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.)
- ☒ a single-employer plan
- ☐ a DFE (specify) _____

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 01/01/1981

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)
HELENA AGRI-ENTERPRISES, LLC

225 SCHILLING BOULEVARD
SUITE 300
COLLIERVILLE, TN 38017

2b Employer Identification Number (EIN)
71-0293688

2c Plan Sponsor's telephone number
901-761-0050

2d Business code (see instructions)
424600

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	CHRISTINE FAIR
	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

HELENA AGRI-ENTERPRISES, LLC BENEFITS COMMITTEE

225 SCHILLING BOULEVARD, SUITE 300
COLLIERVILLE, TN 38017

3b Administrator's EIN: 71-0293688

3c Administrator's telephone number: 901-761-0050

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

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	398
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)**	64
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	54
b	Retired or separated participants receiving benefits	**6b**	142
c	Other retired or separated participants entitled to future benefits	**6c**	153
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	349
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	32
f	Total. Add lines **6d** and **6e**.	**6f**	381
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:

1B 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
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
HELENA AGRI-ENTERPRISES, LLC

D Employer Identification Number (EIN)
71-0293688

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	15258244
b Actuarial value	**2b**	15258244

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	173	4211716	4211716
b For terminated vested participants	162	2340449	2340449
c For active participants	64	2662313	2789492
d Total	399	9214478	9341657

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**	5.33 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	83810
b Expected plan-related expenses	**6b**	0
c Target normal cost	**6c**	83810

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

	10/05/2026
Signature of actuary	Date
STACY R. FRANKLIN, ASA, EA	26-07095
Type or print name of actuary	Most recent enrollment number
MERCER	901-684-3091
Firm name	Telephone number (including area code)
6410 POPLAR AVE, SUITE 540 MEMPHIS, TN 38119	
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)	4658707	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	4658707	0
10	Interest on line 9 using prior year's actual return of 7.83 %	364777	0
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 5.18 %		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	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	5023484	0

Part III Funding Percentages

14	Funding target attainment percentage	14	109.56 %
15	Adjusted funding target attainment percentage	15	163.33 %
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	152.07 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date.	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

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

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

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

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	83810
b Excess assets, if applicable, but not greater than line 31a	**31b**	83810

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

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021

SCHEDULE 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
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

B Three-digit plan number (PN) ▶ 003

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
HELENA AGRI-ENTERPRISES, LLC

D Employer Identification Number (EIN)
71-0293688

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: US BOND INDEX

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

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)
90-0337987-462	C	0

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

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

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)
90-0337987-166	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: S&P 500 INDEX

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

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)
90-0337987-388	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSELL SM CP INDEX

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

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)
90-0337987-180	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: REIT INDEX NON LENDING FUND

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

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)
90-0337987-229	C	0

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

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

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)
90-0337987-236	C	0

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

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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
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
HELENA AGRI-ENTERPRISES, LLC

D Employer Identification Number (EIN)
71-0293688

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	679	1001
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	195198	413622
(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)	15062367	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	15908152
(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)	0	0
(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	15258244	16322775
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	15258244	16322775

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)	11685	
(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)		11685
(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)	489659	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		489659
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	9499723	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	9563365	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-63642
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	1425232	
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		1425232

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		2072
d Total income. Add all **income** amounts in column (b) and enter total	2d		1865006
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	799310	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	1165	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		800475
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		800475
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1064531
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: ERNST & YOUNG,LLP **(2)** EIN: 34-6565596

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)

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 590966.

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
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
HELENA AGRI-ENTERPRISES, LLC

D Employer Identification Number (EIN)
71-0293688

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): 98-1687665

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 | 9

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

Financial Statements and Supplemental Schedules

Helena Agri-Enterprises, LLC Pension Plan for
Production Workers and Truck Drivers
Years Ended December 31, 2025 and 2024
With Report of Independent Auditors

The better the question.
The better the answer.
The better the world works.

Shape the future
with confidence

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

Financial Statements and Supplemental Schedules

Years Ended December 31, 2025 and 2024

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Report of Independent Auditors

The Helena Agri-Enterprises, LLC Benefits Committee
Helena Agri-Enterprises, LLC Pension Plan for Production Workers and Truck Drivers

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

We have performed audits of the financial statements of Helena Agri-Enterprises, LLC Pension Plan for Production Workers and Truck Drivers (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 (collectively referred to as the "financial statements").

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the years then ended, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the 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.

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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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 accounting principles generally accepted in the United States of America.

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

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

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Other Matter

Supplemental Schedules Required by ERISA

The supplemental schedules of assets (held at end of year) as of December 31, 2025, and reportable transactions for the year then ended (referred to as the "supplemental schedules"), are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

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

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

Ernst & Young LLP

October 15, 2026

A member firm of Ernst & Young Global Limited

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

Statements of Net Assets Available for Benefits

	December 31	
	2025	**2024**
Assets		
Investments, at fair value:		
Money market fund	**$ 413,622**	$ 195,198
Exchange traded funds	**15,908,152**	–
Common/collective trusts	**–**	15,062,367
Total investments	**16,321,774**	15,257,565
Interest receivable	**1,001**	679
Total assets	**16,322,775**	15,258,244
Net assets available for benefits	**$ 16,322,775**	$ 15,258,244

See accompanying notes.

