respective funds outperform the returns of a target index or similar fund. Additionally, the various commingled funds have general restrictions on redemption notices from the Plan to liquidate their share of the funds at their net asset values, ranging from no notice requirement to a minimum of 30 days. The Plan's management does not believe there would be any events that would limit the Plan's ability to transact at net asset values.

Level 3 valuations incorporate certain assumptions and projections that are not observable in the market and require significant professional judgment in determining the fair value assigned to such assets. A significant portion of the Master Trust's Level 3 investments are invested in underlying assets such as limited partnerships. These investments are estimated by the general partners and such estimates serve as the primary basis for the respective fair values included in the accompanying financial statements.

The valuation techniques used to value these Level 3 investments include last transaction price, broker quotes, third party pricing vendors, and pricing models. The significant unobservable inputs used in the fair value measurement covering a majority of the limited partnership interests are discount rates, book value multiples, indicative quotes, timing of cash flows, property value adjustments, housing price growth forecasts, and years since last transaction.

D. Fair Value Measurements – continued

Investments in limited partnership interests are in limited partnerships that invest in public and nonpublic assets. The fair value of these partnership interests is based on net asset values, which are based on the proportionate share of the various partnerships' income, unrealized gains or losses, contributions, etc. As these partnership interests are not publicly traded and the inputs to determine the fair value are not observable, these assets qualify as Level 3 assets.

There have been no changes in the methodologies used at December 31, 2025 and 2024. The following tables set forth, by level within the fair value hierarchy, the Master Trust's assets at fair value as of December 31, 2025 and 2024:

	December 31, 2025			
	Level 1	**Level 2**	**Level 3**	**Total**
Commingled funds and short-term investments	$ -	$ 23,630,179	$ -	$ 23,630,179
Limited partnerships	-	-	88,647	88,647
Mutual funds	-	-	-	-
Bonds	-	-	-	-
Total Master Trust investments	$ -	$ 23,630,179	$ 88,647	$ 23,718,826

	December 31, 2024			
	Level 1	**Level 2**	**Level 3**	**Total**
Commingled funds and short-term investments	$ -	$240,763,731	$ -	$240,763,731
Limited partnerships	-	-	72,080,930	72,080,930
Mutual funds	29,292,131	-	-	29,292,131
Bonds	-	175,189,573	-	175,189,573
Total Master Trust investments	$ 29,292,131	$415,953,304	$ 72,080,930	$517,326,365

The table below sets forth a summary of changes in the fair value of the Master Trust's Level 3 assets for the years ended December 31:

	Limited Partnerships	
	2025	**2024**
Purchases	$ 21,022	$ 495,000
Sales	$ (72,906,267)	$ (5,968,100)

There were no transfers into or out of Level 3 investments during the years ended December 31, 2025 and 2024. Unrealized gains from the above table are included in Note C in determining the net appreciation in fair value of the Master Trust's investments for the years ended December 31, 2025 and 2024.

D. Fair Value Measurements – continued

The Plan (through the Master Trust) may enter into U.S. Treasury futures contracts primarily to hedge against interest rate fluctuations impacting the Plan's investment grade fixed-income assets. The Plan's net equity, representing unrealized gains or losses on these futures contracts, is measured by the difference between the futures rate at the date of entry in the contracts and the futures rates at the reporting date and is included in the Master Trust's statements of net assets. Realized and unrealized gains and losses are included in the Master Trust's statements of changes in net assets.

These instruments involve market risk, credit risk, or both in excess of the amount recognized in the statement of net assets. Risks arise from the possible inability of counterparties to meet the terms of their contracts and movement in interest rates.

Realized and unrealized gains totaled $4,700,000 and $0, respectively, on futures contracts entered into during the year ended December 31, 2025. Realized and unrealized losses totaled ($14,200,000) and ($3,200,000), respectively, on futures contracts entered into during the year ended December 31, 2024. These amounts have been recorded in net appreciation in fair value of investments on the Master Trust's statements of changes in net assets.

The Plan may be required to post collateral on such futures contract activity if the Plan is in a net liability position with the counterparty exceeding certain amounts.

