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| <b>Form 5500</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security<br>Administration<br><br>Pension Benefit Guaranty Corporation | <b>Annual Return/Report of Employee Benefit Plan</b><br>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).<br><br><p style="text-align: center;">▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p> | OMB Nos. 1210-0110<br>1210-0089<br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
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| <b>Part I</b>                                                                                            | <b>Annual Report Identification Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>A</b>                                                                                                 | This return/report is for: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> a multiemployer plan         </div> <div> <input type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)         </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> a single-employer plan         </div> <div> <input type="checkbox"/> a DFE (specify) _____         </div> </div> |
| <b>B</b>                                                                                                 | This return/report is: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> the first return/report         </div> <div> <input type="checkbox"/> the final return/report         </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> an amended return/report         </div> <div> <input type="checkbox"/> a short plan year return/report (less than 12 months)         </div> </div>                                                                                                          |
| <b>C</b>                                                                                                 | If the plan is a collectively-bargained plan, check here. . . . . ▶ <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>D</b>                                                                                                 | Check box if filing under: <div style="display: flex; justify-content: space-between;"> <div> <input checked="" type="checkbox"/> Form 5558         </div> <div> <input type="checkbox"/> automatic extension         </div> <div> <input type="checkbox"/> the DFVC program         </div> </div> <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> special extension (enter description)         </div> </div>                                                                                                                                     |
| <b>E</b>                                                                                                 | If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |

|                |                                                                                                                                                                                                                                                                                                                                                                  |
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| <b>Part II</b> | <b>Basic Plan Information—enter all requested information</b>                                                                                                                                                                                                                                                                                                    |
| <b>1a</b>      | Name of plan<br><u>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</u>                                                                                                                                                                                                                                                                                            |
| <b>1b</b>      | Three-digit plan number (PN) ▶ <u>003</u>                                                                                                                                                                                                                                                                                                                        |
| <b>1c</b>      | Effective date of plan<br><u>05/23/2003</u>                                                                                                                                                                                                                                                                                                                      |
| <b>2a</b>      | Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br><u>NOVELIS ALR ROLLED PRODUCTS, INC.</u><br><br><u>3560 LENOX RD NE #2000</u><br><u>ATLANTA, GA 30326</u> |
| <b>2b</b>      | Employer Identification Number (EIN)<br><u>27-1539745</u>                                                                                                                                                                                                                                                                                                        |
| <b>2c</b>      | Plan Sponsor's telephone number<br><u>404-760-4000</u>                                                                                                                                                                                                                                                                                                           |
| <b>2d</b>      | Business code (see instructions)<br><u>238300</u>                                                                                                                                                                                                                                                                                                                |

**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.

|                  |                                                   |            |                                                              |
|------------------|---------------------------------------------------|------------|--------------------------------------------------------------|
| <b>SIGN HERE</b> | Filed with authorized/valid electronic signature. | 10/13/2022 | CINDY JACOVETTY                                              |
|                  | Signature of plan administrator                   | Date       | Enter name of individual signing as plan administrator       |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of employer/plan sponsor                | Date       | Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b> |                                                   |            |                                                              |
|                  | Signature of DFE                                  | Date       | Enter name of individual signing as DFE                      |

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)  
v. 210624

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| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     | <b>3b</b> Administrator's EIN<br><br><b>3c</b> Administrator's telephone number<br><br><div style="background-color: #cccccc; height: 40px; width: 100%;"></div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>4</b> 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:<br><b>a</b> Sponsor's name <b>ALERIS ROLLED PRODUCTS, INC.</b><br><b>c</b> Plan Name <b>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</b>                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | <b>4b</b> EIN <b>27-1539745</b><br><b>4d</b> PN <b>003</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><b>5</b></td> <td style="width: 95%; text-align: right;"><b>177</b></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>5</b>                            | <b>177</b>                             |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>5</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>177</b>                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     | <table style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="background-color: #cccccc; height: 20px;"></td> </tr> <tr> <td style="width: 5%; text-align: center;"><b>6a(1)</b></td> <td style="width: 95%; text-align: right;"><b>26</b></td> </tr> <tr> <td style="text-align: center;"><b>6a(2)</b></td> <td style="text-align: right;"><b>25</b></td> </tr> <tr> <td style="text-align: center;"><b>6b</b></td> <td style="text-align: right;"><b>78</b></td> </tr> <tr> <td style="text-align: center;"><b>6c</b></td> <td style="text-align: right;"><b>54</b></td> </tr> <tr> <td style="text-align: center;"><b>6d</b></td> <td style="text-align: right;"><b>157</b></td> </tr> <tr> <td style="text-align: center;"><b>6e</b></td> <td style="text-align: right;"><b>19</b></td> </tr> <tr> <td style="text-align: center;"><b>6f</b></td> <td style="text-align: right;"><b>176</b></td> </tr> <tr> <td style="text-align: center;"><b>6g</b></td> <td></td> </tr> <tr> <td style="text-align: center;"><b>6h</b></td> <td style="text-align: right;"><b>0</b></td> </tr> </table> |                                     |                                        | <b>6a(1)</b>             | <b>26</b>                                  | <b>6a(2)</b>                                                                                                                      | <b>25</b>                           | <b>6b</b>                           | <b>78</b>                                                                                           | <b>6c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>54</b>                     | <b>6d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>157</b>                          | <b>6e</b>                        | <b>19</b>                | <b>6f</b>                | <b>176</b>                                    | <b>6g</b>                |                                            | <b>6h</b>                          | <b>0</b>                            |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
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| <b>6a(1)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>26</b>                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6a(2)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | <b>25</b>                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6b</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>78</b>                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>54</b>                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>157</b>                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6e</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>19</b>                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6f</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>176</b>                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6g</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>6h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <b>0</b>                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     | <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><b>7</b></td> <td style="width: 95%;"></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | <b>7</b>                            |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br><b>1B 1I 3D 3H</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>9a</b> Plan funding arrangement (check all that apply)<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">(1)</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td>Insurance</td> </tr> <tr> <td style="text-align: center;">(2)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Code section 412(e)(3) insurance contracts</td> </tr> <tr> <td style="text-align: center;">(3)</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Trust</td> </tr> <tr> <td style="text-align: center;">(4)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>General assets of the sponsor</td> </tr> </table>                                      | (1)                                 | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Insurance                           | (2)                                    | <input type="checkbox"/> | Code section 412(e)(3) insurance contracts | (3)                                                                                                                               | <input checked="" type="checkbox"/> | Trust                               | (4)                                                                                                 | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | General assets of the sponsor | <b>9b</b> Plan benefit arrangement (check all that apply)<br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">(1)</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td>Insurance</td> </tr> <tr> <td style="text-align: center;">(2)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Code section 412(e)(3) insurance contracts</td> </tr> <tr> <td style="text-align: center;">(3)</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Trust</td> </tr> <tr> <td style="text-align: center;">(4)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>General assets of the sponsor</td> </tr> </table> |                                     | (1)                              | <input type="checkbox"/> | Insurance                | (2)                                           | <input type="checkbox"/> | Code section 412(e)(3) insurance contracts | (3)                                | <input checked="" type="checkbox"/> | Trust                               | (4)                                     | <input type="checkbox"/> | General assets of the sponsor       |                                               |     |                          |                                            |
| (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | Code section 412(e)(3) insurance contracts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | Trust                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | General assets of the sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | Code section 412(e)(3) insurance contracts                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | Trust                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | General assets of the sponsor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| <b>a Pension Schedules</b><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">(1)</td> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td><b>R</b> (Retirement Plan Information)</td> </tr> <tr> <td style="text-align: center;">(2)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</td> </tr> <tr> <td style="text-align: center;">(3)</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td><b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</td> </tr> </table> |                                     | (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <input checked="" type="checkbox"/> | <b>R</b> (Retirement Plan Information) | (2)                      | <input type="checkbox"/>                   | <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary | (3)                                 | <input checked="" type="checkbox"/> | <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary | <b>b General Schedules</b><br><table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">(1)</td> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td><b>H</b> (Financial Information)</td> </tr> <tr> <td style="text-align: center;">(2)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>I</b> (Financial Information – Small Plan)</td> </tr> <tr> <td style="text-align: center;">(3)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>0 A</b> (Insurance Information)</td> </tr> <tr> <td style="text-align: center;">(4)</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td><b>C</b> (Service Provider Information)</td> </tr> <tr> <td style="text-align: center;">(5)</td> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td><b>D</b> (DFE/Participating Plan Information)</td> </tr> <tr> <td style="text-align: center;">(6)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td><b>G</b> (Financial Transaction Schedules)</td> </tr> </table> |                               | (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> | <b>H</b> (Financial Information) | (2)                      | <input type="checkbox"/> | <b>I</b> (Financial Information – Small Plan) | (3)                      | <input type="checkbox"/>                   | <b>0 A</b> (Insurance Information) | (4)                                 | <input checked="" type="checkbox"/> | <b>C</b> (Service Provider Information) | (5)                      | <input checked="" type="checkbox"/> | <b>D</b> (DFE/Participating Plan Information) | (6) | <input type="checkbox"/> | <b>G</b> (Financial Transaction Schedules) |
| (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <b>R</b> (Retirement Plan Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <b>H</b> (Financial Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (2)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | <b>I</b> (Financial Information – Small Plan)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | <b>0 A</b> (Insurance Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <b>C</b> (Service Provider Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (5)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input checked="" type="checkbox"/> | <b>D</b> (DFE/Participating Plan Information)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                                        |                          |                                            |                                                                                                                                   |                                     |                                     |                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                                  |                          |                          |                                               |                          |                                            |                                    |                                     |                                     |                                         |                          |                                     |                                               |     |                          |                                            |
| (6)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/>            | <b>G</b> (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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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 \_\_\_\_\_

|                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                    |                                                                                           |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><br>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).<br><br>▶ <b>File as an attachment to Form 5500 or 5500-SF.</b> | OMB No. 1210-0110<br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

▶ **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.

|                                                                                                                                           |                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A</b> Name of plan<br><u>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</u>                                                            | <b>B</b> Three-digit plan number (PN) ▶ <u>003</u>                                                                                                      |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br><u>NOVELIS ALR ROLLED PRODUCTS, INC.</u>                      | <b>D</b> Employer Identification Number (EIN)<br><u>27-1539745</u>                                                                                      |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B | <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |

|                                                                                                                                                                                                                |                                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b>                                                                                                                                                                                                  | <b>Basic Information</b>                                                                                              |
| <b>1</b> Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>                                                                                                                              |                                                                                                                       |
| <b>2</b> Assets:                                                                                                                                                                                               |                                                                                                                       |
| <b>a</b> Market value .....                                                                                                                                                                                    | <b>2a</b> <u>4826769</u>                                                                                              |
| <b>b</b> Actuarial value .....                                                                                                                                                                                 | <b>2b</b> <u>4406197</u>                                                                                              |
| <b>3</b> Funding target/participant count breakdown                                                                                                                                                            |                                                                                                                       |
| <b>a</b> For retired participants and beneficiaries receiving payment.....                                                                                                                                     | (1) Number of participants <u>97</u> (2) Vested Funding Target <u>2137167</u> (3) Total Funding Target <u>2137167</u> |
| <b>b</b> For terminated vested participants.....                                                                                                                                                               | <u>54</u> <u>1180109</u> <u>1180109</u>                                                                               |
| <b>c</b> For active participants .....                                                                                                                                                                         | <u>26</u> <u>632150</u> <u>740665</u>                                                                                 |
| <b>d</b> Total.....                                                                                                                                                                                            | <u>177</u> <u>3949426</u> <u>4057941</u>                                                                              |
| <b>4</b> If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>                                                                                          |                                                                                                                       |
| <b>a</b> Funding target disregarding prescribed at-risk assumptions .....                                                                                                                                      | <b>4a</b>                                                                                                             |
| <b>b</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..... | <b>4b</b>                                                                                                             |
| <b>5</b> Effective interest rate .....                                                                                                                                                                         | <b>5</b> <u>5.63</u> %                                                                                                |
| <b>6</b> Target normal cost.....                                                                                                                                                                               |                                                                                                                       |
| <b>a</b> Present value of current plan year accruals.....                                                                                                                                                      | <b>6a</b> <u>0</u>                                                                                                    |
| <b>b</b> Expected plan-related expenses .....                                                                                                                                                                  | <b>6b</b> <u>40000</u>                                                                                                |
| <b>c</b> Total (line 6a + line 6b) .....                                                                                                                                                                       | <b>6c</b> <u>40000</u>                                                                                                |

**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.

|                                                                                                    |  |                                                               |
|----------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------|
| <b>SIGN HERE</b>                                                                                   |  | <u>09/14/2022</u><br>Date                                     |
| Signature of actuary                                                                               |  | <u>20-08763</u><br>Most recent enrollment number              |
| <u>ROCHELLE RAMIREZ, ASA, EA</u><br>Type or print name of actuary                                  |  | <u>678-684-0679</u><br>Telephone number (including area code) |
| <u>WILLIS TOWERS WATSON US LLC</u><br>Firm name                                                    |  |                                                               |
| <u>5 CONCOURSE PARKWAY</u><br><u>18TH FLOOR</u><br><u>ATLANTA, GA 30328</u><br>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 ☐