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31	
	2025	**2024**
Additions:		
Investment income :		
Net appreciation in fair value of investments	**$ 1,361,590**	$ 1,120,807
Interest and dividend income	**501,344**	7,203
Total investment income	**1,862,934**	1,128,010
Other receipts and disbursements, net	**907**	29
Total additions, net of investment income	**1,863,841**	1,128,039
Deductions:		
Benefit payments	**799,310**	551,814
Total deductions	**799,310**	551,814
Net increase	**1,064,531**	576,225
Net assets available for benefits:		
Beginning of year	**15,258,244**	14,682,019
End of year	**$ 16,322,775**	$ 15,258,244

See accompanying notes.

Helena Agri-Enterprises, LLC Pension Plan for Production Workers and Truck Drivers

Notes to Financial Statements

December 31, 2025

1. Description of the Plan

The following brief description of the Helena Agri-Enterprises, LLC Pension Plan for Production Workers and Truck Drivers (the Plan) is provided for general information purposes only. Participants should refer to the Summary Plan Description or Plan document for more complete information.

General

The Plan is a non-contributory defined benefit plan covering substantially all non-salaried production workers and truck drivers, excluding long-distance truck drivers, of Helena Agri-Enterprises, LLC and its subsidiary, Helena Industries, LLC, (collectively, the Company). Eligible employees become participants in the Plan upon reaching age 21 and completing one year of participation service as defined by the Plan document. Effective January 1, 2007, no new employees will be eligible to participate in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Plan Administration

The Plan administrator is the Benefits Committee. Members are appointed by the Board of Managers.

Bank of America, N.A. (Trustee) is the trustee of the Plan.

Administrative Expenses

Administrative expenses of the Plan are paid by the Company at its discretion. In 2025 and 2024, substantially all administrative expenses were paid by the Company.

Pension Benefits

Participants may elect to receive their pension benefits in the form of various annuity options or a lump sum. If participants terminate before rendering five years of service, they forfeit the right to receive benefits. The monthly pension benefit at normal retirement age (65) is calculated based on the sum of: (a) $7 multiplied by the participant's years of benefit service completed as of December 31, 1989, plus (b) $20 multiplied by the participant's year of benefit service after

1. Description of the Plan (continued)

December 31, 1989. The Plan permits early retirement at ages 55 through 64 for participants with ten or more years of service. The Plan allows for the automatic cash-out of accrued benefits valued at less than $1,000.

Death and Disability Benefits

If an active participant dies with five years or more of vesting service before benefits commence, a death benefit equal to a 50% qualified joint and survivor annuity, reduced for early retirement, if applicable, is paid to the participant's spouse. If the death of a participant occurs after the commencement of retirement benefits, payment in the form of a qualified joint and survivor annuity equal to the amount elected by the participant is paid to the beneficiary. The benefit will be payable at normal retirement but could commence at early retirement if the ten-year service requirement is met at the time of death. Active participants with at least five years of vesting service who become totally disabled as defined by the Plan and who are not receiving benefits from the Company's Long-Term Disability Plan receive disability benefits that are equal to the normal retirement benefits that have accumulated as of the time they become disabled.

Termination of the Plan

Although the Company intends to continue the Plan indefinitely, the Plan may be terminated by resolution of the Company's Board of Managers (the Board) at any time for any reason. Should the Plan be terminated, its net assets may not be available on a pro-rata basis to provide participants' benefits but will be applied to payment of benefits in the order of priority prescribed by ERISA and its related regulations. Certain benefits are insured by the Pension Benefit Guaranty Corporation (PBGC). Generally, the PBGC guarantees most vested, normal-age retirement benefits, early retirement benefits and certain disability and survivor's pensions; however, the PBGC does not guaranty all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination subject to a statutory ceiling on the amount of an individual's monthly benefit. Should the Plan terminate at some future time, its net assets generally will not be available on a pro-rata basis to provide participants' benefits.

Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements have been prepared on the accrual basis of accounting. Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes and supplemental schedules. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Exchange-Traded Funds are valued at the closing price reported on the active market on which the individual securities are traded on the last day of the Plan year. Money market funds are valued at the net asset value (NAV) of $1 per unit. Common/collective trusts (CCTs) are valued using the NAV, which is determined daily, published and is the basis for current transactions with the CCT's investment manager or issuer. Purchases and sales of investments are recorded on a trade-date basis. Investment income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation or depreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold, as well as held, during the year. See additional fair value measurement disclosures in Note 6.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits (see Note 3) are those estimated future periodic payments, including lump-sum distributions, which are attributable under the Plan's provisions for services rendered by the participants 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, based on accumulated years of service. Benefits payable under all circumstances (retirement, death, disability, or termination of employment) are included to the extent they are deemed attributable to employee service rendered to the valuation date.

3. Actuarial Present Value of Accumulated Plan Benefits

An actuary estimates the actuarial present value of accumulated plan benefits, which 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.