E. Investment Contract

On November 18, 2025, the Plan entered into a commitment agreement with The Prudential Insurance Company of America ("Prudential") for the issuance of a single-premium, nonparticipating group annuity contract (the "Contract"). The Contract was purchased as part of the Plan's pension risk management strategy and covers certain benefits payable to designated participants and beneficiaries of the Plan. The initial premium payable under the commitment agreement was $487,814,741 and was funded through the transfer of eligible fixed-income securities and cash. Because the Plan retained responsibility for administering and paying benefits to covered individuals, the Contract is reported as an investment of the Plan, and is included in investments at contract value as of $489,972,654, at December 31, 2025, which represents the amount reported by the insurer and approximates the amount that would be available under the contract.

The Contract is supported by a commingled separate account and Prudential's general account. The separate account is intended to be invested primarily in investment-grade fixed-income securities, although other investments are permitted. Prudential owns the assets allocated to the separate account, and the Plan does not participate in the investment performance of the separate account. If the assets allocated to the separate account are insufficient to make payments when due, Prudential is required to use assets from its general account. The annuity payments under the contract do not vary based on the gains or losses of the assets supporting the contract.

E. Investment Contract – continued

Prior to a buy-out conversion, Prudential is required to make aggregate monthly payments to the Contract holder substantially corresponding to the benefits payable with respect to individuals covered by the Contract. The Plan retains responsibility for the administration and payment of benefits to participants and beneficiaries during this period, and covered individuals do not have the right to receive payments directly from or enforce the Contract against Prudential. Aggregate monthly payments under the Contract commenced, or were scheduled to commence, on March 1, 2026.

The Contract provides the Plan with the option to initiate a buy-out conversion, subject to the satisfaction of the conditions specified in the Contract. Upon consummation of a buy-out conversion and receipt by Prudential of the information necessary to administer the benefits, Prudential would make annuity payments directly to covered individuals.

Covered individuals would then obtain contractual rights to enforce the payment of their benefits directly against Prudential, and the Plan would no longer have an obligation to such individuals with respect to annuity payments covered by the Contract. As of December 31, 2025, no buy-out conversion had occurred.

The Contract contains provisions that may result in future premium adjustments based on changes in participant information, demographic data, benefit elections, and other matters specified in the agreement. As of December 31, 2025, management was not aware of any material adjustments requiring recognition in the accompanying financial statements.

F. Certified Investment Information

Certain information related to investments disclosed in the accompanying financial statements, including the beneficial interest in the Master Trust held at December 31, 2025 and 2024, and net increase (decrease) in the beneficial interest in the Master Trust resulting from investment activities, for the years then ended, was obtained by management and agreed to or derived from information certified as complete and accurate by the Trustee, a qualified institution.

G. 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' years of credited service. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment are included to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from Plan assets are excluded from accumulated plan benefits.

G. Accumulated Plan Benefits – continued

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary as of January 1, and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment. Had the valuation been performed as of December 31, there would be no material differences.

An actuary from Aon has estimated the actuarial present value of accumulated plan benefits as of December 31, 2024, as follows:

Actuarial present value of accumulated plan benefits:	
Vested benefits of participants currently receiving benefits	$ 357,934,996
Other vested benefits	177,564,953
	535,499,949
Nonvested benefits	2,267,170
Total actuarial present value of accumulated plan benefits	$ 537,767,119

Significant assumptions underlying the above estimates are as follows:

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 present value of accumulated plan benefits.

G. Accumulated Plan Benefits – continued

	2025	2024
Assumed rate of return used to discount accumulated plan benefits	5.30%	4.98%
Mortality		
Employee/Retiree	PRI-2012 benefit-weighted no collar healthy employee/retiree mortality table, base year 2012, then projected generationally with MP-2021	PRI-2012 benefit-weighted no collar healthy employee/retiree mortality table, base year 2012, then projected generationally with MP-2021
Beneficiary	PRI-2012 benefit-weighted no collar contingent survivor mortality table, base year 2012, then projected generationally with MP-2021	
Lump-sum conversion	IRC section 417(e) mortality table for 2025 commencement dates, with estimated IRC section 417(e) mortality table for commencement dates on or after 2026 projected based on the IRS Adjusted Scale MP-2021	IRC section 417(e) mortality table for 2024 commencement dates, with estimated IRC section 417(e) mortality table for commencement dates on or after 2025 projected based on the IRS Adjusted Scale MP-2021
Retirement	Ages 65–67	
Actuarial method	Projected Unit Credit	

The changes in the actuarial present value of accumulated plan benefits for the year ended December 31, 2024, are as follows:

Actuarial present value of accumulated plan benefits as of December 31, 2023:	$ 895,931,080
Increase (decrease) during the year attributable to:	
Actuarial (gains)/losses	1,261,470
Interest due to decrease in the discount period	35,144,854
Plan amendments	(291,556,873)
Benefits paid	(93,544,078)
Assumption changes	(9,469,334)
Actuarial present value of accumulated plan benefits as of December 31, 2024	$ 537,767,119

H. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service ("IRS") dated September 21, 2017, stating that the Plan is qualified under Section 401(a) of the Code, and, therefore, the related trust is exempt from taxation. Subsequent to this determination by the IRS, the Plan was amended and restated.

Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualifications. The Plan Sponsor believes that the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt. The Plan Sponsor will take whatever action is necessary to maintain the qualified status of the Plan.

Plan management received a notification in November 2020 from the Department of Labor ("DOL") stating that they would be performing a review of the 2018 Plan year. The DOL requested certain plan documents and other information to perform the review, which were provided to the DOL by Plan management. Management received a closing letter from the DOL in September 2025 concluding the review. There was no significant effect on the Plan's financial statements.

GAAP requires Plan management to evaluate uncertain tax positions taken by the Plan. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

I. Plan Termination

The Company elected to terminate the Plan effective May 31, 2026. As of the effective date of the termination, participants are 100% vested in Plan benefits. Should there be any assets remaining after allocating assets for each participant's accrued benefits, the excess will first be used to pay the expenses of the Plan termination, and the balance, if any, will revert to the Company. If the assets are insufficient to provide for each participant's accrued benefits, the distribution of the Plan's assets will be based on the priorities of allocation contained in Section 4044 of ERISA.

J. Risks and Uncertainties

The investments held by the Master Trust are exposed to various risks, such as interest rate, market, and credit risks. Investment securities are invested in accordance with the provisions of the Plan's approved investment policy. The Plan's strategic allocations were structured to reduce volatility through diversification and to enhance returns to approximate the amounts and timing of expected benefit payments. Due to the level of risk associated with certain investment securities, it is 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.

K. Parties-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50% or more of such an employer or employee organization, or relatives of such persons.

The Plan and the Master Trust invests in funds managed by the Trustee. Transactions in such investments qualify as party-in-interest transactions, which are exempt from the prohibited transaction rules. The Plan paid certain expenses related to plan operations and investment activity to various service providers. These transactions are party-in-interest transactions under ERISA, which are exempt from the prohibited transaction rules.

L. Subsequent Events

Significant events occurring after the statements of net assets available for benefits date and prior to issuance of the financial statements are monitored to determine the impacts, if any, of events on the financial statements to be issued. All subsequent events were evaluated through October 14, 2026, the date the financial statements were available to be issued.

Effective January 1, 2026, the GCHI Retirement Plan (the "GCHI Plan") merged into the Plan.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 26a — Schedule of Active Participant Data as of January 1, 2025

Number of Participants

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25										
25-29										
30-34		1								
35-39		5	10	1						
40-44		5	32	12	3	1				
45-49	4	28	32	28	15	1				
50-54	2	27	53	51	37	14				
55-59	7	35	50	53	59	37	19	2		
60-64	4	27	49	64	23	31	26	8	1	
65-69	1	10	21	33	8	4	6	6	4	2
70+	3	1	1	7	1	1		3	3	1

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Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

For ERISA Requirements

Interest Rates	Based on the full yield curve with no lookback (as of December 2024) (to which the interest rate stabilization corridor does not apply), with sample rates as follows: Duration 0.5 – 4.60% Duration 5.5 – 4.80% Duration 10.5 – 5.20% Duration 15.5 – 5.45% Duration 20.5 – 5.56% Duration 25.5 – 5.57% Duration 30.5 – 5.58%
Lump Sum Conversion Interest Rates	Underlying ERISA interest rates.
Mortality Rates	
Healthy	2012 base mortality rates for annuitants and non-annuitants per §1.430(h)(3)-1(d), projected generationally for years beyond 2012 using IRS-prescribed mortality improvement rates per §1.430(h)(3)-1(b)(iii).
Disabled	Revenue Ruling 96-7 mortality table for disability after December 31, 1994.
Lump Sum Conversion	Published IRC section 417(e) mortality table for the current plan year.
Retirement Rates	See Table A.
Termination Rates	See Table B.
Disability Rates	None.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Benefit Commencement Dates

Retirement Benefit	
Active participants under age 60	40% Immediate. 60% Age 65.
Active participants age 60 and older	80% Immediate. 20% Age 65.
Deferred Vested Benefit	Age 65.
Preretirement Death Benefit	The later of the date of death of the active participant or the date the active participant would have been eligible for early retirement, assuming service freezes at date of death.