**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.**

**Schedule SB (Form 5500) 2021**  
**v. 201209**

**Part II Beginning of Year Carryover and Prefunding Balances**

|                                                                                                                                                                      | (a) Carryover balance | (b) Prefunding balance |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|------------------------|
| <b>7</b> Balance at beginning of prior year after applicable adjustments (line 13 from prior year) .....                                                             | 0                     | 0                      |
| <b>8</b> Portion elected for use to offset prior year's funding requirement (line 35 from prior year) .....                                                          | 0                     | 0                      |
| <b>9</b> Amount remaining (line 7 minus line 8) .....                                                                                                                | 0                     | 0                      |
| <b>10</b> Interest on line 9 using prior year's actual return of <u>15.10</u> % .....                                                                                | 0                     | 0                      |
| <b>11</b> Prior year's excess contributions to be added to prefunding balance:                                                                                       |                       |                        |
| <b>a</b> Present value of excess contributions (line 38a from prior year) .....                                                                                      |                       | 60099                  |
| <b>b(1)</b> Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.45</u> % ..... |                       | 3275                   |
| <b>b(2)</b> Interest on line 38b from prior year Schedule SB, using prior year's actual return .....                                                                 |                       | 0                      |
| <b>c</b> Total available at beginning of current plan year to add to prefunding balance .....                                                                        |                       | 63374                  |
| <b>d</b> Portion of (c) to be added to prefunding balance .....                                                                                                      |                       | 0                      |
| <b>12</b> Other reductions in balances due to elections or deemed elections .....                                                                                    | 0                     | 0                      |
| <b>13</b> Balance at beginning of current year (line 9 + line 10 + line 11d – line 12) .....                                                                         | 0                     | 0                      |

**Part III Funding Percentages**

|                                                                                                                                                                            |           |          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>14</b> Funding target attainment percentage .....                                                                                                                       | <b>14</b> | 108.58 % |
| <b>15</b> Adjusted funding target attainment percentage .....                                                                                                              | <b>15</b> | 108.58 % |
| <b>16</b> Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement ..... | <b>16</b> | 97.56 %  |
| <b>17</b> If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage .....                                        | <b>17</b> | %        |

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

| (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees | (a) Date<br>(MM-DD-YYYY) | (b) Amount paid by<br>employer(s) | (c) Amount paid by<br>employees |
|--------------------------|-----------------------------------|---------------------------------|--------------------------|-----------------------------------|---------------------------------|
| 01/14/2022               | 45000                             | 0                               |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
|                          |                                   |                                 |                          |                                   |                                 |
| <b>Totals ▶</b>          |                                   |                                 | <b>18(b)</b>             | 45000                             | <b>18(c)</b> 0                  |

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

|                                                                                                                         |            |       |
|-------------------------------------------------------------------------------------------------------------------------|------------|-------|
| <b>a</b> Contributions allocated toward unpaid minimum required contributions from prior years .....                    | <b>19a</b> | 0     |
| <b>b</b> Contributions made to avoid restrictions adjusted to valuation date .....                                      | <b>19b</b> | 0     |
| <b>c</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date ..... | <b>19c</b> | 42517 |

**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**

|                                                                                                                                                                                              |                        |                        |                        |                                                     |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------|------------------------|-----------------------------------------------------|
| <b>21</b> Discount rate:                                                                                                                                                                     |                        |                        |                        |                                                     |
| <b>a</b> Segment rates:                                                                                                                                                                      | 1st segment:<br>4.75 % | 2nd segment:<br>5.36 % | 3rd segment:<br>6.11 % | <input type="checkbox"/> N/A, full yield curve used |
| <b>b</b> Applicable month (enter code) .....                                                                                                                                                 |                        |                        |                        | <b>21b</b> 0                                        |
| <b>22</b> Weighted average retirement age .....                                                                                                                                              |                        |                        |                        | <b>22</b> 63                                        |
| <b>23</b> Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute |                        |                        |                        |                                                     |

**Part VI Miscellaneous Items**

|                                                                                                                                                                       |                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>24</b> Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>25</b> Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....                                      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| <b>26</b> Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....                            | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>27</b> If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....                                   | <b>27</b>                                                           |

**Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years**

|                                                                                                                                     |           |   |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|---|
| <b>28</b> Unpaid minimum required contributions for all prior years .....                                                           | <b>28</b> | 0 |
| <b>29</b> Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... | <b>29</b> | 0 |
| <b>30</b> Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....                                    | <b>30</b> | 0 |

**Part VIII Minimum Required Contribution For Current Year**

|                                                                                                                                                                                      |                   |                    |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--------------------|---------------|
| <b>31</b> Target normal cost and excess assets (see instructions):                                                                                                                   |                   |                    |               |
| <b>a</b> Target normal cost (line 6c).....                                                                                                                                           | <b>31a</b>        | 40000              |               |
| <b>b</b> Excess assets, if applicable, but not greater than line 31a .....                                                                                                           | <b>31b</b>        | 40000              |               |
| <b>32</b> Amortization installments:                                                                                                                                                 |                   |                    |               |
| <b>a</b> Net shortfall amortization installment .....                                                                                                                                | 0                 | 0                  |               |
| <b>b</b> Waiver amortization installment .....                                                                                                                                       | 0                 | 0                  |               |
| <b>33</b> 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 ..... | <b>33</b>         |                    |               |
| <b>34</b> Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....                                                          | <b>34</b>         | 0                  |               |
|                                                                                                                                                                                      | Carryover balance | Prefunding balance | Total balance |
| <b>35</b> Balances elected for use to offset funding requirement .....                                                                                                               | 0                 | 0                  | 0             |
| <b>36</b> Additional cash requirement (line 34 minus line 35) .....                                                                                                                  | <b>36</b>         | 0                  |               |
| <b>37</b> Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) .....                                                  | <b>37</b>         | 42517              |               |
| <b>38</b> Present value of excess contributions for current year (see instructions)                                                                                                  |                   |                    |               |
| <b>a</b> Total (excess, if any, of line 37 over line 36) .....                                                                                                                       | <b>38a</b>        | 42517              |               |
| <b>b</b> Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....                                                                 | <b>38b</b>        | 0                  |               |
| <b>39</b> Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) .....                                                                      | <b>39</b>         | 0                  |               |
| <b>40</b> Unpaid minimum required contributions for all years .....                                                                                                                  | <b>40</b>         | 0                  |               |

**Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)**

|                                                                                  |                                                                                                                         |  |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|
| <b>41</b> If an election was made to use PRA 2010 funding relief for this plan:  |                                                                                                                         |  |
| <b>a</b> Schedule elected .....                                                  | <input type="checkbox"/> 2 plus 7 years <input type="checkbox"/> 15 years                                               |  |
| <b>b</b> Eligible plan year(s) for which the election in line 41a was made ..... | <input type="checkbox"/> 2008 <input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 |  |

|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        |                                                |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>SCHEDULE C</b><br><b>(Form 5500)</b><br><br>Department of the Treasury<br>Internal Revenue Service<br><br>Department of Labor<br>Employee Benefits Security Administration<br><br>Pension Benefit Guaranty Corporation | <b>Service Provider Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br><br>▶ <b>File as an attachment to Form 5500.</b> | OMB No. 1210-0110                              |
|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        | <b>2021</b>                                    |
|                                                                                                                                                                                                                           |                                                                                                                                                                                                                        | <b>This Form is Open to Public Inspection.</b> |

|                                                                                                    |                                                             |     |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----|
| For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021         |                                                             |     |
| <b>A</b> Name of plan<br>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES                            | <b>B</b> Three-digit plan number (PN) ▶                     | 003 |
|                                                                                                    |                                                             |     |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br>NOVELIS ALR ROLLED PRODUCTS, INC. | <b>D</b> Employer Identification Number (EIN)<br>27-1539745 |     |

|               |                                                        |
|---------------|--------------------------------------------------------|
| <b>Part I</b> | <b>Service Provider Information (see instructions)</b> |
|---------------|--------------------------------------------------------|

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

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

|                                                                                                                   |                                                   |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |                                                   |
| NEUBERGER BERMAN                                                                                                  | 1290 AVENUE OF THE AMERICAS<br>NEW YORK, NY 10104 |

|                                                                                                                   |                                                |
|-------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |                                                |
| FRANKLIN TEMPLETON INVESTMENTS                                                                                    | P.O. BOX 33030<br>ST PETERSBURG, FL 33733-8030 |

|                                                                                                                   |  |
|-------------------------------------------------------------------------------------------------------------------|--|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |  |
| VANGUARD                                                                                                          |  |
| 23-2376849                                                                                                        |  |

|                                                                                                                   |                                                          |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>(b)</b> Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation |                                                          |
| WILLIAM BLAIR FUNDS                                                                                               | 222 WEST ADAMS STREET<br>12TH FLOOR<br>CHICAGO, IL 60606 |

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

---

AMERICAN FUNDS SERVICE COMPANY

P.O. BOX 6007  
INDIANAPOLIS, IN 46206

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

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WELLS FARGO

94-2948313

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

---

DIMENSIONAL FUND ADVISORS

6300 BEE CAVE ROAD  
BUILDING ONE  
AUSTIN, TN 78746

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

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

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

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

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

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

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

CAP FINANCIAL

1680 CAPITAL ONE DRIVE  
MCLEAN, VA 22102

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 50 28                  | NONE                                                                                              | 13812                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

AON HEWITT SERVICES

22-2232264

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 16 50                  | NONE                                                                                              | 13396                                                                  | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

BDO USA LLP

13-5381590

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 10 50                  | NONE                                                                                              | 8580                                                                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

MERCER

13-2834414

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 16 50                  | NONE                                                                                              | 6886                                                                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

JP MORGAN CHASE AND CO.

270 PARK AVE.  
NEW YORK, NY 10017

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 17 28 50<br>51         | NONE                                                                                              | 2585                                                                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

IR&M

100 FEDERAL STREET  
30TH FLOOR  
BOSTON, MD 02110

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| 28 50 51               | NONE                                                                                              | 2197                                                                   | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                  | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                       |                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

WELLS FARGO

94-2948313

| <b>(b)</b><br>Service Code(s) | <b>(c)</b><br>Relationship to employer, employee organization, or person known to be a party-in-interest | <b>(d)</b><br>Enter direct compensation paid by the plan. If none, enter -0-. | <b>(e)</b><br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | <b>(f)</b><br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | <b>(g)</b><br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | <b>(h)</b><br>Did the service provider give you a formula instead of an amount or estimated amount? |
|-------------------------------|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| 10 14 16<br>25 27 50<br>63 64 | TRUSTEE                                                                                                  | 1258                                                                          | Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                         | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                              |                                                                                                                                                                                        | Yes <input type="checkbox"/> No <input type="checkbox"/>                                            |

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

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

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

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

**Part I Service Provider Information (continued)**

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

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

**Part II Service Providers Who Fail or Refuse to Provide Information**

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

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

**Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)**

(complete as many entries as needed)

|                    |                                                           |                     |              |
|--------------------|-----------------------------------------------------------|---------------------|--------------|
| <b>a</b> Name:     | BDO USA, LLP                                              | <b>b</b> EIN:       | 13-5381590   |
| <b>c</b> Position: | ACCOUNTANT                                                |                     |              |
| <b>d</b> Address:  | 1300 EAST NINTH STREET, SUITE 1301<br>CLEVELAND, OH 44114 | <b>e</b> Telephone: | 216-325-1700 |
|                    |                                                           |                     |              |

Explanation: IN AN EFFORT TO STREAMLINE PROCESSES AFTER THE ACQUISITION THAT OCCURRED IN 2020, THE COMPANY IS NOW USING THE SAME AUDITORS FOR ALL PLANS UNDER AUDIT.

|                    |                                                        |                     |              |
|--------------------|--------------------------------------------------------|---------------------|--------------|
| <b>a</b> Name:     | NICHOLAS FRIES                                         | <b>b</b> EIN:       | 13-2834414   |
| <b>c</b> Position: | ENROLLED ACTUARY                                       |                     |              |
| <b>d</b> Address:  | 200 PUBLIC SQUARE<br>SUITE 3760<br>CLEVELAND, OH 44114 | <b>e</b> Telephone: | 216-830-8031 |
|                    |                                                        |                     |              |

Explanation: CHANGE IN ACTUARY AFTER ACQUISITION.

|                    |  |                     |  |
|--------------------|--|---------------------|--|
| <b>a</b> Name:     |  | <b>b</b> EIN:       |  |
| <b>c</b> Position: |  |                     |  |
| <b>d</b> Address:  |  | <b>e</b> Telephone: |  |
|                    |  |                     |  |

Explanation:

|                    |  |                     |  |
|--------------------|--|---------------------|--|
| <b>a</b> Name:     |  | <b>b</b> EIN:       |  |
| <b>c</b> Position: |  |                     |  |
| <b>d</b> Address:  |  | <b>e</b> Telephone: |  |
|                    |  |                     |  |

Explanation:

|                    |  |                     |  |
|--------------------|--|---------------------|--|
| <b>a</b> Name:     |  | <b>b</b> EIN:       |  |
| <b>c</b> Position: |  |                     |  |
| <b>d</b> Address:  |  | <b>e</b> Telephone: |  |
|                    |  |                     |  |

Explanation:

|                                                                                                                                                                                                               |                                                                                                                                                                                                                              |                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>SCHEDULE D</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small> | <b>DFE/Participating Plan Information</b><br><br>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br><br><b>► File as an attachment to Form 5500.</b> | OMB No. 1210-0110<br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection.</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

|                                                                                |                                                  |
|--------------------------------------------------------------------------------|--------------------------------------------------|
| <b>A</b> Name of plan<br><u>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</u> | <b>B</b> Three-digit plan number (PN) <u>003</u> |
|--------------------------------------------------------------------------------|--------------------------------------------------|

|                                                                                                                  |                                                                    |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500<br><u>NOVELIS ALR ROLLED PRODUCTS, INC.</u> | <b>D</b> Employer Identification Number (EIN)<br><u>27-1539745</u> |
|------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|

|               |                                                                                                                                                                                  |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part I</b> | <b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b><br>(Complete as many entries as needed to report all interests in DFEs) |
|---------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: JPM STRAT PROP IRT DECENT MIR HLD

**b** Name of sponsor of entity listed in (a): JPMORGAN CHASE BANK N.A.

|                                       |                               |                                                                                                              |
|---------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>13-6038770-001</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u> |
|---------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER US SMALL/MID CAP EQUITY PORT

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

|                                       |                               |                                                                                                                   |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>03-0566611-003</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>247502</u> |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER NON-US CORE EQUITY PORTFOLIO