The accumulated plan benefit information as of the end of the prior year is as follows:

	December 31, 2024
Actuarial present value of accumulated plan benefits:	
Vested benefits:	
Participants currently receiving payments	$ 3,691,066
Other participants	4,230,867
	7,921,933
Non-vested benefits	48,141
Total actuarial present value of accumulated plan benefits	$ 7,970,074

Changes in accumulated plan benefits are as follows:

	Year Ended December 31, 2024
Actuarial present value of accumulated plan benefits at beginning of year	$ 8,182,615
Increase (decrease) during the year attributable to:	
Benefits paid	(551,785)
Interest	551,861
Benefits accumulated and actuarial gains and losses	(214,482)
Change in actuarial assumptions*	1,865
Net decrease	(212,541)
Actuarial present value of accumulated plan benefits at end of year	$ 7,970,074

3. Actuarial Present Value of Accumulated Plan Benefits (continued)

Significant assumptions and methods underlying the actuarial valuation are as follows:

Actuarial cost method:	Unit credit cost method of funding
Assumed rate of return on investments (discount rate):	7.00% per annum
Retirement:	Probabilities of retirement from the ages of 55 through 69, 100% at age 70
Mortality basis*:	Pri-2012 sex-distinct separate employee and retiree tables with contingent survivor adjustments for existing survivors and blue collar adjustments applied with future improvements using the MP-2021 projection scale.

* Actuarial assumption changes: Interest discounts and mortality rates were updated from 2024 to 2025 in accordance with PPA. The 2024 stabilized interest rates reflect the relief contained in the American Rescue Plan Act of 2021. The mortality future improvement scale used the MP-2021 projection scale based on the most recently available actuarial information. Mortality basis for 417(e) lump sums were updated to: 2025 PPA Unisex mortality table, for lump sums paid in 2025; 2026 PPA Unisex mortality table, for lump sums paid in 2026; and a generational mortality table based on the same underlying IRS methodology, mortality table and mortality improvement scale used for creating the current 417(e) mortality table, for lump sums paid in 2027 and later.

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

4. Funding Policy

The Company's funding policy is to make quarterly installments of the minimum pension contributions required by ERISA to fund Plan benefits as determined by the unit credit cost method. The shortfall amortization, if any, is amortized over seven years. The Plan is currently in compliance with ERISA minimum funding requirements.

5. Investments

Certain investment information disclosed in the accompanying financial statements and supplemental schedules, including investments held at December 31, 2025 and 2024; net (depreciation) appreciation in fair value of investments; and interest and dividend income for the years then ended, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by the Trustee.

6. Fair Value Measurements

The Plan follows a framework for measuring fair value which uses a hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

Level 1 – Quoted prices in active markets for identical assets or liabilities.

Level 2 – Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities.

Level 3 – Unobservable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The valuation methods described in Note 2 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

6. Fair Value Measurements (continued)

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2025 and 2024:

	December 31, 2025			
	Level 1	**Level 2**	**Level 3**	**Total**
Money market fund	**$ 413,622**	**$ –**	**$ –**	**$ 413,622**
Exchange traded funds	**15,908,152**	**–**	**–**	**15,908,152**
Total investments at fair value	**$ 16,321,774**	**$ –**	**$ –**	**$ 16,321,774**

	December 31, 2024			
	Level 1	**Level 2**	**Level 3**	**Total**
Money market fund	$ 195,198	$ –	$ –	$ 195,198
Common/collective trust funds	–	15,062,367	–	15,062,367
Total investments at fair value	$ 195,198	$ 15,062,367	$ –	$ 15,257,565

7. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated July 10, 2014, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (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 tax qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code and therefore believes the Plan, is qualified and the related trust are tax-exempt.

Accounting principles generally accepted in the United States require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan management has analyzed the tax positions taken by the Plan, and has concluded that there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

8. Risks and Uncertainties

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

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the 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.

9. Subsequent Events

Subsequent events have been evaluated through October 15, 2026, the date the financial statements were available to be issued.

Supplemental Schedules

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets
(Held at End of Year)

December 31, 2025

SETTLEMENT DATE P O R T F O L I O S U M M A R Y

BANK OF AMERICA

AS OF 12/31/25

ACCOUNT
51-16-700-0186402 HELENA AGRI-ENTERPRISES PW TD

DESCRIPTION	BOOK VALUE	MARKET VALUE	% OF MARKET	UNREALIZED GAIN/LOSS	ACCRUED INCOME	MARKET YIELD	EST ANNUAL INCOME
CASH EQUIVALENTS	413,622.12	413,622.12	2.534	0.00	1,000.97	3.450	14,269.96
FIXED INCOME	7,664,542.28	7,783,528.52	47.688	118,986.24	0.00	4.934	384,057.36
EQUITIES							
OTHER	7,232,696.35	8,124,623.71	49.778	891,927.36	0.00	1.400	113,722.15
TOTAL INVESTMENTS	15,310,860.75	16,321,774.35	100.000	1,010,913.60	1,000.97	3.137	512,049.47
ACCRUED INCOME	1,000.97	1,000.97					
TOTAL ASSETS	15,311,861.72	16,322,775.32					

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE — PORTFOLIO DETAIL — BANK OF AMERICA

AS OF 12/31/25

ACCOUNT 51-16-700-0186402 — HELENA AGRI-ENTERPRISES PW TD — PAGE 4

PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	CASH EQUIVALENTS								
	MONEY MARKET FUNDS								
	BANK OF AMERICA TEMPORARY OVERNIGHT DEPOSIT CUSIP NO: 99Z490460		1.000			.09			
413,622.120	BANK OF AMERICA MONEY MARKET SAVINGS ACCOUNT CUSIP NO: 994458719	413,622.12	1.000	413,622.12		1,000.88		3.450	14,269.96
	TOTAL MONEY MARKET FUNDS	413,622.12		413,622.12		1,000.97		3.450	14,269.96
	TOTAL CASH EQUIVALENTS	413,622.12		413,622.12		1,000.97		3.450	14,269.96
	FIXED INCOME								
	OTHER FIXED INCOME								
49,449.000	ISHARES TR ISHARES 5-10 YEAR INVESTMENT GRADE CORPORATE BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464288638	2,606,592.18	53.880	2,664,312.12	57,719.94			4.703	125,305.60
43,665.000	ISHARES CORE 10+ YEAR USD BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464289479	2,155,268.48	49.699	2,170,111.20	14,842.72			4.869	105,662.92
58,456.000	ISHARES 10+ YEAR INV GRADE CORPORATE BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464289511	2,902,681.62	50.450	2,949,105.20	46,423.58			5.191	153,088.84