Payment Forms

Active participants under age 60, commencing immediately upon termination	Lump sum.
All other participants	75% Lump sum. 10% Single life annuity. 15% Joint and 100% survivor annuity.
Decrement Timing	Middle of year decrements.
Timing of benefit payments	Benefit payments are assumed to be made uniformly throughout the year and on average at mid-year.
Surviving Spouse Benefit	80% of participants have an eligible spouse; males are three years older than their spouses.
Inflation Rate	2.30%.
Benefit Limits	Projected benefits are limited by the current IRC section 415 maximum benefit of $280,000.
Valuation of Plan Assets	Smoothed fair market value of assets over the current and prior two years, adjusted for contributions, benefit payments, administrative expenses, and expected earnings. The average value of assets calculated in this manner is further limited to not less than 90% nor more than 110% of fair market value. A characteristic of this method is that the expected distribution of the value of plan assets is skewed toward understatement relative to the corresponding market values for expected long-term rates of return in excess of the third segment rate under IRC section 430(h)(2)(C)(iii).

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Expected Return on Assets	
2023 Plan Year	6.31%, limited to 5.74%.
2024 Plan Year	6.22%, limited to 5.59%.
2025 Plan Year	5.30%, limited to 5.50%.
Administrative Expenses	$3,071,000. Expenses are equal to the actual prior year administrative expenses minus prior year PBGC premiums, adjusted by the assumed inflation rate, plus current year PBGC premiums.
Actuarial Cost Method	Standard unit credit cost method.
Valuation Date	January 1, 2025.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Table A

Heidelberg Retirement Rates

Age	Rate
55 – 56	8%
57 – 59	10%
60 - 61	15%
62 – 63	20%
64	25%
65 – 69	35%
70+	100%

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Table B

Heidelberg Termination Rates

Age	Rate
15 – 32	15%
33 – 40	10%
41 – 49	9%
50+	8%

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. ▶ [X]

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
HEIDELBERG MATERIALS US PENSION PLAN

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 04/01/1950

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)

HM US SERVICES, LLC

300 E JOHN CARPENTER FRWY, STE 1645

IRVING TX 75062

2b Employer Identification Number (EIN) 81-4086708

2c Plan Sponsor's telephone number 972-653-5500

2d Business code (see instructions) 327300

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	Scott Seale	10/15/2026	Scott Seale
	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

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
HEIDELBERG MATERIALS US PENSION PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
HM US SERVICES, LLC

D Employer Identification Number (EIN)
81-4086708

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

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	518,544,447
b Actuarial value	**2b**	517,221,816

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	3,003	358,365,040	358,365,040
b For terminated vested participants	2,667	105,419,950	105,419,950
c For active participants	973	68,919,082	71,157,584
d Total	6,643	532,704,072	534,942,574

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**	5.31%

6 Target normal cost

a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	3,071,000
c Target normal cost	**6c**	3,071,000

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

Allison Logan AL — Signature of actuary

08/31/2026 — Date

Allison Logan — Type or print name of actuary

2607749 — Most recent enrollment number

Aon Consulting, Inc. — Firm name

214-989-2641 — Telephone number (including area code)

5005 LBJ Freeway
SUITE 1400
DALLAS TX 75244
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	161,442,468
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	12,613,086
9	Amount remaining (line 7 minus line 8)	0	148,829,382
10	Interest on line 9 using prior year's actual return of 3.17%	0	4,717,891
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	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 5.11%		0
	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		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	64,279,517
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	89,267,756

Part III Funding Percentages

14	Funding target attainment percentage	14	80.00 %
15	Adjusted funding target attainment percentage	15	80.00 %
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	88.81 %
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? [X] Yes [ ] No

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:

a Segment rates:

1st segment: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used

b Applicable month (enter code) **21b**

22 Weighted average retirement age	**22**	62

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] 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. [X] Yes [ ] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [X] 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. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] 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**	3,071,000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	106,988,514	10,858,594
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**	13,929,594