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

|                                       |                               |                                                                                                                   |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>03-0566617-009</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>475466</u> |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER PASSIVE LONG GOVT FIX INCOME

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

|                                       |                               |                                                                                                                   |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>51-0560117-010</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>605117</u> |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER EMERGING MARKETS EQUITY PORT

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

|                                       |                               |                                                                                                                   |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>32-6219484-017</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>317599</u> |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER GLOBAL LOW VOLATILITY EQUITY

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

|                                       |                               |                                                                                                                   |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>35-7004395-018</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>380680</u> |
|---------------------------------------|-------------------------------|-------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: MERCER US LAR CAP CORE PASSIVE EQ

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

|                                       |                               |                                                                                                                    |
|---------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------|
| <b>c</b> EIN-PN <u>03-0566613-005</u> | <b>d</b> Entity code <u>C</u> | <b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1210181</u> |
|---------------------------------------|-------------------------------|--------------------------------------------------------------------------------------------------------------------|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: **MERCER ACT LONG CORP FIX INCOME POR**

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

**c** EIN-PN **45-6178743-004**

**d** Entity  
code **C**

**e** Dollar value of interest in MTIA, CCT, PSA, or  
103-12 IE at end of year (see instructions)

**900087**

**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)**

(Complete as many entries as needed to report all participating plans)

**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN**a** Plan name**b** Name of  
plan sponsor**c** EIN-PN

|                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                              |                                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Financial Information</b><br><br>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).<br><br><b>► File as an attachment to Form 5500.</b> | OMB No. 1210-0110<br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|

|                                                                                                           |                                                                    |            |
|-----------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|------------|
| For calendar plan year 2021 or fiscal plan year beginning <b>01/01/2021</b> and ending <b>12/31/2021</b>  |                                                                    |            |
| <b>A</b> Name of plan<br><b>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</b>                            | <b>B</b> Three-digit plan number (PN) ►                            | <b>003</b> |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><b>NOVELIS ALR ROLLED PRODUCTS, INC.</b> | <b>D</b> Employer Identification Number (EIN)<br><b>27-1539745</b> |            |

|               |                                      |
|---------------|--------------------------------------|
| <b>Part I</b> | <b>Asset and Liability Statement</b> |
|---------------|--------------------------------------|

**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 |
|---------------------------------------------------------------------------------------------------|-----------------|-----------------------|-----------------|
| <b>a</b> Total noninterest-bearing cash.....                                                      | <b>1a</b>       |                       |                 |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                      |                 |                       |                 |
| <b>(1)</b> Employer contributions .....                                                           | <b>1b(1)</b>    | 180000                | 45000           |
| <b>(2)</b> Participant contributions.....                                                         | <b>1b(2)</b>    |                       |                 |
| <b>(3)</b> Other .....                                                                            | <b>1b(3)</b>    |                       |                 |
| <b>c</b> General investments:                                                                     |                 |                       |                 |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....  | <b>1c(1)</b>    | 64211                 | 134612          |
| <b>(2)</b> U.S. Government securities .....                                                       | <b>1c(2)</b>    |                       |                 |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                           |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(3)(A)</b> |                       |                 |
| <b>(B)</b> All other .....                                                                        | <b>1c(3)(B)</b> |                       |                 |
| <b>(4)</b> Corporate stocks (other than employer securities):                                     |                 |                       |                 |
| <b>(A)</b> Preferred .....                                                                        | <b>1c(4)(A)</b> |                       |                 |
| <b>(B)</b> Common .....                                                                           | <b>1c(4)(B)</b> |                       |                 |
| <b>(5)</b> Partnership/joint venture interests .....                                              | <b>1c(5)</b>    | 1911778               | 704318          |
| <b>(6)</b> Real estate (other than employer real property) .....                                  | <b>1c(6)</b>    |                       |                 |
| <b>(7)</b> Loans (other than to participants) .....                                               | <b>1c(7)</b>    |                       |                 |
| <b>(8)</b> Participant loans .....                                                                | <b>1c(8)</b>    |                       |                 |
| <b>(9)</b> Value of interest in common/collective trusts.....                                     | <b>1c(9)</b>    | 360769                | 4136630         |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                   | <b>1c(10)</b>   |                       |                 |
| <b>(11)</b> Value of interest in master trust investment accounts.....                            | <b>1c(11)</b>   |                       |                 |
| <b>(12)</b> Value of interest in 103-12 investment entities .....                                 | <b>1c(12)</b>   |                       |                 |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....       | <b>1c(13)</b>   | 2362015               | 164383          |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts)..... | <b>1c(14)</b>   |                       |                 |
| <b>(15)</b> Other.....                                                                            | <b>1c(15)</b>   |                       |                 |

|                    |                                                                  | (a) Beginning of Year | (b) End of Year |
|--------------------|------------------------------------------------------------------|-----------------------|-----------------|
| <b>1d</b>          | Employer-related investments:                                    |                       |                 |
| (1)                | Employer securities.....                                         | <b>1d(1)</b>          |                 |
| (2)                | Employer real property.....                                      | <b>1d(2)</b>          |                 |
| <b>e</b>           | Buildings and other property used in plan operation .....        | <b>1e</b>             |                 |
| <b>f</b>           | Total assets (add all amounts in lines 1a through 1e) .....      | <b>1f</b>             | 4878773 5184943 |
| <b>Liabilities</b> |                                                                  |                       |                 |
| <b>g</b>           | Benefit claims payable .....                                     | <b>1g</b>             |                 |
| <b>h</b>           | Operating payables .....                                         | <b>1h</b>             |                 |
| <b>i</b>           | Acquisition indebtedness.....                                    | <b>1i</b>             |                 |
| <b>j</b>           | Other liabilities.....                                           | <b>1j</b>             |                 |
| <b>k</b>           | Total liabilities (add all amounts in lines 1g through 1j) ..... | <b>1k</b>             | 0 0             |
| <b>Net Assets</b>  |                                                                  |                       |                 |
| <b>l</b>           | Net assets (subtract line 1k from line 1f) .....                 | <b>1l</b>             | 4878773 5184943 |

**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.

|               |                                                                                                        | (a) Amount      | (b) Total |
|---------------|--------------------------------------------------------------------------------------------------------|-----------------|-----------|
| <b>Income</b> |                                                                                                        |                 |           |
| <b>a</b>      | <b>Contributions:</b>                                                                                  |                 |           |
| (1)           | Received or receivable in cash from: <b>(A)</b> Employers .....                                        | <b>2a(1)(A)</b> | 45000     |
|               | <b>(B)</b> Participants .....                                                                          | <b>2a(1)(B)</b> |           |
|               | <b>(C)</b> Others (including rollovers).....                                                           | <b>2a(1)(C)</b> |           |
| (2)           | Noncash contributions.....                                                                             | <b>2a(2)</b>    |           |
| (3)           | Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> ..... | <b>2a(3)</b>    | 45000     |
| <b>b</b>      | <b>Earnings on investments:</b>                                                                        |                 |           |
| (1)           | Interest:                                                                                              |                 |           |
|               | <b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....    | <b>2b(1)(A)</b> | 7         |
|               | <b>(B)</b> U.S. Government securities .....                                                            | <b>2b(1)(B)</b> |           |
|               | <b>(C)</b> Corporate debt instruments .....                                                            | <b>2b(1)(C)</b> |           |
|               | <b>(D)</b> Loans (other than to participants) .....                                                    | <b>2b(1)(D)</b> |           |
|               | <b>(E)</b> Participant loans.....                                                                      | <b>2b(1)(E)</b> |           |
|               | <b>(F)</b> Other .....                                                                                 | <b>2b(1)(F)</b> | 0         |
|               | <b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....                          | <b>2b(1)(G)</b> | 7         |
| (2)           | Dividends: <b>(A)</b> Preferred stock.....                                                             | <b>2b(2)(A)</b> |           |
|               | <b>(B)</b> Common stock .....                                                                          | <b>2b(2)(B)</b> | 162       |
|               | <b>(C)</b> Registered investment company shares (e.g. mutual funds).....                               | <b>2b(2)(C)</b> | 13718     |
|               | <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....              | <b>2b(2)(D)</b> | 13880     |
| (3)           | Rents .....                                                                                            | <b>2b(3)</b>    |           |
| (4)           | Net gain (loss) on sale of assets: <b>(A)</b> Aggregate proceeds .....                                 | <b>2b(4)(A)</b> | 2895110   |
|               | <b>(B)</b> Aggregate carrying amount (see instructions).....                                           | <b>2b(4)(B)</b> | 2791112   |
|               | <b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....              | <b>2b(4)(C)</b> | 103998    |
| (5)           | Unrealized appreciation (depreciation) of assets: <b>(A)</b> Real estate .....                         | <b>2b(5)(A)</b> |           |
|               | <b>(B)</b> Other .....                                                                                 | <b>2b(5)(B)</b> | 112562    |
|               | <b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....     | <b>2b(5)(C)</b> | 112562    |

|                                                                                                |        | (a) Amount | (b) Total |
|------------------------------------------------------------------------------------------------|--------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts.....                              | 2b(6)  |            | 135523    |
| (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) |            | 166698    |
| c Other income.....                                                                            | 2c     |            |           |
| d Total income. Add all <b>income</b> amounts in column (b) and enter total.....               | 2d     |            | 577668    |
| <b>Expenses</b>                                                                                |        |            |           |
| e Benefit payment and payments to provide benefits:                                            |        |            |           |
| (1) Directly to participants or beneficiaries, including direct rollovers.....                 | 2e(1)  | 184150     |           |
| (2) To insurance carriers for the provision of benefits.....                                   | 2e(2)  |            |           |
| (3) Other.....                                                                                 | 2e(3)  |            |           |
| (4) Total benefit payments. Add lines 2e(1) through (3).....                                   | 2e(4)  |            | 184150    |
| f Corrective distributions (see instructions).....                                             | 2f     |            |           |
| g Certain deemed distributions of participant loans (see instructions).....                    | 2g     |            |           |
| h Interest expense.....                                                                        | 2h     |            |           |
| i Administrative expenses: (1) Professional fees.....                                          | 2i(1)  | 30120      |           |
| (2) Contract administrator fees.....                                                           | 2i(2)  |            |           |
| (3) Investment advisory and management fees.....                                               | 2i(3)  | 19420      |           |
| (4) Other.....                                                                                 | 2i(4)  | 37808      |           |
| (5) Total administrative expenses. Add lines 2i(1) through (4).....                            | 2i(5)  |            | 87348     |
| j Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....            | 2j     |            | 271498    |
| <b>Net Income and Reconciliation</b>                                                           |        |            |           |
| k Net income (loss). Subtract line 2j from line 2d.....                                        | 2k     |            | 306170    |
| l Transfers of assets:                                                                         |        |            |           |
| (1) To this plan.....                                                                          | 2l(1)  |            |           |
| (2) From this plan.....                                                                        | 2l(2)  |            |           |

**Part III Accountant's Opinion**

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

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

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

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

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

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

(1) Name: FRAZIER & DEETER, LLC

(2) EIN: 58-1433845

**d** The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

During the plan year:

**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.).....

|    | Yes | No | Amount |
|----|-----|----|--------|
| 4a |     | X  |        |

|                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes                 | No                 | Amount   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|----------|
| <b>b</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.) .....                                                                                                  |                     |                    |          |
| <b>4b</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>c</b> 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.) .....                                                                                                                                                                                                                              |                     |                    |          |
| <b>4c</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>d</b> 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.) .....                                                                                                                                                                                                                   |                     |                    |          |
| <b>4d</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>e</b> Was this plan covered by a fidelity bond? .....                                                                                                                                                                                                                                                                                                                                                          | X                   |                    | 50000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....                                                                                                                                                                                                                                                                           |                     | X                  |          |
| <b>4f</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>g</b> 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? .....                                                                                                                                                                                                                                        |                     |                    |          |
| <b>4g</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>h</b> 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? .....                                                                                                                                                                                                                              |                     |                    |          |
| <b>4h</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) .....                                                                                                                                                                                                                                                    | X                   |                    |          |
| <b>4i</b>                                                                                                                                                                                                                                                                                                                                                                                                         | X                   |                    |          |
| <b>j</b> 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.) .....                                                                                                                                                                                      | X                   |                    |          |
| <b>4j</b>                                                                                                                                                                                                                                                                                                                                                                                                         | X                   |                    |          |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? .....                                                                                                                                                                                                                                               |                     | X                  |          |
| <b>4k</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan? .....                                                                                                                                                                                                                                                                                                                                |                     | X                  |          |
| <b>4l</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     | X                  |          |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) .....                                                                                                                                                                                                                                                                                      |                     |                    |          |
| <b>4m</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     |                    |          |
| <b>n</b> 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. ....                                                                                                                                                                                                                          |                     |                    |          |
| <b>4n</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                     |                    |          |
| <b>5a</b> Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.                                                                                                                               |                     |                    |          |
| <b>5b</b> 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.)                                                                                                                                                                                                      |                     |                    |          |
| <b>5b(1)</b> Name of plan(s)                                                                                                                                                                                                                                                                                                                                                                                      | <b>5b(2)</b> EIN(s) | <b>5b(3)</b> PN(s) |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |                    |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |                    |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |                    |          |
|                                                                                                                                                                                                                                                                                                                                                                                                                   |                     |                    |          |
| <b>5c</b> 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.) ..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not determined<br>If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 439068 _____. |                     |                    |          |

|                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                  |                                                                                                 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|
| <div>SCHEDULE R<br/>(Form 5500)<br/><br/>Department of the Treasury<br/>Internal Revenue Service<br/><br/>Department of Labor<br/>Employee Benefits Security Administration<br/><br/>Pension Benefit Guaranty Corporation</div> | <div>Retirement Plan Information</div> <div>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).</div> <div>► File as an attachment to Form 5500.</div> | <div>OMB No. 1210-0110</div> <div>2021</div> <div>This Form is Open to Public Inspection.</div> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

|                                                                                                    |                                                             |
|----------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>A</b> Name of plan<br>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES                            | <b>B</b> Three-digit plan number (PN) ►<br>003              |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br>NOVELIS ALR ROLLED PRODUCTS, INC. | <b>D</b> Employer Identification Number (EIN)<br>27-1539745 |

|               |                      |
|---------------|----------------------|
| <b>Part I</b> | <b>Distributions</b> |
|---------------|----------------------|