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE — PORTFOLIO DETAIL — BANK OF AMERICA

AS OF 12/31/25

ACCOUNT 51-16-700-0186402 — HELENA AGRI-ENTERPRISES PW TD — PAGE 5

PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	TOTAL OTHER FIXED INCOME	7,664,542.28		7,783,528.52	118,986.24			4.934	384,057.36
	TOTAL FIXED INCOME	7,664,542.28		7,783,528.52	118,986.24			4.934	384,057.36
	EQUITIES								
	OTHER EQUITIES								
18,200.000	VANGUARD FTSE DEVELOPED MARKETS ETF CUSIP NO: 921943858	933,259.18	62.470	1,136,954.00	203,694.82			3.003	34,146.84
15,039.000	VANGUARD FTSE EMERGING MARKETS ETF CUSIP NO: 922042858	698,090.80	53.760	808,496.64	110,405.84			2.698	21,814.07
3,933.000	VANGUARD 500 INDEX FUND SHS ETF CUSIP NO: 922908363	2,162,220.35	627.130	2,466,502.29	304,281.94			1.137	28,034.82
7,234.000	VANGUARD MID-CAP ETF CUSIP NO: 922908629	1,953,517.22	290.220	2,099,451.48	145,934.26			.373	7,831.17
6,254.000	VANGUARD SMALL CAP CUSIP NO: 922908751	1,485,608.80	257.950	1,613,219.30	127,610.50			1.357	21,895.25
	TOTAL OTHER EQUITIES	7,232,696.35		8,124,623.71	891,927.36			1.400	113,722.15
	TOTAL EQUITIES	7,232,696.35		8,124,623.71	891,927.36			1.400	113,722.15
	TOTAL INVESTMENTS	15,310,860.75		16,321,774.35	1,010,913.60	1,000.97		3.137	512,049.47
	TOTAL CASH								

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE

P O R T F O L I O D E T A I L

BANK OF AMERICA

AS OF 12/31/25

ACCOUNT
51-16-700-0186402

HELENA AGRI-ENTERPRISES PW TD

PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	ACCRUED INCOME	1,000.97		1,000.97					
	TOTAL ASSETS	15,311,861.72		16,322,775.32					

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Asset	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
Category (iii) – Series of transactions in excess of 5% of plan assets							
BlackRock/iShares	TR Ishares 5-10 Year Investment Grade	4	$ 2,606,592	$ –	$ 2,606,592	$ 2,606,592	$ –
		0	–	–	–	–	–
BlackRock/iShares	Core 10+ Year USD Bond ETF	3	2,308,726	–	2,308,726	2,308,726	–
		2	–	154,957	153,458	154,957	1,499
BlackRock/iShares	10+ Year Investment Grade Corporate	3	3,038,043	–	3,038,043	3,038,043	–
		2	–	137,861	135,362	135,362	2,499
Vanguard	Long-Term Corporate Bond	1	7,597,057	–	7,597,057	7,597,057	–
		2	–	7,467,951	7,597,057	7,467,951	(129,106)
Bank of America	Money market investment	26	1,017,778	–	1,017,778	1,017,778	–
		26	–	604,156	604,156	604,156	–
State Street	Russell Small/Mid Cap Index NL Series FD Cl S	0	–	–	–	–	–
		1	–	1,880,468	1,354,631	1,880,468	525,836
State Street	International Index NL Series FD Cl C	0	–	–	–	–	–
		1	–	3,212,499	2,158,646	3,212,499	1,053,853

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4j – Schedule of Reportable Transactions (continued)

Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Asset	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
State Street	U.S. Bond Index NL Series FD Cl K	0	$ –	$ –	$ –	$ –	$ –
		1		6,060,366	5,837,893	6,060,366	222,473
State Street	S&P 500 Index NL Series FD Cl K	0	–	–	–	–	–
				3,016,183	1,243,490	3,016,183	1,772,693
Vanguard	FTSE Developed Markets ETF	1	1,092,323	–	1,092,323	1,092,323	–
		4	–	175,966	159,064	175,966	16,901
Vanguard	FTSE Emerging Markets ETF	1	784,569	–	784,569	784,569	
		4	–	94,991	86,478	94,991	8,513
Vanguard	500 Index Fund Shares ETF	2	2,438,751	–	2,438,751	2,438,751	
		4	–	297,846	276,531	297,846	21,315
Vanguard	Mid-Cap ETF	3	2,058,269	–	2,058,269	2,058,269	
		2	–	110,183	104,751	110,183	5,432
Vanguard	Small-Cap ETF	3	1,661,748	–	1,661,748	1,661,748	
		3	–	185,445	176,140	185,445	9,304

There were no category (i), (ii) or (iv) reportable transactions during 2025.
Note: Columns (e) and (f) are not applicable in 2025.