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	13,929,594	13,929,594

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 [X] 2021

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 26b — Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	11,205,332	24,916,631	40,809,129	76,931,092
2026	7,758,279	6,104,842	39,101,401	52,964,522
2027	7,297,745	8,051,477	37,364,413	52,713,635
2028	6,134,293	6,971,919	35,608,067	48,714,279
2029	5,604,409	6,548,394	33,834,895	45,987,698
2030	5,638,097	8,330,725	32,049,592	46,018,414
2031	4,983,421	6,027,095	30,258,651	41,269,167
2032	5,142,561	7,965,401	28,467,654	41,575,616
2033	4,482,226	6,850,390	26,681,863	38,014,479
2034	3,964,998	5,879,193	24,904,797	34,748,988
2035	4,246,247	7,100,388	23,143,754	34,490,389
2036	3,891,097	5,722,651	21,405,364	31,019,112
2037	3,392,504	5,033,706	19,697,501	28,123,711
2038	3,130,501	5,275,785	18,028,693	26,434,979
2039	2,920,045	4,708,710	16,407,802	24,036,557
2040	2,745,828	4,307,085	14,843,758	21,896,671
2041	2,291,626	3,986,830	13,345,367	19,623,823
2042	2,585,003	3,580,797	11,920,859	18,086,659
2043	2,109,964	4,123,067	10,577,477	16,810,508
2044	2,120,384	3,228,316	9,321,345	14,670,045
2045	1,983,374	2,785,772	8,157,164	12,926,310
2046	2,015,005	2,925,611	7,087,977	12,028,593
2047	1,594,231	3,060,705	6,115,141	10,770,077
2048	1,785,935	2,417,680	5,238,290	9,441,905
2049	1,517,503	2,285,351	4,455,448	8,258,302
2050	1,451,953	1,994,134	3,763,174	7,209,261
2051	1,233,214	2,067,830	3,156,759	6,457,803
2052	1,129,101	1,830,732	2,630,489	5,590,322
2053	1,140,209	1,709,136	2,177,911	5,027,256
2054	992,719	1,612,114	1,792,147	4,396,980
2055	914,376	1,535,154	1,466,188	3,915,718
2056	847,613	1,426,678	1,193,096	3,467,387
2057	783,504	1,290,495	966,185	3,040,184
2058	721,055	1,192,603	779,177	2,692,835
2059	663,753	1,095,769	626,273	2,385,795

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2060	598,527	1,000,832	502,226	2,101,585
2061	540,676	908,593	402,367	1,851,636
2062	485,385	819,792	322,575	1,627,752
2063	433,028	735,057	259,280	1,427,365
2064	383,931	654,918	209,411	1,248,260
2065	338,273	579,788	170,370	1,088,431
2066	296,245	509,946	139,981	946,172
2067	257,882	445,559	116,439	819,880
2068	223,160	386,686	98,260	708,106
2069	191,983	333,291	84,234	609,508
2070	164,203	285,257	73,387	522,847
2071	139,625	242,387	64,941	446,953
2072	118,026	204,432	58,286	380,744
2073	99,163	171,105	52,942	323,210
2074	82,793	142,079	48,544	273,416

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, Part V — Summary of Plan Provisions

The Heidelberg Materials US Pension Plan is made up of several legacy plans that have all been merged into the plan at various date in the past. The plan is closed to new entrants and all accrued benefits were frozen by December 31, 2017.

Effective date	July 1, 1990. Amended and Restated effective January 1, 2017.
Covered employees	Only employees with an accrued benefit as of December 31, 2017 are covered by the plan.

Definitions

Vesting Service	For a majority of participants, vesting service is determined on an elapsed time basis.
Credited service	Credited service for all participants was frozen by December 31, 2017. All accrued benefits are provided by Heidelberg Materials US.
Pensionable pay and average earnings	Pensionable pay was frozen for all participants by December 31, 2017. All accrued benefits are provided by Heidelberg Materials US.
Normal retirement date (NRD)	In general, Social Security retirement date. For some participants, legacy benefits age 65 or age 65 with five years of vesting service.
Social Security retirement date (SSRD)	First day of month coincident with or next following the date the participant attains the age set forth in the following table:

Year of Participant's Birth	Age (SSRA)
Prior to 1938	65
1938 to 1954	66
1955 or after	67

Monthly pension benefit	All accrued benefits were frozen by December 31, 2017 and are provided by Heidelberg Materials US.
Monthly preretirement spouse benefit	100% of the monthly pension benefit as of the date of death, reduced for the 100% joint and survivor election and reduced for payment on the participant's earliest retirement date.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Eligibility for Benefits

Normal retirement	Retirement on NRD.
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service. For some participants, legacy benefits may commence at age 55 with five years of vesting service or after 30 years of vesting service.
Postponed retirement	Retirement after NRD.
Deferred vested	Termination for reasons other than death, disability, or retirement after completing five years of accumulated service.
Preretirement spouse benefit	Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.
Disability retirement	Termination due to total and permanent disability after completion of five or more years of vesting service.