All references to distributions relate only to payments of benefits during the plan year.

|                                                                                                                                                                                                                                                             |          |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|---|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....                                                                                                                       | <b>1</b> | 0 |
| <b>2</b> 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):<br><br>EIN(s): 41-2657133 |          |   |
| Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.                                                                                                                                                                                            |          |   |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....                                                                                                                            | <b>3</b> | 0 |

|                |                                                                                                                                                                               |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part II</b> | <b>Funding Information</b> (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.) |
|----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                                                                                                                                                                                                    |                              |                             |                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|-----------------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |
| If the plan is a defined benefit plan, go to line 8.                                                                                                                                                                                                                                                                                                               |                              |                             |                                         |
| <b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____<br>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule. |                              |                             |                                         |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....                                                                                                                                                                                                                     | <b>6a</b>                    |                             |                                         |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....                                                                                                                                                                                                                                                                         | <b>6b</b>                    |                             |                                         |
| <b>c</b> 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) .....                                                                                                                                                                                                                   | <b>6c</b>                    |                             |                                         |
| If you completed line 6c, skip lines 8 and 9.                                                                                                                                                                                                                                                                                                                      |                              |                             |                                         |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline? .....                                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A            |
| <b>8</b> 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? .....                                                                                        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input checked="" type="checkbox"/> N/A |

|                 |                   |
|-----------------|-------------------|
| <b>Part III</b> | <b>Amendments</b> |
|-----------------|-------------------|

|                                                                                                                                                                                                                            |                                   |                                   |                               |                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|----------------------------------------|
| <b>9</b> 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..... | <input type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input checked="" type="checkbox"/> No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------------------|-------------------------------|----------------------------------------|

|                |                                                                                                                                                   |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Part IV</b> | <b>ESOPs</b> (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. |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------|

|                                                                                                                                                                                              |                              |                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....                                                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....                                                                                                                                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>b</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.) ..... | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....                                                                               | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2021  
v. 201209

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

**13** Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (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) through (c)

**a** Enter the percentage of plan assets held as:

Stock: 52.0 % Investment-Grade Debt: 30.0 % High-Yield Debt: 0.0 % Real Estate: 3.0 % Other: 15.0 %

**b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☒ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

**c** What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☒ Modified duration ☐ Other (specify):

- 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 \_\_\_\_\_

**ALERIS RETIREMENT PLAN  
FOR BARGAINED EMPLOYEES**

**FINANCIAL STATEMENTS**

**DECEMBER 31, 2021 AND 2020**

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

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*December 31, 2021 and 2020*

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## INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator, Plan Participants, and Investment Committee  
Aleris Retirement Plan for Bargained Employees  
Atlanta, Georgia

### ***Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements***

We have performed an audit of the financial statements of the Aleris Retirement Plan for Bargained Employees (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). The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2021 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 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 (ERISA Section 103(a)(3)(C) Audit). As permitted by ERISA Section 103(a)(3)(C), our audit 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 (qualified institution), 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.

Management has obtained a certification from a qualified institution as of December 31, 2021 and for the year then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

### ***Opinion on the 2021 Financial Statements***

In our opinion, based on our audit and on the procedures performed as described in the *Auditor's Responsibilities for the Audit of the 2021 Financial Statements* section:

- The amounts and disclosures in the accompanying 2021 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 (U.S. GAAP).

- The information in the accompanying 2021 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 on the 2021 Financial Statements***

We conducted our audit 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 2021 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 on the 2021 Financial Statements.

### ***Responsibilities of Management for the 2021 Financial Statements***

Management is responsible for the preparation and fair presentation of the financial statements in accordance with U.S. GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) Audit does not affect management's responsibility for the financial statements.

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

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

### ***Auditor's Responsibilities for the Audit of the 2021 Financial Statements***

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit 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 2021 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 U.S. GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) Audit is not to express an opinion about whether the 2021 financial statements as a whole are presented fairly, in all material respects, in accordance with U.S. GAAP.

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

### ***Other Matters***

#### ***Supplemental Schedules Required by ERISA***

The supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2021, and Schedule H, Line 4j - Schedule of Reportable Transactions, For the Year Ended December 31, 2021 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 audit of the 2021 Financial Statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2021 Financial Statements or to the 2021 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).

*Auditor's Report on the 2020 Financial Statement*

The 2020 financial statements of the Plan were audited by predecessor auditors whose report dated October 14, 2021 expressed an unmodified opinion on those financial statements.

October 17, 2022  
Atlanta, Georgia

*Frazier + Dexter, LLC*

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Statements of Net Assets Available for Benefits*

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|                                                | <u>December 31,</u> |                     |
|------------------------------------------------|---------------------|---------------------|
|                                                | <u>2021</u>         | <u>2020</u>         |
| Assets:                                        |                     |                     |
| Investments, at fair value (see Notes 3 and 4) | \$ 5,139,943        | \$ 4,698,773        |
| Receivables:                                   |                     |                     |
| Employer contributions receivable              | <u>45,000</u>       | <u>180,000</u>      |
| Net Assets Available for Benefits              | <u>\$ 5,184,943</u> | <u>\$ 4,878,773</u> |

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See notes to financial statements.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Statement of Changes in Net Assets Available for Benefits*

*For the Year Ended December 31, 2021*

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Additions to net assets attributed to:

|                                               |               |
|-----------------------------------------------|---------------|
| Dividend and interest income                  | \$ 13,739     |
| Net appreciation in fair value of investments | 518,929       |
| Employer contributions                        | <u>45,000</u> |

|                 |                |
|-----------------|----------------|
| Total additions | <u>577,668</u> |
|-----------------|----------------|

Deductions from net assets attributed to:

|                               |               |
|-------------------------------|---------------|
| Benefits paid to participants | 184,150       |
| Administrative expenses       | 49,540        |
| PBGC premiums                 | <u>37,808</u> |

|                  |                |
|------------------|----------------|
| Total deductions | <u>271,498</u> |
|------------------|----------------|

|              |         |
|--------------|---------|
| Net increase | 306,170 |
|--------------|---------|

Net Assets Available for Benefits:

|                   |                  |
|-------------------|------------------|
| Beginning of year | <u>4,878,773</u> |
|-------------------|------------------|

|             |                            |
|-------------|----------------------------|
| End of year | <u><u>\$ 5,184,943</u></u> |
|-------------|----------------------------|

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See notes to financial statements.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements*

### *December 31, 2021 and 2020*

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#### Note 1 - Description of plan:

The following description of the Aleris Retirement Plan for Bargained Employees (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

#### General

The Plan is a noncontributory, defined benefit plan covering all eligible employees of Aleris Rolled Products, Inc., (the previous plan sponsor), a subsidiary of Aleris International, Inc. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

On April 14, 2020, Aleris Corporation, the Company's parent, finalized an agreement for Aleris Corporation to be acquired by Novelis Inc., a subsidiary of Hindalco Industries Limited (the Transaction). As a result of the Transaction, the Plan was amended to name Novelis ALR Rolled Products, Inc. as the new plan sponsor (the Company, Employer, or Plan Sponsor).

The plan provides benefits to eligible employees of Novelis ALR Rolled Products, Inc. who are employed at either the Ashville, Ohio plant or the Richmond, Virginia plant. Effective January 1, 2008 and February 1, 2008, the Plan was amended such that participants employed at the Richmond, Virginia plant and the Ashville, Ohio plant, respectively, will no longer earn additional benefit credits, any increase in accrued benefits, or additional credited service, as defined in the Plan. However, hours of service shall continue to accrue for the purpose of determining years of vesting under the Plan.

#### Funding policy

Contributions are based on the recommendations of the actuary. The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. During 2022, the Company made contributions of \$45,000 related to 2021. During 2021, the Company made contributions of \$180,000 related to 2020. The Plan met the minimum funding requirements for the Plan years ended December 31, 2021 and 2020.

#### Pension benefits and vesting provisions

The Plan generally provides for normal retirement at age 65. The Plan allows for early retirement with a 0.5% reduction in an employee's accrued benefit for each month that the employee's early retirement date precedes age 65 and age 62 for employees located at the Ashville, Ohio plant and the Richmond, Virginia plant, respectively. If an employee has completed 30 years of vesting service, regardless of age, the reduction percentages do not apply. Employees vest entirely after five years of service.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements*

***December 31, 2021 and 2020***

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### Note 1 - Description of plan - continued:

#### Pension benefits and vesting provisions - continued

The Plan provides for payments of retirement, disability and death benefits to participants or their beneficiaries under various payment options, including a monthly retirement benefit, straight-life annuity and joint-survivor annuity. The determination of benefit payments depends primarily on the years of service as outlined in the Plan.

Overall responsibility for administering the Plan rests with the Company's Investment Committee, which is appointed by the Board of Directors of the Company.

Information about the Plan, the vesting and benefit provisions and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in the Plan's Summary Plan Description. Copies of the Summary Plan Description are available from the Company's employee benefits department.

#### Termination provision

The Company reserves the right under the Plan document to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. Upon termination, the net assets of the Plan will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the Plan document.

Whether all participants receive their benefits should the Plan terminate at some future time will be dependent on the sufficiency, at that time, of the Plan's net assets to provide for accumulated plan benefits and may also depend on the financial condition of the Company and the level of benefits guaranteed by the PBGC as well as the priority of those benefits. Some benefits may be fully or partially provided for by the then-existing net assets of the Plan and the PBGC guarantee, while other benefits may not be provided for at all (see Note 6).

### Note 2 - Summary of significant accounting policies:

#### Basis of accounting

The accompanying financial statements have been prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

***December 31, 2021 and 2020***

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### Note 2 - Summary of significant accounting policies - continued:

#### Investment valuation and income recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4 for discussion of fair value measurements).

The Company's Investment Committee is responsible for determining the Plan's valuation policies and analyzing information provided by the investment Trustee and funds' general managers or partners that is used to determine the fair value of the Plan's investments. The Company's Investment Committee is comprised of various members of the Company's management and reports to the Company's Board of Directors. The Company also has established policies and procedures that relate to the approval of any new Level 3 assets in which the Plan is permitted to invest.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The Plan presents in its statement of changes in net assets available for benefits, net appreciation, which consists the Plan's gains and losses on investments bought and sold, as well as, held during the year.

#### Payment of benefits

Benefits are recorded when paid.

#### Use of estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits and changes therein at the date of the financial statements. Actual results could differ from those estimates.

#### Risks and uncertainties

The Plan invests in various investment securities. The underlying investment securities are exposed to various risks, such as interest rate, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities and the level of uncertainty related to the changes in the value of investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and such changes could materially affect the amounts reported in these financial statements.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

### *December 31, 2021 and 2020*

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#### Note 2 - Summary of significant accounting policies - continued:

##### Risks and uncertainties - continued

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

##### Recent accounting pronouncements

Effective January 1, 2020, the Plan adopted Financial Accounting Standards Board Accounting Standards Update (ASU) No. 2018-13, *Fair Value Measurement (Topic 820) Disclosure Framework - Changes to the Disclosure Requirements for Fair Value Measurement* (ASU 2018-13). ASU 2018-13 changes the fair value measurement disclosure requirements of Accounting Standards Codification 820, *Fair Value Measurement* (ASC 820). Eliminated and modified disclosure requirements under ASU 2018-13 impact the reporting of transfers between Level 1 and Level 2 assets (defined in Note 4), Level 3 asset disclosures, and disclosures about investments in certain entities valued at net asset value. ASU 2018-13 was effective for all entities with fiscal years beginning after December 15, 2019. Management adopted ASU 2018-13 effective January 1, 2020. The adoption of ASU 2018-13 did not have a material impact on the Plan's financial statements.

##### Recent legislative developments

In December 2019, Congress passed the SECURE Act which included numerous reforms to existing retirement law and allows plan sponsors to make certain immediate plan operational changes without formal amendment of the plan document.

In March 2020, Congress passed the CARES Act which included optional immediate changes to distribution provisions without formal amendment of the plan document.

The Plan Sponsor implemented various changes and will timely amend for those changes.

##### Effects of COVID-19

In March 2020, the World Health Organization declared the novel coronavirus (COVID-19) outbreak a pandemic and the President of the United States declared it a national emergency. The COVID-19 pandemic remains subject to the development and severity of new variants. The extent of the impact of COVID-19 on the Plan and financial results will depend on future

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

### *December 31, 2021 and 2020*

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#### Note 2 - Summary of significant accounting policies - continued:

##### Effects of COVID-19 - continued

developments, including the duration and spread of the outbreak within the markets in which the Plan Sponsor operates, government actions and programs, and the related impact on consumer confidence and spending, all of which are highly uncertain.

##### Administrative expenses

Trustee fees, investment management fees and PBGC premiums are generally paid by the Plan. All other administrative expenses are paid by the Company.

##### Subsequent events

The Plan has evaluated subsequent events through October 17, 2022, which is the date these financial statements were available to be issued. All subsequent events, if any, requiring recognition as of December 31, 2021, have been incorporated into these financial statements.