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Schedule SB, line 26a — Schedule of Active Participant Data

Attained age	Years of credited service										
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	Total
Under 25											
25–29											
30–34											
35–39											
40–44					1						1
45–49			1	1	2	1	1				6
50–54					3	3	1	2			9
55–59		1	2		5	2	2	1			13
60–64			1		6	6	3	3			19
65–69				1	2	5		1			9
70 & up				1	2		2	2			7
Total		1	4	3	21	17	9	9			64

In each cell, the top number is the count of active participants for each age/service combination.

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

ACTUARIAL ASSUMPTIONS FOR JANUARY 1, 2025 FUNDING VALUATION

Discount rate sponsor elections		
• Segment rates or full yield curve	Segment	
• Look-back months	0	
	Stabilized	**Nonstabilized**
• First 5 years	5.00%	5.00%
• Next 15 years	5.27%	5.27%
• Over 20 years	5.50%	5.40%
	Rationale: These rates are prescribed by IRS and based on the plan sponsor's election.	
Mortality sponsor elections		
• Healthy participants	Section 430(h)(3) prescribed static combined mortality tables for 2024 plan year funding valuations. These tables are based on the Pri-2012 mortality tables projected with the IRS modified MP-2021 mortality improvement scale, in accordance with IRS regulation 1.430(h)(3)-1. **Rationale:** These tables are prescribed by the IRS and based on plan sponsor's election.	
• Pre-1995 disabilities	Revenue Ruling 96-7 table for participants who became disabled before 1995	
• Post-1994 disabilities	Revenue Ruling 96-7 table for participants who became disabled after 1994 and are eligible for Social Security disability benefits	
417(e) lump sums	As required by PPA, liabilities are determined based on the underlying annuity used by the plan to determine the lump sum amount, rather than valuing the lump sum payment. This annuity is valued based on funding interest rates and current year 417(e) unisex mortality.	
Other economic assumptions		
• Salary increases	Not applicable	
• Expenses	Administrative expenses will be paid by the employer.	

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

Demographic assumptions

- Withdrawal

90% of the Mercer modified 2003 SOA Turnover Table through age 49, 95% for all ages 50-59, 15% for all ages 60-64, and 30% for all ages above 64. See table of sample rates.

Rationale: Withdrawal rates were developed based on an experience study undertaken in 2023 using data from 2018-2022. The expectation is that this period will be representative of anticipated future experience.

- Disability incidence

1985 Disability Study – Class 3. See table of sample rates.

- Retirement age

Rates shown below.

Attained age	Percentage
55-61	4%
62-65	13
66-69	30
70 and Above	100
Average retirement age	63.5

Participants whose age plus service equals or exceeds 85, are assumed to retire at the below rates.

Attained age	Percentage
55-61	4%
61-64	11
65-69	23
70 and Above	100
Average retirement age	63.8

Rationale: The retirement rates are based on an experience study undertaken in 2023 using data from 2018-2022. The expectation is that the future retirement patterns and circumstances of the employer will not differ significantly from the period studied.

- Benefit commencement age for

  – Future vested deferred: 63 with 10 years of vesting service, 65 otherwise for annuity Immediate for lump sum

  – Current vested deferred: 63 with 10 years of vesting service, 65 otherwise

  – Disabilities: 63 with 10 years of vesting service, 65 otherwise

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

	Rationale: The assumed commencement age is based on an experience study undertaken in 2023 using data from 2018-2022. The expectation is that the retirement patterns of vested deferred participants will not differ significantly from the period studied.		
• Spouse assumptions	**Male participants**		**Female participants**
– Percentage married	65%		30%
– Spouse age difference	3 years younger		3 years older
Form of payment	**Lump sum**	**Single life**	**100% J&S**
• Active retirements	70%	5%	25%
• Future vested deferred	65%	35%	0%
• Future disabilities	30%	50%	20%
• Current vested deferred	50%	50%	0%
	Rationale: The annuity form of payment assumption was based on an experience study undertaken in 2023 using data from 2018-2022 along with the results from the prior experience study.		

Table of sample rates

Attained age	Percentage			
	Withdrawal		Disability incidence	
	Male	Female	Male	Female
25	6.21%	6.21%	0.219%	0.150%
30	6.21	6.21	0.309	0.252
35	6.21	6.21	0.431	0.388
40	6.21	6.21	0.597	0.547
45	5.49	5.49	0.829	0.777
50	5.32	5.32	1.224	1.201
55	4.18	4.18	2.118	1.962
60	15.00	15.00	3.240	2.326
65	30.00	30.00	4.369	2.718

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

Actuarial Methods

Asset Methods

The asset valuation method is the fair market value.

Participant Methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included**: The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan's eligibility requirements are included in the valuation of liabilities.
- **Participants excluded**: No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break in service on the valuation date are treated as terminated participants.
- **Insurance contracts**: The plan does not have any insurance contracts.