Monthly Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD.
Early retirement	Monthly pension benefit reduced for commencement prior to NRD. The reduction for early retirement is determined based on the legacy plan in which the retirement benefit was earned.
Postponed retirement	Monthly pension benefit determined as of actual retirement date. Certain participants are eligible to receive actuarial increases for postponed retirement.
Termination with deferred vested benefit	Monthly pension benefit determined as of termination date, reduced in the same manner as for early retirement for each month of payment before the participant's NRD.
Death with preretirement spouse benefits	Monthly preretirement spouse benefit is payable to spouse for life starting at earliest retirement date providing the participant has completed five or more years of accumulated service, or has terminated with a vested benefit and benefits had not commenced.
Disability benefit	Monthly pension benefit payable at NRD. Certain participants are eligible to receive immediate disability benefits.

Qualified joint and survivor option	If a married participant retires under normal, early, disability, or deferred vested retirement provisions and does not elect to the contrary in writing, his/her benefit will be paid under the terms of the qualified joint and survivor option. Under this option, the participant will receive a reduced pension payable for his/her life with payments in the amount of 100% of such reduced pension which will be continued after his/her death to his/her spouse for the spouse's lifetime.
Forms of payment	All participants shall be entitled to elect a monthly joint and survivor annuity option with either 25%, 50%, 60%, 66-2/3%, 75% or 100% survivor benefit, either a five-year or 10-year certain and life annuity option, a straight life annuity option or a lump sum option. The normal form of benefit for all married participants is standardized as a 100% qualified joint and survivor annuity. The automatic spousal death benefit for all married participants is standardized as a 100% survivor annuity. All non-retired, former participants (and surviving spouses entitled to the automatic spousal death benefit) are permitted to elect a lump sum distribution of their accrued benefits any time following their termination of employment (or, the case of a surviving spouse, following the death of the participant) notwithstanding that the participant has not yet reached earliest retirement age. Prior to its merger with the union plans, the Heidelberg Materials US Pension Plan was amended on July 9, 2015 to offer this lump sum distribution option to all non-retired, former participants of that plan effective April 1, 2016.
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 22 — Description of Weighted Average Retirement Age

The average retirement age shown in line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

(a) Age	(b) Rate	(c) Weight	(d) Product (a) × (b) × (c)
55.5	8.00%	1.0000	4.44
56.5	8.00%	0.9200	4.16
57.5	10.00%	0.8464	4.87
58.5	10.00%	0.7618	4.46
59.5	10.00%	0.6856	4.08
60.5	15.00%	0.6170	5.60
61.5	15.00%	0.5245	4.84
62.5	20.00%	0.4458	5.57
63.5	20.00%	0.3566	4.53
64.5	25.00%	0.2853	4.60
65.5	35.00%	0.2140	4.91
66.5	35.00%	0.1391	3.24
67.5	35.00%	0.0904	2.14
68.5	35.00%	0.0588	1.41
69.5	35.00%	0.0382	0.93
70	100.00%	0.0248	1.74
	Weighted Average		61.52

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 32 — Schedule of Amortization Bases

Type of Base	Present Value of Installment	Date Established	Years Remaining	Amortization Installment
Shortfall	$ 120,889,366	January 1, 2023	13	$ 12,256,954
Shortfall	$ (27,522,705)	January 1, 2024	14	$ (2,653,868)
Shortfall	$ 13,621,853	January 1, 2025	15	$ 1,255,508

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 25 — Change in Method

- The funding valuation reflects a change in the valuation software as a result of a change in the enrolled actuary for the plan and the business organization providing actuarial services to the plan. This change meets the conditions for autormatic approval provided in IRS Announcement 2015-3.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Heidelberg Materials US Pension Plan
EIN: 81-4086708 PN: 003

Schedule SB, line 24 — Change in Actuarial Assumptions

The funding valuation reflects the following assumption changes:

- The unlimited expected rate of return on assets changed from 6.22 percent to 5.30 percent.

These changes were made to better reflect the anticipated plan experience. The funding assumption changes did not reduce the Funding Target liability below established thresholds; as such, approval of the Commissioner is not required.