#### Note 3 - Information certified by the trustee:

Effective July 1, 2019, Principal Trust Company (Principal) acquired the trustee services of Wells Fargo Bank, N.A. (Wells Fargo). Principal, (the trustee of Plan) (previously, Wells Fargo through December 31, 2020) holds the Plan's assets and executes investment transactions. Management has determined that Principal and Wells Fargo were qualified institutions and the information prepared and certified by Principal and Wells Fargo meets the requirements of ERISA Section 103(a)(3)(C). Certain information disclosed in the accompanying financial statements and supplemental schedule, including investments held at December 31, 2021 and 2020, and net appreciation and interest and dividends from for the year ended December 31, 2021, was obtained or derived from information supplied to the Plan Sponsor and certified as complete and accurate (other than the fair values of the commingled funds and limited partnership interests) by Principal and Wells Fargo (see Note 4).

The following investment information was not certified by the Trustee:

|                                                      | <u>December 31,</u> |              |
|------------------------------------------------------|---------------------|--------------|
|                                                      | <u>2021</u>         | <u>2020</u>  |
| Neuberger Berman U.S. Equity Index Putwrite Fund LLC | \$ 704,318          | \$ 591,756   |
| Strategic Property Trust Fund of JPMC                | \$ -                | \$ 360,769   |
| IR&M Long Government Credit Fund LLC                 | \$ -                | \$ 1,320,022 |

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## Notes to Financial Statements - Continued

December 31, 2021 and 2020

Note 3 - Information certified by the trustee - continued:

|                                                      | <i>For the Year</i>       |             |
|------------------------------------------------------|---------------------------|-------------|
|                                                      | <i>Ended December 31,</i> |             |
|                                                      | <i>2021</i>               | <i>2020</i> |
| Net appreciation in fair value of:                   |                           |             |
| Neuberger Berman U.S. Equity Index Putwrite Fund LLC | \$ 204,318                | \$ 91,756   |
| Strategic Property Trust Fund of JPMC                | \$ -                      | \$ 88,470   |
| IR&M Long Government Credit Fund LLC                 | \$ -                      | \$ 421,876  |

Note 4 - Fair value measurements:

The FASB, Accounting Standards Codification 820, *Fair Value Measurements* (ASC 820), defines fair value, establishes a framework for measuring fair value and requires additional disclosures about the use of fair value measurements. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements).

The three levels of the fair value hierarchy under ASC 820 are described as follows:

- Level 1      Inputs to the valuation methodology are unadjusted quoted prices available in active markets for identical investments that the Master Trust has the ability to access.
- Level 2      Inputs to the valuation methodology include:
- Quoted prices for similar assets or liabilities in active markets;
  - Quoted prices for identical or similar assets or liabilities in inactive markets;
  - Inputs other than quoted prices that are observable for the asset or liability;
  - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

### *December 31, 2021 and 2020*

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#### Note 4 - Fair value measurements - continued:

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

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

The following is a description of the valuation methodologies used for assets and liabilities measured at fair value. There have been no significant changes in the methodologies used at December 31, 2021 and 2020:

- Interest-bearing cash is primarily valued at carrying value based on the short-term nature of the investment.
- Mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year-end by obtaining quoted prices on nationally recognized securities exchanges.
- Commingled funds include pooled separate accounts and common collective funds. Commingled private funds include multiple kinds of assets from several accounts combined to mitigate risk through investment diversification. Pooled separate accounts are valued at NAV of units held by the Plan, which is determined by dividing the fair value of the funds net assets by its units outstanding at the valuation date. Common collective funds are value based on net asset value per share. See additional details for commingled funds below.
- Limited partnership interests are valued at estimated NAV at the valuation date. See additional details on limited partnership interests below.
- Units of participation in the collective trust funds are valued at NAV provided by the fund's Trustee as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value daily without any redemption notice or restrictions. Plan level initiated transactions require a 12-month redemption notice in order to withdraw at full book value. Redemption frequency is daily and the redemption period is 12 months. There are no unfunded commitments.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## Notes to Financial Statements - Continued

### December 31, 2021 and 2020

#### Note 4 - Fair value measurements - continued:

The methodologies described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methodologies 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.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020:

|                                               | Assets at Fair Value as of December 31, 2021 |             |             |                     |
|-----------------------------------------------|----------------------------------------------|-------------|-------------|---------------------|
|                                               | Level 1                                      | Level 2     | Level 3     | Total               |
| Interest-bearing cash                         | \$ 134,612                                   | \$ -        | \$ -        | \$ 134,612          |
| Mutual fund                                   | 164,383                                      | -           | -           | 164,383             |
| Total investments in the fair value hierarchy | <u>\$ 298,995</u>                            | <u>\$ -</u> | <u>\$ -</u> | 298,995             |
| Investments measured at net asset value:*     |                                              |             |             |                     |
| Collective trust funds                        |                                              |             |             | 4,136,630           |
| Limited partnership interest: Hedged equity   |                                              |             |             | <u>704,318</u>      |
| Investments at fair value                     |                                              |             |             | <u>\$ 5,139,943</u> |

|                                                 | Assets at Fair Value as of December 31, 2020 |             |             |                     |
|-------------------------------------------------|----------------------------------------------|-------------|-------------|---------------------|
|                                                 | Level 1                                      | Level 2     | Level 3     | Total               |
| Interest-bearing cash                           | \$ 64,211                                    | \$ -        | \$ -        | \$ 64,211           |
| Mutual fund                                     | 2,362,015                                    | -           | -           | 2,362,015           |
| Total investments in the fair value hierarchy   | <u>\$ 2,426,226</u>                          | <u>\$ -</u> | <u>\$ -</u> | 2,426,226           |
| Investments measured at net asset value:*       |                                              |             |             |                     |
| Commingled funds: Core real estate              |                                              |             |             | 360,769             |
| Limited partnership interest: Core fixed income |                                              |             |             | 1,320,022           |
| Limited partnership interest: Hedged equity     |                                              |             |             | <u>591,756</u>      |
| Investments at fair value                       |                                              |             |             | <u>\$ 4,698,773</u> |

\*In accordance with Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

***December 31, 2021 and 2020***

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### Note 4 - Fair value measurements - continued:

The Plan used the practical expedient to measure the fair value of the commingled funds and limited partnership interests at December 31, 2021 and 2020 within the scope of Accounting Standards Update 2009-12, *Investments in Certain Entities That Calculate Net Asset Value per Share (or Its Equivalent)* based on the investment's NAV.

A description of each of the significant investment strategies is as follows:

#### Core real estate

The core real estate fund is composed primarily of real estate investments owned through a commingled pension trust fund. The investment objective of the fund is to provide a high, stable income stream with the potential for moderate capital appreciation over the long term. The core real estate fund invests in high-quality stabilized office, retail, residential and industrial assets in primary markets throughout the United States. Management of the core real estate fund has the ability to rebalance and refine the composition of the overall portfolio and remove assets of lesser quality and/or growth prospects, and where appropriate, trade up for asset quality and geographic location. As a result of how the fund is managed and priced, an extended notice period of six months is required for redemption requests. The Plan has the ability to redeem the investment at the NAV (or its equivalent) in the near term.

#### Core fixed income

The Core fixed income fund invests primarily in fixed income securities. The investment objective is to seek total return consistent with the preservation of capital by investing in U.S. dollar- denominated fixed income securities, particularly U.S. government, agency, corporate and mortgage-backed issues. Investments may also include highly liquid AAA-rated mortgage paper, investment grade corporate and Yankee securities. Core fixed income is valued based on the Plan's ownership interest in the net asset value of the investment, which is used as a practical expedient to fair value per the underlying investment funds, which are based upon the Plan's own assumptions about the assumptions a market participant would use in pricing the assets and liabilities of the fund. The Plan has the ability to redeem the investment at the NAV (or its equivalent) on the measurement date.

#### Hedged equity

Hedged equity fund is comprised primarily of shares or units in other investment companies or trusts. The fund invests the assets of its portfolios in other private investment funds. The investment objective of the fund is to generate absolute returns while maintaining a moderate level of risk. Its portfolio assets are allocated to the other private investment funds targeting absolute returns throughout the global financial markets with an emphasis on developed

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

### *December 31, 2021 and 2020*

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#### Note 4 - Fair value measurements - continued:

##### Hedged equity - continued

markets. In addition to its investments in other private investment funds, the fund may also make short-term investments for liquidity or defensive purposes, including but not limited to, interest-earning money market accounts, government obligations, commercial paper and short-term certificates of deposit. The fund may also maintain positions in a variety of derivative and non-derivative financial instruments in order to manage the various types of risks that are associated with the financial instruments and markets in which it invests. Hedged equity fund is valued based on the Plan's ownership interest in the net asset value of the investment funds, which are based upon the Plan's own assumptions about the assumptions a market participant would use in pricing the assets and liabilities of the fund. The fund's investments can only be redeemed on the first business day of each calendar quarter or each calendar month, but only after such redemption request has been made at least 45 days prior to the last business day of each quarter. The Plan has the ability to redeem the investment at the NAV (or its equivalent) in the near term.

There were no unfunded commitments at December 31, 2021 and 2020 for any of the commingled funds or limited partnership interests.

#### Note 5 - Actuarial present value of accumulated plan benefits:

Accumulated Plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service employees have rendered. Accumulated Plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances such as retirement, death, disability, and termination of employment are included, to the extent they are considered attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated Plan benefits is determined by the Plan's consulting actuary. Effective January 1, 2021, the Plan changed actuaries from Mercer to Willis Towers Watson (WTW), at which time WTW became the Plan's actuary. The present value of accumulated Plan benefits is that 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. It is at least reasonably possible that the actuarial assumptions used to calculate accumulated Plan benefits will change in the near term and that the effect of such

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## Notes to Financial Statements - Continued

### December 31, 2021 and 2020

#### Note 5 - Actuarial present value of accumulated plan benefits - continued:

change could be significant. With the change in actuaries, the Plan also changed from using beginning of the year valuation (January 1, 2020) to end of year valuation (January 1, 2022). The change in the actuarial value of accumulated plan benefits reflects this change.

The significant actuarial assumptions used in the valuation dated December 31, 2021 and 2019 (January 1, 2020) were:

1. Mortality basis                      In 2021, the Pri-2012 tables with white collar adjustments , projected with MP-2021 generational projection was used. In 2019, adjusted RP-2014, which backs out the post-2006 mortality improvements, white collar, separate annuitant and non-annuitant, sex distinct base tables. Post-2006 mortality improvements are projected generationally using the MP-2019 projection scale for the year beginning January 1, 2020.
2. Interest credit rating            5.45% in 2021 and 3.5% in 2019.
2. Discount rates                    7.10% in 2021; 7.00% in 2019.
3. Normal retirement age        For both 2021 and 2019, Age 65.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2022 and 2020. Had a valuation been performed as of December 31, there would be no material differences.

|                                                            | <i>December 31,</i> |                     |
|------------------------------------------------------------|---------------------|---------------------|
|                                                            | <i>2021</i>         | <i>2020</i>         |
| Actuarial present value of accumulated Plan benefits:      |                     |                     |
| Vested benefits:                                           |                     |                     |
| Participants currently receiving payments                  | \$ 1,728,809        | \$ 1,846,967        |
| Other participants                                         | <u>1,540,535</u>    | <u>1,516,398</u>    |
| Total vested benefits                                      | 3,269,344           | 3,363,365           |
| Nonvested benefits                                         | <u>69,679</u>       | <u>95,920</u>       |
| Total actuarial present value of accumulated Plan benefits | <u>\$ 3,339,023</u> | <u>\$ 3,459,285</u> |

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

### *December 31, 2021 and 2020*

#### Note 5 - Actuarial present value of accumulated plan benefits - continued:

Under the above assumptions, the change in the actuarial present value of accumulated Plan benefits for the year ended December 31, 2021 is as follows:

|                                                                         |                            |
|-------------------------------------------------------------------------|----------------------------|
| Actuarial present value of accumulated Plan benefits, beginning of year | <u>\$ 3,459,285</u>        |
| Increase (decrease) during the year attributable to:                    |                            |
| Changes in actuarial assumptions                                        | (51,302)                   |
| Actuarial (gains)                                                       | (166,550)                  |
| Increase for interest due to decrease in discount period                | 463,102                    |
| Benefits paid                                                           | <u>(365,512)</u>           |
| Net decrease                                                            | <u>(120,262)</u>           |
| Actuarial present value of accumulated Plan benefits, end of year       | <u><u>\$ 3,339,023</u></u> |

#### Note 6 - Priorities upon termination:

Although the Company has not expressed any intent to terminate the Plan, it may do so at any time. In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

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

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

## *Notes to Financial Statements - Continued*

***December 31, 2021 and 2020***

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Note 6 - Priorities upon termination - continued:

benefits under the Plan, and the amount of benefits protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

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

Note 7 - Related-party transactions:

Parties-in-interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. Plan investments include shares of collective trust funds and interest-bearing cash managed by Principal (Wells Fargo at December 31, 2020). These transactions qualify as party-in-interest transactions and are exempt from the prohibited transaction rules.

Note 8 - Tax status:

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated August 1, 2017 that the Plan is designed in accordance with the applicable provisions of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt and no provision for income taxes has been included in the Plan's financial statements.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

## SUPPLEMENTAL INFORMATION

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26 Schedule of Active Participant Data as of January 1, 2021

| Attained Age | Attained Years of Credited Service <sup>3</sup> |     |     |       |       |       |       |       |       |           | Total |
|--------------|-------------------------------------------------|-----|-----|-------|-------|-------|-------|-------|-------|-----------|-------|
|              | Under 1                                         | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40 & Over |       |
| Under 25     | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 25-29        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 30-34        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 35-39        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 40-44        | 0                                               | 0   | 2   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 2     |
| 45-49        | 0                                               | 0   | 3   | 2     | 0     | 0     | 0     | 0     | 0     | 0         | 5     |
| 50-54        | 0                                               | 0   | 2   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 2     |
| 55-59        | 0                                               | 0   | 3   | 2     | 2     | 2     | 0     | 0     | 0     | 0         | 9     |
| 60-64        | 0                                               | 0   | 0   | 2     | 0     | 2     | 0     | 1     | 0     | 0         | 5     |
| 65-69        | 0                                               | 0   | 1   | 0     | 0     | 0     | 0     | 0     | 2     | 0         | 3     |
| 70 & over    | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| Total        | 0                                               | 0   | 11  | 6     | 2     | 4     | 0     | 1     | 2     | 0         | 26    |

<sup>3</sup> Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Aleris Retirement Plan for Bargained Employees

EIN / PN: 27-1539745/003

Plan Sponsor: Novelis ALR Rolled Products, Inc.

Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

Interest rate basis:

|                       |                 |
|-----------------------|-----------------|
| ■ Applicable month    | January 2021    |
| ■ Interest rate basis | 3-Segment Rates |

Interest rates:

|                           | Reflecting<br>Corridors <sup>1</sup> | Not Reflecting<br>Corridors <sup>2</sup> |
|---------------------------|--------------------------------------|------------------------------------------|
| ■ First segment rate      | 4.75%                                | 1.75%                                    |
| ■ Second segment rate     | 5.36%                                | 3.04%                                    |
| ■ Third segment rate      | 6.11%                                | 3.65%                                    |
| ■ Effective interest rate | 5.63%                                | 3.30%                                    |

### Demographic Assumptions

|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Inclusion date           | The valuation date coincident with or next following the date on which the employee becomes a participant.                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| New or rehired employees | It was assumed there will be no new or rehired employees.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Mortality                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| ■ Healthy                | Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019). |

<sup>1</sup> Used for benefit restrictions and calculations of contributions.

<sup>2</sup> Used for PBGC, At-Risk calculations and calculation of maximum deductible contributions.

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

- Disabled Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019).

### Termination

Rates vary by age

Sample rates:

#### Percentage leaving during the year

| Age | Percentage |
|-----|------------|
| 20  | 4.86%      |
| 25  | 3.90%      |
| 30  | 3.10%      |
| 35  | 2.42%      |
| 40  | 1.88%      |
| 45  | 1.46%      |
| 50  | 1.12%      |
| 55  | 0.84%      |
| 60  | 0.60%      |
| 65  | 0.38%      |

### Disability

Rates vary by age and gender

#### Disability Incidence

| Age | Male  | Female |
|-----|-------|--------|
| 20  | 0.15% | 0.09%  |
| 25  | 0.22% | 0.15%  |
| 30  | 0.31% | 0.25%  |
| 35  | 0.43% | 0.39%  |
| 40  | 0.60% | 0.55%  |
| 45  | 0.83% | 0.78%  |
| 50  | 1.22% | 1.20%  |
| 55  | 2.12% | 1.96%  |
| 60  | 3.24% | 2.33%  |
| 65  | 4.37% | 2.72%  |

### Retirement

Rates vary by age and service as shown below

Plan Name: Aleris Retirement Plan for Bargained Employees  
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Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Percentage retiring during the year

| Age   | <30 years of service for Ashville | <30 years of service for Richmond | 30+ years of service |
|-------|-----------------------------------|-----------------------------------|----------------------|
| 55-59 | 0%                                | 0%                                | 5%                   |
| 60    | 15%                               | 15%                               | 10%                  |
| 61    | 10%                               | 10%                               | 10%                  |
| 62    | 25%                               | 40%                               | 40%                  |
| 63-64 | 10%                               | 10%                               | 10%                  |
| 65    | 100%                              | 100%                              | 100%                 |

### Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have been eligible for early retirement.
- Disability Upon Disablement
- Deferred vested benefit Richmond Participants: Age 62 with 10 years of service or Age 65  
Ashville Participants: Age 65
- Retirement benefit Immediate upon termination of employment after reaching early retirement eligibility.

### Form of payment

100% of single participants are assumed to elect a life annuity; 25% of married participants are assumed to elect a life annuity and 75% of married participants are assumed to elect a 50% joint and survivor (with pop-up) annuity option.

### Percent married

75%

### Spouse age

Wife three years younger than husband.

### Administrative expenses

\$40,000

### Cash flows:

- Timing of benefit payments Annuity payments are payable monthly at the beginning of the month.

## Methods

Plan Name: Aleris Retirement Plan for Bargained Employees  
 EIN / PN: 27-1539745/003  
 Plan Sponsor: Novelis ALR Rolled Products, Inc.  
 Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

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|                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Valuation date                                                           | First day of plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Funding target                                                           | Present value of accrued benefits as required by regulations under IRC §430.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Target normal cost                                                       | Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Actuarial value of assets for determining minimum required contributions | <p>Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2020 plan year).</p> <p>The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.</p> |
| Benefits not valued                                                      | All benefits described in the Plan Provisions section of this report were valued. Willis Towers Watson has reviewed the plan provisions with Novelis and, based on that review, is not aware of any significant benefits required to be valued that were not.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
| EIN / PN:       | 27-1539745/003                                 |
| Plan Sponsor:   | Novelis ALR Rolled Products, Inc.              |
| Valuation Date: | January 1, 2021                                |

# SCHEDULE SB ATTACHMENTS

## Sources of Data and Other Information

In preparing the valuation contained in this report, Willis Towers Watson has relied upon data and information regarding plan provisions, participants, assets, contributions, and sponsor funding elections and accounting policies and methods provided to us by Novelis and other persons or organizations designated by Novelis. We have relied on all the data and information provided as complete and accurate. We have reviewed this data and information for overall reasonableness and consistency, but have neither audited nor independently verified this information. Based on discussions with and concurrence by the plan sponsor, assumptions or estimates may have been made if data were not available. The data was not adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date since the data collection date and the measurement date are the same. We are not aware of any material errors, omissions or inconsistencies in the data, that would have a significant effect on the results of our calculations.

A summary of participant data reflected can be found in Section 3 of this report.

## Assumptions Rationale - Significant Economic Assumptions

|                         |                                                                                                                                                                      |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Discount rate           | The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time. |
| Administrative expenses | The plan pays PBGC Premiums out of plan assets. Thus, the expected administrative expense is equal to the expected PBGC Premium for the fiscal year.                 |

## Assumptions Rationale - Significant Demographic Assumptions

|                    |                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Healthy Mortality  | Assumptions used for funding purposes are as prescribed by IRC §430(h).                                                                                                                                                                                                                                                                                                                                                |
| Disabled Mortality | Assumptions used for funding purposes are as prescribed by IRC §430(h).                                                                                                                                                                                                                                                                                                                                                |
| Termination        | Termination rates are based on the Society of Actuaries 2003 small plan, age-based turnover table with adjustments, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. This assumption was set by the prior actuary.                                                                                                                  |
| Retirement         | Retirement rates were developed based on the prior actuary's experience with similar plans taking into consideration retirement subsidies the plan offers at various ages and the age social insurance programs are first available, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. This assumption was set by the prior actuary. |

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
| EIN / PN:       | 27-1539745/003                                 |
| Plan Sponsor:   | Novelis ALR Rolled Products, Inc.              |
| Valuation Date: | January 1, 2021                                |

# SCHEDULE SB ATTACHMENTS

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## Source of Prescribed Methods

|                 |                                                                                                                                                                                                                                                                                                                                                |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Funding methods | The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430. |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Changes in Assumptions and Methods

|                                             |                                                                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Change in assumptions since prior valuation | <p>The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of January 2020 to January 2021.</p> <p>The mortality improvement tables were updated from MP-2018 to MP-2019, as prescribed by the IRS.</p> <p>The assumed plan-related expenses added to the target normal cost were changed from \$150,000 for 2020 to \$40,000 for 2021.</p> |
| Change in methods since prior valuation     | None.                                                                                                                                                                                                                                                                                                                                                                                                            |

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
| EIN / PN:       | 27-1539745/003                                 |
| Plan Sponsor:   | Novelis ALR Rolled Products, Inc.              |
| Valuation Date: | January 1, 2021                                |

**Form 5500**Department of the Treasury  
Internal Revenue ServiceDepartment 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**2021****This Form is Open to Public Inspection****Part I Annual Report Identification Information**

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

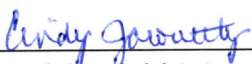
- A** This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)  
☒ a single-employer plan ☐ a DFE (specify) \_\_\_\_\_
- B** This return/report is: ☐ the first 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**

|                                                                                                                                                                                                                                                                                                                                                              |                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| <b>1a</b> Name of plan<br>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES                                                                                                                                                                                                                                                                                     | <b>1b</b> Three-digit plan number (PN) ▶ 003                 |
| <b>2a</b> Plan sponsor's name (employer, if for a single-employer plan)<br>Mailing address (include room, apt., suite no. and street, or P.O. Box)<br>City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)<br><br>NOVELIS ALR ROLLED PRODUCTS, INC.<br><br>3560 LENOX RD NE #2000<br><br>ATLANTA GA 30326 | <b>1c</b> Effective date of plan<br>05/23/2003               |
|                                                                                                                                                                                                                                                                                                                                                              | <b>2b</b> Employer Identification Number (EIN)<br>27-1539745 |
|                                                                                                                                                                                                                                                                                                                                                              | <b>2c</b> Plan Sponsor's telephone number<br>404-760-4000    |
|                                                                                                                                                                                                                                                                                                                                                              | <b>2d</b> Business code (see instructions)<br>238300         |

**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.

|                  |                                                                                     |          |                                                              |
|------------------|-------------------------------------------------------------------------------------|----------|--------------------------------------------------------------|
| <b>SIGN HERE</b> |  | 10/13/22 | CINDY JACOVETTY                                              |
|                  | Signature of plan administrator                                                     | Date     | Enter name of individual signing as plan administrator       |
| <b>SIGN HERE</b> |                                                                                     |          |                                                              |
|                  | Signature of employer/plan sponsor                                                  | Date     | Enter name of individual signing as employer or plan sponsor |
| <b>SIGN HERE</b> |                                                                                     |          |                                                              |
|                  | Signature of DFE                                                                    | Date     | Enter name of individual signing as DFE                      |

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)  
v. 201209

|                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor                                                                                                                                                                                                                                                                                                                              |  | <b>3b</b> Administrator's EIN<br><br><b>3c</b> Administrator's telephone number<br><br><div style="background-color: #cccccc; height: 40px; width: 100%;"></div>                                                                                                                                                                                                                                                                                                                                             |     |
| <b>4</b> 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:<br><b>a</b> Sponsor's name <b>ALERIS ROLLED PRODUCTS, INC.</b><br><b>c</b> Plan Name <b>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES</b>                                                      |  | <b>4b</b> EIN<br>27-1539745<br><b>4d</b> PN<br>003                                                                                                                                                                                                                                                                                                                                                                                                                                                           |     |
| <b>5</b> Total number of participants at the beginning of the plan year                                                                                                                                                                                                                                                                                                                                                               |  | <b>5</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 177 |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
| <b>a(1)</b> Total number of active participants at the beginning of the plan year.....                                                                                                                                                                                                                                                                                                                                                |  | <b>6a(1)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 26  |
| <b>a(2)</b> Total number of active participants at the end of the plan year .....                                                                                                                                                                                                                                                                                                                                                     |  | <b>6a(2)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 25  |
| <b>b</b> Retired or separated participants receiving benefits.....                                                                                                                                                                                                                                                                                                                                                                    |  | <b>6b</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 78  |
| <b>c</b> Other retired or separated participants entitled to future benefits .....                                                                                                                                                                                                                                                                                                                                                    |  | <b>6c</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 54  |
| <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....                                                                                                                                                                                                                                                                                                                                                           |  | <b>6d</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 157 |
| <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....                                                                                                                                                                                                                                                                                                                            |  | <b>6e</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 19  |
| <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....                                                                                                                                                                                                                                                                                                                                                                               |  | <b>6f</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 176 |
| <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....                                                                                                                                                                                                                                                                                       |  | <b>6g</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |     |
| <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested .....                                                                                                                                                                                                                                                                                            |  | <b>6h</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 0   |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....                                                                                                                                                                                                                                                                                                   |  | <b>7</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |     |
| <b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:<br>1B 1I 3D 3H                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
| <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
| <b>9a</b> Plan funding arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                         |  | <b>9b</b> Plan benefit arrangement (check all that apply)<br>(1) <input type="checkbox"/> Insurance<br>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts<br>(3) <input checked="" type="checkbox"/> Trust<br>(4) <input type="checkbox"/> General assets of the sponsor                                                                                                                                                                                                                |     |
| <b>10</b> Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |     |
| <b>a Pension Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)<br><br>(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary<br><br>(3) <input checked="" type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary |  | <b>b General Schedules</b><br>(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)<br>(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)<br>(3) <input type="checkbox"/> <b>A</b> (Insurance Information)<br>(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)<br>(5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)<br>(6) <input type="checkbox"/> <b>G</b> (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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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 \_\_\_\_\_