Minimum Funding Methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Asset	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
Category (iii) – Series of transactions in excess of 5% of plan assets							
BlackRock/iShares	TR Ishares 5-10 Year Investment Grade	4	$ 2,606,592	$ –	$ 2,606,592	$ 2,606,592	$ –
		0	–	–	–	–	–
BlackRock/iShares	Core 10+ Year USD Bond ETF	3	2,308,726	–	2,308,726	2,308,726	–
		2	–	154,957	153,458	154,957	1,499
BlackRock/iShares	10+ Year Investment Grade Corporate	3	3,038,043	–	3,038,043	3,038,043	–
		2	–	137,861	135,362	135,362	2,499
Vanguard	Long-Term Corporate Bond	1	7,597,057	–	7,597,057	7,597,057	–
		2	–	7,467,951	7,597,057	7,467,951	(129,106)
Bank of America	Money market investment	26	1,017,778	–	1,017,778	1,017,778	–
		26	–	604,156	604,156	604,156	–
State Street	Russell Small/Mid Cap Index NL Series FD Cl S	0	–	–	–	–	–
		1	–	1,880,468	1,354,631	1,880,468	525,836
State Street	International Index NL Series FD Cl C	0	–	–	–	–	–
		1	–	3,212,499	2,158,646	3,212,499	1,053,853

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4j – Schedule of Reportable Transactions (continued)

Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Asset	Number of Transactions	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
State Street	U.S. Bond Index NL Series FD Cl K	0	$ –	$ –	$ –	$ –	$ –
		1		6,060,366	5,837,893	6,060,366	222,473
State Street	S&P 500 Index NL Series FD Cl K	0	–	–	–	–	–
				3,016,183	1,243,490	3,016,183	1,772,693
Vanguard	FTSE Developed Markets ETF	1	1,092,323	–	1,092,323	1,092,323	–
		4	–	175,966	159,064	175,966	16,901
Vanguard	FTSE Emerging Markets ETF	1	784,569	–	784,569	784,569	
		4	–	94,991	86,478	94,991	8,513
Vanguard	500 Index Fund Shares ETF	2	2,438,751	–	2,438,751	2,438,751	
		4	–	297,846	276,531	297,846	21,315
Vanguard	Mid-Cap ETF	3	2,058,269	–	2,058,269	2,058,269	
		2	–	110,183	104,751	110,183	5,432
Vanguard	Small-Cap ETF	3	1,661,748	–	1,661,748	1,661,748	
		3	–	185,445	176,140	185,445	9,304

There were no category (i), (ii) or (iv) reportable transactions during 2025.
Note: Columns (e) and (f) are not applicable in 2025.

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
HELENA AGRI-ENTERPRISES, LLC PENSION PLAN FOR PRODUCTION WORKERS & TRUCK DRIVERS

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
HELENA AGRI-ENTERPRISES, LLC

D Employer Identification Number (EIN)
71-0293688

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

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

Part I Basic Information

1	Enter the valuation date: Month 01 Day 01 Year 2025		
2	Assets:		
	a Market value	2a	15,258,244
	b Actuarial value	2b	15,258,244

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	173	4,211,716	4,211,716
b For terminated vested participants	162	2,340,449	2,340,449
c For active participants	64	2,662,313	2,789,492
d Total	399	9,214,478	9,341,657

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	5.33%
6	Target normal cost		
	a Present value of current plan year accruals	6a	83,810
	b Expected plan-related expenses	6b	0
	c Target normal cost	6c	83,810

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

SRF — Signature of actuary

10-5-2026 — Date

STACY R. FRANKLIN, ASA, EA — Type or print name of actuary

2607095 — Most recent enrollment number

MERCER — Firm name

901-684-3091 — Telephone number (including area code)

6410 POPLAR AVE, SUITE 540

MEMPHIS TN 38119 — 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)	4,658,707	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	4,658,707	0
10	Interest on line 9 using prior year's actual return of 7.83%	364,777	0
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 5.18%		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	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	5,023,484	0

Part III Funding Percentages

14	Funding target attainment percentage	14	109.56%
15	Adjusted funding target attainment percentage	15	163.33%
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	152.07%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [ ] Yes [X] No

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

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

b Applicable month (enter code) — **21b**: 0

22 Weighted average retirement age — **22**: 64

23 Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

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

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... ☐ Yes ☒ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment — **27**:

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years — **28**: 0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) — **29**: 0

30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29) — **30**: 0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c) — **31a**: 83,810

b Excess assets, if applicable, but not greater than line 31a — **31b**: 83,810

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount — **33**:

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) — **34**: 0

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

36 Additional cash requirement (line 34 minus line 35) — **36**: 0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) — **37**: 0

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36) — **38a**: 0

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances — **38b**: 0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) — **39**: 0

40 Unpaid minimum required contributions for all years — **40**: 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021

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

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown separately for participants whose age plus service equals or exceeds 85 and rest of the participants. The average retirement age is 64.

A. For participants whose age plus service is less than 85

(A) Retirement age	(B) Retirement percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
55	4.0%	10,000	400	22,000
56	4.0%	9,600	384	21,504
57	4.0%	9,216	369	21,012
58	4.0%	8,847	354	20,526
59	4.0%	8,493	340	20,045
60	4.0%	8,154	326	19,569
61	13.0%	7,828	1,018	62,073
62	13.0%	6,810	885	54,889
63	13.0%	5,925	770	48,523
64	13.0%	5,154	670	42,885
65	13.0%	4,484	583	37,893
66	30.0%	3,901	1,170	77,248
67	30.0%	2,731	819	54,893
68	30.0%	1,912	574	38,999
69	30.0%	1,338	401	27,701
70	100.00%	937	937	65,571
Total			10,000	635,331
Average				63.5

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

B. For participants whose age plus services equals or exceeds 85

(A) Retirement age	(B) Retirement percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
55	4.00%	10,000	400	22,000
56	4.00%	9,600	384	21,504
57	4.00%	9,216	369	21,012
58	4.00%	8,847	354	20,526
59	4.00%	8,493	340	20,045
60	4.00%	8,154	326	19,569
61	11.00%	7,828	861	52,523
62	11.00%	6,967	766	47,512
63	11.00%	6,200	682	42,968
64	11.00%	5,518	607	38,848
65	23.00%	4,911	1,130	73,422
66	23.00%	3,782	870	57,405
67	23.00%	2,912	670	44,872
68	23.00%	2,242	516	35,067
69	23.00%	1,726	397	27,399
70	100.00%	1,329	1,329	93,055
Total			10,000	637,726
Average				63.8

(A) Category	(B) Number of Employees (proportion)	(C) Average Retirement Age (ARA)	(D) Number of employees x ARA (B) x (C)
A	8	63.5	508
B	92	63.8	5,870
Total	100		6,378
Average			63.8

Schedule SB, Part V — Summary of Plan Provisions

Summary of major plan provisions

• Effective date and plan year	Original plan: January 1, 1981 Restated plan: January 1, 2013 Most recent plan amendment: April 1, 2014 Plan year: January 1 – December 31
• Status of the plan	The plan has ongoing benefit accruals, but employees hired after December 31, 2006 are not eligible to participate in the plan.
• Significant events that occurred during the year	None
Definitions	
• Participation	Employees who are hourly paid production workers and truck drivers are automatically eligible to participate in the plan when the following conditions are met: (a) Employee was an active participant in the Profit Sharing Plan on December 31, 1980, or (b) Employee reaches age 21 and works at least one thousand (1,000) hours during first year of employment, and (c) Employee was hired on or before December 31, 2006.
• Employee contributions	None required nor permitted
• Service considered	One year of service will be credited for each calendar year in which a participant works at least 1,000 hours. Service credit will not be given for service prior to January 1, 1974. Additional service credit will not be given to any eligible employee who separates from service and rehires after January 1, 2007.
Normal retirement	
• Eligibility	Normal retirement date is the later of (i) the day on which an Employee attains age 65, or (ii) the earlier of (A) the fifth (5th) anniversary of the date of his participation, or (B) the completion of five (5) Years of Vesting Service. However, employees who were participants on January 1, 1981 and were over age 65 will have a normal retirement date of January 1, 1981.
• Benefit	The monthly normal retirement benefit will be (a) + (b) where: $7.00 * Credited Service earned prior to January 1, 1990 $20.00 * Credited Service earned after January 1, 1990
Early retirement	
• Eligibility	Early retirement is permitted at any time after the attainment of age 55 and the completion of 10 years of vesting service.
• Benefit	The early retirement benefit will be equal to the normal retirement benefit, but reduced by 5/12% per each full month that the benefit starting date precedes normal retirement date. However, if age plus service total 85 or more at date of termination, the early retirement benefit will not be reduced.

Schedule SB, Part V — Summary of Plan Provisions

Late retirement	
• Benefit	Actual retirement may be deferred. The retirement benefit will continue to accrue.
Deferred vested	
• Eligibility	If employment is terminated after the completion of five years of vesting service (or ten years if termination occurred before January 1, 1989). The participant may elect for the benefit to commence early, provided the ten year service requirement is met at termination. Alternatively, a vested participant may elect a lump sum upon termination of employment.
• Benefit	The participant will be entitled to a benefit at normal retirement date. This benefit is reduced for early commencement as described in the Early Retirement Section.
Disability	
• Eligibility	Participant has completed five years of service and (a) is not covered under the Company's Long Term Disability Plan and (b) is receiving disability benefits under Social Security.
• Benefit	The monthly disability benefit is equal to the benefit earned prior to the date of disability not reduced for early commencement. The benefit is also payable in a lump sum equal to the actuarial present value of the disability benefit.
Pre-retirement death	
• Eligibility	A married vested participant who dies shall be eligible for a death benefit.
• Benefit	The amount of the death benefit shall be the monthly pension due to the spouse had the joint and 50% survivor option been elected immediately before the death of the participant. The spouse may also elect a lump sum equal to the actuarial present value of the death benefit.
Form of benefits	
• Automatic form for unmarried participants	Single Life Annuity
• Automatic form for married participants	Joint & 50% Survivor Annuity
• Optional forms	Joint & 25% Survivor Annuity Joint & 75% Survivor Annuity Joint & 100% Survivor Annuity Lump Sum Payment

Schedule SB, Part V — Summary of Plan Provisions

• **Optional form conversion factors**	
- for annuities	7% and 417(e) mortality table
- for lump sums	417(e) interest rates as of the November prior to the plan year in which the lump sum is paid and 417(e) mortality. Lump sum is based on the early retirement benefit if the participant is eligible for retirement upon termination.
Miscellaneous	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2025, the limit is $280,000.

Benefits included or excluded

Unless noted below, all benefits provided by the plan are included in this valuation:

- **Plan amendments included:**
  - Helena Agri-Enterprises, LLC added an ongoing lump sum optional form of payment to all active participants who terminate employment on or after April 1, 2014.
- **Plan amendments excluded:** Amendments adopted after the valuation date or effective after the current plan year are excluded from the valuation.
- **Late retirement increases:**
  - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement; therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70½. This valuation includes increases for current participants over age 70.
  - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued including the late retirement actuarial increase.
- **IRS Section 415(b) benefit limitations:** The limitations of Internal Revenue Code Section 415(b) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.