FD493  
SCHEDULE H (FORM 5500 - 4J-1)  
SCHEDULE OF REPORTABLE TRANSACTIONS  
SINGLE TRANSACTIONS

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

| IDENTITY OF PARTY INVOLVED | DESCRIPTION OF ASSET                 | QUANTITY | DATE | TYPE | PRICE   | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN OR (LOSS) |
|----------------------------|--------------------------------------|----------|------|------|---------|----------|---------------|---------------|--------------------|
|                            |                                      |          |      |      |         |          | 4,698,773     | 5% VALUE OF   | 234,938            |
| 298706821                  | EUROPACIFIC GROWTH FUND CLASS R6     |          |      |      |         |          |               |               |                    |
| #2616                      |                                      |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 4,844 07/22/21 SELL                  | 197      |      |      | 70.3200 | 0        | 218,328       | 340,647       | 122,319            |
| 666997028                  | IR&M LONG GOVERNMENT CREDIT FUND LLC |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 29,304 06/15/21 BUY                  | 278      |      |      | 15.1172 | 0        | 443,000       | 443,000       | 0                  |
| 666997028                  | IR&M LONG GOVERNMENT CREDIT FUND LLC |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 127,248 07/27/21 SELL                | 283      |      |      | 15.8601 | 0        | 1,579,987     | 2,018,165     | 438,179            |
| 587992835                  | MERCER ACT LNG CORP INV PORT #600    |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 20,877 07/22/21 BUY                  | 327      |      |      | 21.8900 | 0        | 457,000       | 457,000       | 0                  |
| 587992835                  | MERCER ACT LNG CORP INV PORT #600    |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 20,612 07/29/21 BUY                  | 328      |      |      | 21.8900 | 0        | 451,200       | 451,200       | 0                  |
| 587992744                  | MERCER EMRG MARKETS EQUITY CT #425   |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 15,878 07/29/21 BUY                  | 320      |      |      | 15.2600 | 0        | 242,300       | 242,300       | 0                  |
| 587992777                  | MERCER LNG DUR PASS FXD INC CT #420  |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 11,255 07/22/21 BUY                  | 315      |      |      | 27.1000 | 0        | 305,000       | 305,000       | 0                  |
| 587992777                  | MERCER LNG DUR PASS FXD INC CT #420  |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 11,152 07/29/21 BUY                  | 316      |      |      | 26.9900 | 0        | 301,000       | 301,000       | 0                  |
| 587992736                  | MERCER NON-US CORE EQUITY CT #330    |          |      |      |         |          |               |               |                    |
| BROKER 5200                | MISCELLANEOUS                        |          |      |      |         |          |               |               |                    |
|                            | 13,904 07/29/21 BUY                  | 301      |      |      | 25.7700 | 0        | 358,300       | 358,300       | 0                  |

FD493  
SCHEDULE H (FORM 5500 - 4J-1)  
SCHEDULE OF REPORTABLE TRANSACTIONS  
SINGLE TRANSACTIONS

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

| DESCRIPTION OF ASSET<br>IDENTITY OF PARTY INVOLVED |                                     |     |  | BASED ON MARKET VALUE OF<br>PURCHASE PRICE<br>SELLING PRICE | EXPENSES | 4,698,773<br>COST OF ASSET | 5% VALUE OF<br>CURRENT VALUE | 234,938<br>NET GAIN<br>OR (LOSS) |
|----------------------------------------------------|-------------------------------------|-----|--|-------------------------------------------------------------|----------|----------------------------|------------------------------|----------------------------------|
| 587992801                                          | MERCER US LARGE CAP PASS EQ CT #410 |     |  |                                                             |          |                            |                              |                                  |
| BROKER 5200                                        | MISCELLANEOUS                       |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 11,084 07/22/21 BUY                 | 309 |  | 49.2600                                                     | 0        | 546,000                    | 546,000                      | 0                                |
| 587992801                                          | MERCER US LARGE CAP PASS EQ CT #410 |     |  |                                                             |          |                            |                              |                                  |
| BROKER 5200                                        | MISCELLANEOUS                       |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 7,967 07/29/21 BUY                  | 311 |  | 49.8400                                                     | 0        | 397,100                    | 397,100                      | 0                                |
| 587992801                                          | MERCER US LARGE CAP PASS EQ CT #410 |     |  |                                                             |          |                            |                              |                                  |
| BROKER 5200                                        | MISCELLANEOUS                       |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 5,596 07/30/21 BUY                  | 312 |  | 49.5800                                                     | 0        | 277,446                    | 277,446                      | 0                                |
| 922040100                                          | VANGUARD INSTITUTIONAL INDEX FUND   |     |  |                                                             |          |                            |                              |                                  |
| #94                                                |                                     |     |  |                                                             |          |                            |                              |                                  |
| BROKER 5200                                        | MISCELLANEOUS                       |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 2,662 07/22/21 SELL                 | 202 |  | 381.7600                                                    | 0        | 724,392                    | 1,016,135                    | 291,743                          |
| 992995936                                          | WELLS FARGO BANK COLLATERALIZED     |     |  |                                                             |          |                            |                              |                                  |
|                                                    | INSTITUTIONAL BANK DEPOSIT ACCOUNT  |     |  |                                                             |          |                            |                              |                                  |
| BROKER 1                                           | CASH SWEEP TRADES                   |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 2,018,165 07/29/21 BUY              | 208 |  | 1.0000                                                      | 0        | 2,018,165                  | 2,018,165                    | 0                                |
| 992995936                                          | WELLS FARGO BANK COLLATERALIZED     |     |  |                                                             |          |                            |                              |                                  |
|                                                    | INSTITUTIONAL BANK DEPOSIT ACCOUNT  |     |  |                                                             |          |                            |                              |                                  |
| BROKER 1                                           | CASH SWEEP TRADES                   |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 2,018,165 07/30/21 SELL             | 210 |  | 1.0000                                                      | 0        | 2,018,165                  | 2,018,165                    | 0                                |
| 992995936                                          | WELLS FARGO BANK COLLATERALIZED     |     |  |                                                             |          |                            |                              |                                  |
|                                                    | INSTITUTIONAL BANK DEPOSIT ACCOUNT  |     |  |                                                             |          |                            |                              |                                  |
| BROKER 1                                           | CASH SWEEP TRADES                   |     |  |                                                             |          |                            |                              |                                  |
|                                                    | 293,314 08/02/21 SELL               | 217 |  | 1.0000                                                      | 0        | 293,314                    | 293,314                      | 0                                |

FD495  
SCHEDULE H (FORM 5500 - 4J-3)  
SCHEDULE OF REPORTABLE TRANSACTIONS  
SERIES OF TRANSACTIONS IN SAME SECURITY

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800  
DECEMBER 31,2020  
THROUGH DECEMBER 31,2021

|                                                |                             | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |
|------------------------------------------------|-----------------------------|---------------------------------|----------|---------------|---------------|-----------------------|
| IDENTITY OF PARTY INVOLVED                     | DESCRIPTION OF ASSET        | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |
| 298706821 EUROPACIFIC GROWTH FUND CLASS R6     |                             |                                 |          |               |               |                       |
| #2616                                          |                             |                                 |          |               |               |                       |
| BROKER 5200                                    | MISCELLANEOUS               |                                 |          |               |               |                       |
|                                                | 246 01/27/21 S SELL 30      | 69.0201                         | 0        | 10,156        | 17,000        | 6,844                 |
|                                                | 248 02/24/21 S SELL 56      | 72.4699                         | 0        | 10,241        | 18,000        | 7,759                 |
|                                                | 484 04/26/21 B BUY 120      | 72.3800                         | 0        | 35,000        | 35,000        | 0                     |
|                                                | 979 06/11/21 S SELL 164     | 74.5800                         | 0        | 42,981        | 73,000        | 30,019                |
| BROKER                                         | 0 06/16/21 S RGAIN 173      | .0000                           | 0        | 0             | 14,008        | 14,008                |
| BROKER 5200                                    | MISCELLANEOUS               |                                 |          |               |               |                       |
|                                                | 201 06/16/21 B BUY 174      | 71.8299                         | 0        | 14,432        | 14,432        | 0                     |
|                                                | 4,844 07/22/21 S SELL 197   | 70.3200                         | 0        | 218,328       | 340,647       | 122,319               |
| -----                                          |                             | -----                           |          | -----         |               | -----                 |
|                                                | 685 2 TOTAL BUYS            |                                 | 0        | 49,432        | 49,432        | 0                     |
|                                                | 6,317 5 TOTAL SELLS         |                                 | 0        | 281,706       | 462,655       | 180,949               |
| -----                                          |                             | -----                           |          | -----         |               | -----                 |
|                                                | 7,002 SECURITY TOTAL        |                                 | 0        | 331,138       | 512,087       | 180,949               |
| 666997028 IR&M LONG GOVERNMENT CREDIT FUND LLC |                             |                                 |          |               |               |                       |
| BROKER 5200                                    | MISCELLANEOUS               |                                 |          |               |               |                       |
|                                                | 5,356 01/28/21 B BUY 275    | 15.6823                         | 0        | 84,000        | 84,000        | 0                     |
|                                                | 58 02/01/21 S SELL 279      | 15.6181                         | 0        | 656           | 899           | 244                   |
|                                                | 4,320 02/25/21 B BUY 276    | 14.5846                         | 0        | 63,000        | 63,000        | 0                     |
|                                                | 0 03/05/21 B BUY 414        | .0000                           | 0        | 76            | 76            | 0                     |
|                                                | 6,363 04/27/21 B BUY 277    | 14.7733                         | 0        | 94,000        | 94,000        | 0                     |
|                                                | 56 05/01/21 S SELL 281      | 14.7672                         | 0        | 649           | 826           | 177                   |
|                                                | 0 06/04/21 B BUY 415        | .0000                           | 0        | 86            | 86            | 0                     |
|                                                | 29,304 06/15/21 B BUY 278   | 15.1172                         | 0        | 443,000       | 443,000       | 0                     |
|                                                | 127,248 07/27/21 S SELL 283 | 15.8601                         | 0        | 1,579,987     | 2,018,165     | 438,179               |
|                                                | 82 07/27/21 S SELL 284      | 15.8600                         | 0        | 1,016         | 1,298         | 282                   |
| -----                                          |                             | -----                           |          | -----         |               | -----                 |
|                                                | 45,343 6 TOTAL BUYS         |                                 | 0        | 684,162       | 684,162       | 0                     |
|                                                | 127,444 4 TOTAL SELLS       |                                 | 0        | 1,582,308     | 2,021,188     | 438,882               |
| -----                                          |                             | -----                           |          | -----         |               | -----                 |
|                                                | 172,787 SECURITY TOTAL      |                                 | 0        | 2,266,470     | 2,705,350     | 438,882               |
| 479995185 JPMCB STRATEGIC PROPERTY FUND        |                             |                                 |          |               |               |                       |
| BROKER 5200                                    | MISCELLANEOUS               |                                 |          |               |               |                       |
|                                                | 4,171 01/08/21 S SELL 287   | 10.3755                         | 0        | 32,663        | 43,275        | 10,612                |
|                                                | 87 01/11/21 S SELL 289      | 10.3755                         | 0        | 680           | 901           | 221                   |
|                                                | 0 01/31/21 B BUY 409        | .0000                           | 0        | 748           | 748           | 0                     |
|                                                | 0 02/28/21 B BUY 410        | .0000                           | 0        | 729           | 729           | 0                     |
|                                                | 0 03/31/21 B BUY 411        | .0000                           | 0        | 946           | 946           | 0                     |
|                                                | 11,436 04/08/21 S SELL 134  | 10.5682                         | 0        | 90,463        | 120,855       | 30,392                |
|                                                | 85 04/08/21 S SELL 135      | 10.5682                         | 0        | 671           | 896           | 225                   |
|                                                | 0 04/30/21 B BUY 412        | .0000                           | 0        | 976           | 976           | 0                     |
|                                                | 0 05/31/21 B BUY 413        | .0000                           | 0        | 558           | 558           | 0                     |
|                                                | 0 06/30/21 B BUY 425        | .0000                           | 0        | 600           | 600           | 0                     |

FD495

SCHEDULE H (FORM 5500 - 4J-3)

SCHEDULE OF REPORTABLE TRANSACTIONS

SERIES OF TRANSACTIONS IN SAME SECURITY

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800

DECEMBER 31, 2020

THROUGH DECEMBER 31, 2021

| IDENTITY OF PARTY INVOLVED                   |  | DESCRIPTION OF ASSET | QUANTITY | DATE | TYPE | PRICE                           | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN OR (LOSS) |
|----------------------------------------------|--|----------------------|----------|------|------|---------------------------------|----------|---------------|---------------|--------------------|
|                                              |  |                      |          |      |      | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938            |
|                                              |  |                      |          |      |      | PURCHASE PRICE<br>SELLING PRICE |          |               |               |                    |
|                                              |  | 0 07/07/21 B BUY     | 428      |      |      | .0000                           | 0        | 572           | 572           | 0                  |
| 18,921                                       |  | 07/08/21 S SELL      | 293      |      |      | 10.8770                         | 0        | 152,369       | 205,800       | 53,431             |
| 72                                           |  | 07/12/21 S SELL      | 292      |      |      | 10.8769                         | 0        | 583           | 788           | 205                |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 0                                            |  | 7 TOTAL BUYS         |          |      |      |                                 | 0        | 5,129         | 5,129         | 0                  |
| 34,772                                       |  | 6 TOTAL SELLS        |          |      |      |                                 | 0        | 277,429       | 372,515       | 95,086             |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 34,772                                       |  | SECURITY TOTAL       |          |      |      |                                 | 0        | 282,558       | 377,644       | 95,086             |
| 587992835 MERCER ACT LNG CORP INV PORT #600  |  |                      |          |      |      |                                 |          |               |               |                    |
| BROKER 5200 MISCELLANEOUS                    |  |                      |          |      |      |                                 |          |               |               |                    |
| 20,877                                       |  | 07/22/21 B BUY       | 327      |      |      | 21.8900                         | 0        | 457,000       | 457,000       | 0                  |
| 20,612                                       |  | 07/29/21 B BUY       | 328      |      |      | 21.8900                         | 0        | 451,200       | 451,200       | 0                  |
| 49                                           |  | 11/30/21 S SELL      | 329      |      |      | 21.9002                         | 0        | 1,069         | 1,070         | 1                  |
| 76                                           |  | 12/27/21 S SELL      | 330      |      |      | 21.7699                         | 0        | 1,667         | 1,658         | (9)                |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 41,489                                       |  | 2 TOTAL BUYS         |          |      |      |                                 | 0        | 908,200       | 908,200       | 0                  |
| 125                                          |  | 2 TOTAL SELLS        |          |      |      |                                 | 0        | 2,736         | 2,728         | (8)                |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 41,614                                       |  | SECURITY TOTAL       |          |      |      |                                 | 0        | 910,936       | 910,928       | (8)                |
| 587992744 MERCER EMRG MARKETS EQUITY CT #425 |  |                      |          |      |      |                                 |          |               |               |                    |
| BROKER 5200 MISCELLANEOUS                    |  |                      |          |      |      |                                 |          |               |               |                    |
| 8,805                                        |  | 07/22/21 B BUY       | 319      |      |      | 15.5600                         | 0        | 137,000       | 137,000       | 0                  |
| 15,878                                       |  | 07/29/21 B BUY       | 320      |      |      | 15.2600                         | 0        | 242,300       | 242,300       | 0                  |
| 199                                          |  | 08/31/21 S SELL      | 321      |      |      | 15.3500                         | 0        | 3,050         | 3,047         | (3)                |
| 350                                          |  | 09/16/21 S SELL      | 322      |      |      | 15.0200                         | 0        | 5,379         | 5,257         | (121)              |
| 251                                          |  | 09/30/21 S SELL      | 323      |      |      | 14.5700                         | 0        | 3,855         | 3,655         | (200)              |
| 1,370                                        |  | 10/13/21 S SELL      | 324      |      |      | 14.6700                         | 0        | 21,060        | 20,105        | (955)              |
| 508                                          |  | 10/28/21 S SELL      | 325      |      |      | 14.8600                         | 0        | 7,809         | 7,552         | (258)              |
| 236                                          |  | 12/27/21 S SELL      | 326      |      |      | 14.5800                         | 0        | 3,634         | 3,448         | (186)              |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 24,683                                       |  | 2 TOTAL BUYS         |          |      |      |                                 | 0        | 379,300       | 379,300       | 0                  |
| 2,914                                        |  | 6 TOTAL SELLS        |          |      |      |                                 | 0        | 44,787        | 43,064        | (1,723)            |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 27,597                                       |  | SECURITY TOTAL       |          |      |      |                                 | 0        | 424,087       | 422,364       | (1,723)            |
| 587992751 MERCER GLOBAL LOW VOL EQ CT #345   |  |                      |          |      |      |                                 |          |               |               |                    |
| BROKER 5200 MISCELLANEOUS                    |  |                      |          |      |      |                                 |          |               |               |                    |
| 7,146                                        |  | 07/22/21 B BUY       | 307      |      |      | 25.6100                         | 0        | 183,000       | 183,000       | 0                  |
| 6,917                                        |  | 07/29/21 B BUY       | 308      |      |      | 25.9500                         | 0        | 179,500       | 179,500       | 0                  |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 14,063                                       |  | 2 TOTAL BUYS         |          |      |      |                                 | 0        | 362,500       | 362,500       | 0                  |
| -----                                        |  |                      |          |      |      |                                 |          |               |               |                    |
| 14,063                                       |  | SECURITY TOTAL       |          |      |      |                                 | 0        | 362,500       | 362,500       | 0                  |