Plan Provision Changes Since Prior Valuation

Maximum compensation amounts and maximum benefit amounts under IRS rules were updated from 2024 to 2025.

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets
(Held at End of Year)

December 31, 2025

SETTLEMENT DATE P O R T F O L I O S U M M A R Y

BANK OF AMERICA

AS OF 12/31/25

ACCOUNT
51-16-700-0186402 HELENA AGRI-ENTERPRISES PW TD

DESCRIPTION	BOOK VALUE	MARKET VALUE	% OF MARKET	UNREALIZED GAIN/LOSS	ACCRUED INCOME	MARKET YIELD	EST ANNUAL INCOME
CASH EQUIVALENTS	413,622.12	413,622.12	2.534	0.00	1,000.97	3.450	14,269.96
FIXED INCOME	7,664,542.28	7,783,528.52	47.688	118,986.24	0.00	4.934	384,057.36
EQUITIES							
OTHER	7,232,696.35	8,124,623.71	49.778	891,927.36	0.00	1.400	113,722.15
TOTAL INVESTMENTS	15,310,860.75	16,321,774.35	100.000	1,010,913.60	1,000.97	3.137	512,049.47
ACCRUED INCOME	1,000.97	1,000.97					
TOTAL ASSETS	15,311,861.72	16,322,775.32					

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE — PORTFOLIO DETAIL — BANK OF AMERICA

AS OF 12/31/25

ACCOUNT 51-16-700-0186402 — HELENA AGRI-ENTERPRISES PW TD — PAGE 4

PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	CASH EQUIVALENTS								
	MONEY MARKET FUNDS								
	BANK OF AMERICA TEMPORARY OVERNIGHT DEPOSIT CUSIP NO: 99Z490460		1.000			.09			
413,622.120	BANK OF AMERICA MONEY MARKET SAVINGS ACCOUNT CUSIP NO: 994458719	413,622.12	1.000	413,622.12		1,000.88		3.450	14,269.96
	TOTAL MONEY MARKET FUNDS	413,622.12		413,622.12		1,000.97		3.450	14,269.96
	TOTAL CASH EQUIVALENTS	413,622.12		413,622.12		1,000.97		3.450	14,269.96
	FIXED INCOME								
	OTHER FIXED INCOME								
49,449.000	ISHARES TR ISHARES 5-10 YEAR INVESTMENT GRADE CORPORATE BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464288638	2,606,592.18	53.880	2,664,312.12	57,719.94			4.703	125,305.60
43,665.000	ISHARES CORE 10+ YEAR USD BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464289479	2,155,268.48	49.699	2,170,111.20	14,842.72			4.869	105,662.92
58,456.000	ISHARES 10+ YEAR INV GRADE CORPORATE BOND ETF MOODYS: NA S&P: NA CUSIP NO: 464289511	2,902,681.62	50.450	2,949,105.20	46,423.58			5.191	153,088.84

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE — PORTFOLIO DETAIL — BANK OF AMERICA

AS OF 12/31/25

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PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	TOTAL OTHER FIXED INCOME	7,664,542.28		7,783,528.52	118,986.24			4.934	384,057.36
	TOTAL FIXED INCOME	7,664,542.28		7,783,528.52	118,986.24			4.934	384,057.36
	EQUITIES								
	OTHER EQUITIES								
18,200.000	VANGUARD FTSE DEVELOPED MARKETS ETF CUSIP NO: 921943858	933,259.18	62.470	1,136,954.00	203,694.82			3.003	34,146.84
15,039.000	VANGUARD FTSE EMERGING MARKETS ETF CUSIP NO: 922042858	698,090.80	53.760	808,496.64	110,405.84			2.698	21,814.07
3,933.000	VANGUARD 500 INDEX FUND SHS ETF CUSIP NO: 922908363	2,162,220.35	627.130	2,466,502.29	304,281.94			1.137	28,034.82
7,234.000	VANGUARD MID-CAP ETF CUSIP NO: 922908629	1,953,517.22	290.220	2,099,451.48	145,934.26			.373	7,831.17
6,254.000	VANGUARD SMALL CAP CUSIP NO: 922908751	1,485,608.80	257.950	1,613,219.30	127,610.50			1.357	21,895.25
	TOTAL OTHER EQUITIES	7,232,696.35		8,124,623.71	891,927.36			1.400	113,722.15
	TOTAL EQUITIES	7,232,696.35		8,124,623.71	891,927.36			1.400	113,722.15
	TOTAL INVESTMENTS	15,310,860.75		16,321,774.35	1,010,913.60	1,000.97		3.137	512,049.47
	TOTAL CASH								

Helena Agri-Enterprises, LLC Pension Plan
for Production Workers and Truck Drivers

EIN 71-0293688 Plan #003

Schedule H, Line 4i – Schedule of Assets (continued)
(Held at End of Year)

SETTLEMENT DATE

P O R T F O L I O D E T A I L

BANK OF AMERICA

AS OF 12/31/25

ACCOUNT
51-16-700-0186402

HELENA AGRI-ENTERPRISES PW TD

PAR VALUE/ SHARES	ASSET DESCRIPTION	BOOK VALUE	MARKET PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS	ACCRUED INCOME	YTM	MARKET YIELD	EST ANNUAL INCOME
	ACCRUED INCOME	1,000.97		1,000.97					
	TOTAL ASSETS	15,311,861.72		16,322,775.32					