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EMPLOYEES

25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

|                            |                              | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |
|----------------------------|------------------------------|---------------------------------|----------|---------------|---------------|-----------------------|
| IDENTITY OF PARTY INVOLVED | DESCRIPTION OF ASSET         | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |
| 587992777 MERCER           | LNG DUR PASS FXD INC CT #420 |                                 |          |               |               |                       |
| BROKER 5200                | MISCELLANEOUS                |                                 |          |               |               |                       |
|                            | 11,255 07/22/21 B BUY 315    | 27.1000                         | 0        | 305,000       | 305,000       | 0                     |
|                            | 11,152 07/29/21 B BUY 316    | 26.9900                         | 0        | 301,000       | 301,000       | 0                     |
|                            | 50 11/30/21 S SELL 317       | 27.4998                         | 0        | 1,348         | 1,370         | 23                    |
|                            | 28 12/27/21 S SELL 318       | 27.1002                         | 0        | 758           | 760           | 2                     |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 22,407 2 TOTAL BUYS          |                                 | 0        | 606,000       | 606,000       | 0                     |
|                            | 78 2 TOTAL SELLS             |                                 | 0        | 2,106         | 2,130         | 25                    |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 22,485 SECURITY TOTAL        |                                 | 0        | 608,106       | 608,130       | 25                    |
| 587992736 MERCER           | NON-US CORE EQUITY CT #330   |                                 |          |               |               |                       |
| BROKER 5200                | MISCELLANEOUS                |                                 |          |               |               |                       |
|                            | 8,353 07/22/21 B BUY 300     | 25.2600                         | 0        | 211,000       | 211,000       | 0                     |
|                            | 13,904 07/29/21 B BUY 301    | 25.7700                         | 0        | 358,300       | 358,300       | 0                     |
|                            | 1,842 08/31/21 S SELL 302    | 26.0600                         | 0        | 47,116        | 48,002        | 887                   |
|                            | 410 09/16/21 S SELL 303      | 26.2500                         | 0        | 10,481        | 10,756        | 275                   |
|                            | 705 10/13/21 S SELL 304      | 25.1000                         | 0        | 18,040        | 17,703        | (338)                 |
|                            | 413 10/28/21 S SELL 305      | 25.9000                         | 0        | 10,560        | 10,693        | 133                   |
|                            | 494 12/27/21 S SELL 306      | 25.8100                         | 0        | 12,629        | 12,743        | 114                   |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 22,257 2 TOTAL BUYS          |                                 | 0        | 569,300       | 569,300       | 0                     |
|                            | 3,864 5 TOTAL SELLS          |                                 | 0        | 98,826        | 99,897        | 1,071                 |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 26,121 SECURITY TOTAL        |                                 | 0        | 668,126       | 669,197       | 1,071                 |
| 587992801 MERCER           | US LARGE CAP PASS EQ CT #410 |                                 |          |               |               |                       |
| BROKER 5200                | MISCELLANEOUS                |                                 |          |               |               |                       |
|                            | 11,084 07/22/21 B BUY 309    | 49.2600                         | 0        | 546,000       | 546,000       | 0                     |
|                            | 1,266 07/23/21 S SELL 310    | 49.7600                         | 0        | 62,367        | 63,000        | 633                   |
|                            | 7,967 07/29/21 B BUY 311     | 49.8400                         | 0        | 397,100       | 397,100       | 0                     |
|                            | 5,596 07/30/21 B BUY 312     | 49.5800                         | 0        | 277,446       | 277,446       | 0                     |
|                            | 631 11/30/21 S SELL 313      | 51.7600                         | 0        | 31,236        | 32,639        | 1,404                 |
|                            | 373 12/27/21 S SELL 314      | 54.3599                         | 0        | 18,486        | 20,287        | 1,801                 |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 24,647 3 TOTAL BUYS          |                                 | 0        | 1,220,546     | 1,220,546     | 0                     |
|                            | 2,270 3 TOTAL SELLS          |                                 | 0        | 112,089       | 115,926       | 3,838                 |
| -----                      |                              | -----                           |          | -----         |               | -----                 |
|                            | 26,917 SECURITY TOTAL        |                                 | 0        | 1,332,635     | 1,336,472     | 3,838                 |
| 552987554 MFS              | MID CAP GROWTH FUND          |                                 |          |               |               |                       |
|                            | CLASS R6 #4834               |                                 |          |               |               |                       |
| BROKER 5200                | MISCELLANEOUS                |                                 |          |               |               |                       |
|                            | 1,191 01/27/21 B BUY 32      | 29.3900                         | 0        | 35,000        | 35,000        | 0                     |
|                            | 720 04/26/21 B BUY 121       | 31.9400                         | 0        | 23,000        | 23,000        | 0                     |
|                            | 1,286 06/11/21 S SELL 167    | 31.1100                         | 0        | 37,345        | 40,000        | 2,655                 |
|                            | 6,394 07/22/21 S SELL 200    | 32.7100                         | 0        | 185,708       | 209,139       | 23,431                |

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|                                                |        |                      |                | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |         |
|------------------------------------------------|--------|----------------------|----------------|---------------------------------|----------|---------------|---------------|-----------------------|---------|
| IDENTITY OF PARTY INVOLVED                     |        | DESCRIPTION OF ASSET |                | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |         |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 1,911  | 2                    | TOTAL BUYS     |                                 | 0        | 58,000        | 58,000        | 0                     |         |
|                                                | 7,680  | 2                    | TOTAL SELLS    |                                 | 0        | 223,053       | 249,139       | 26,086                |         |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 9,591  |                      | SECURITY TOTAL |                                 | 0        | 281,053       | 307,139       | 26,086                |         |
| 55272P596 MFS MID CAP VALUE FIND CLASS I #1824 |        |                      |                |                                 |          |               |               |                       |         |
| BROKER 5200 MISCELLANEOUS                      |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 523    | 02/24/21             | S SELL         | 57                              | 28.7000  | 0             | 13,521        | 15,000                | 1,479   |
|                                                | 384    | 03/26/21             | S SELL         | 90                              | 29.9400  | 0             | 9,936         | 11,500                | 1,564   |
|                                                | 2,104  | 06/11/21             | S SELL         | 166                             | 31.8500  | 0             | 54,419        | 67,000                | 12,581  |
|                                                | 6,126  | 07/22/21             | S SELL         | 199                             | 30.7400  | 0             | 158,473       | 188,310               | 29,837  |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 9,137  | 4                    | TOTAL SELLS    |                                 | 0        | 236,349       | 281,810       | 45,461                |         |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 9,137  |                      | SECURITY TOTAL |                                 | 0        | 236,349       | 281,810       | 45,461                |         |
| 922040100 VANGUARD INSTITUTIONAL INDEX FUND    |        |                      |                |                                 |          |               |               |                       |         |
| #94                                            |        |                      |                |                                 |          |               |               |                       |         |
| BROKER 5200 MISCELLANEOUS                      |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 63     | 01/27/21             | B BUY          | 33                              | 331.2721 | 0             | 21,000        | 21,000                | 0       |
|                                                | 115    | 02/24/21             | S SELL         | 59                              | 347.2011 | 0             | 31,205        | 40,000                | 8,795   |
|                                                | 12     | 03/25/21             | B BUY          | 85                              | 339.6056 | 0             | 4,150         | 4,150                 | 0       |
| BROKER                                         |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 0      | 03/25/21             | S RGAIN        | 86                              | .0000    | 0             | 515           | 515                   | 515     |
| BROKER 5200 MISCELLANEOUS                      |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 2      | 03/25/21             | B BUY          | 87                              | 339.5520 | 0             | 515           | 515                   | 0       |
| BROKER                                         |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 0      | 03/25/21             | S RGAIN        | 88                              | .0000    | 0             | 11,346        | 11,346                | 11,346  |
| BROKER 5200 MISCELLANEOUS                      |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 33     | 03/25/21             | B BUY          | 89                              | 339.6073 | 0             | 11,346        | 11,346                | 0       |
|                                                | 53     | 03/26/21             | S SELL         | 91                              | 347.0789 | 0             | 14,489        | 18,500                | 4,011   |
|                                                | 60     | 05/25/21             | S SELL         | 139                             | 366.5689 | 0             | 16,314        | 22,000                | 5,686   |
|                                                | 591    | 06/11/21             | S SELL         | 169                             | 372.0100 | 0             | 160,753       | 220,000               | 59,247  |
|                                                | 9      | 06/24/21             | B BUY          | 176                             | 370.4371 | 0             | 3,263         | 3,263                 | 0       |
|                                                | 2,662  | 07/22/21             | S SELL         | 202                             | 381.7600 | 0             | 724,392       | 1,016,135             | 291,743 |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 119    | 5                    | TOTAL BUYS     |                                 | 0        | 40,274        | 40,274        | 0                     |         |
|                                                | 3,481  | 7                    | TOTAL SELLS    |                                 | 0        | 947,153       | 1,328,496     | 381,343               |         |
| -----                                          |        |                      |                |                                 | -----    | -----         | -----         | -----                 |         |
|                                                | 3,600  |                      | SECURITY TOTAL |                                 | 0        | 987,427       | 1,368,770     | 381,343               |         |
| 992995936 WELLS FARGO BANK COLLATERALIZED      |        |                      |                |                                 |          |               |               |                       |         |
| INSTITUTIONAL BANK DEPOSIT ACCOUNT             |        |                      |                |                                 |          |               |               |                       |         |
| BROKER 1 CASH SWEEP TRADES                     |        |                      |                |                                 |          |               |               |                       |         |
|                                                | 15,472 | 01/04/21             | S SELL         | 17                              | 1.0000   | 0             | 15,472        | 15,472                | 0       |
|                                                | 43,278 | 01/12/21             | B BUY          | 23                              | 1.0000   | 0             | 43,278        | 43,278                | 0       |
|                                                | 40,000 | 01/13/21             | B BUY          | 25                              | 1.0000   | 0             | 40,000        | 40,000                | 0       |

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|                            |                           | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |   |
|----------------------------|---------------------------|---------------------------------|----------|---------------|---------------|-----------------------|---|
| IDENTITY OF PARTY INVOLVED | DESCRIPTION OF ASSET      | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |   |
|                            | 84,000 01/27/21 S SELL    | 29                              | 1.0000   | 0             | 84,000        | 84,000                | 0 |
|                            | 6,000 01/28/21 S SELL     | 35                              | 1.0000   | 0             | 6,000         | 6,000                 | 0 |
|                            | 1,327 01/29/21 S SELL     | 37                              | 1.0000   | 0             | 1,327         | 1,327                 | 0 |
|                            | 15,472 02/01/21 S SELL    | 42                              | 1.0000   | 0             | 15,472        | 15,472                | 0 |
|                            | 827 02/23/21 S SELL       | 52                              | 1.0000   | 0             | 827           | 827                   | 0 |
|                            | 827 02/24/21 B BUY        | 54                              | 1.0000   | 0             | 827           | 827                   | 0 |
|                            | 18,000 02/25/21 B BUY     | 60                              | 1.0000   | 0             | 18,000        | 18,000                | 0 |
|                            | 827 02/26/21 S SELL       | 62                              | 1.0000   | 0             | 827           | 827                   | 0 |
|                            | 15,416 03/01/21 S SELL    | 67                              | 1.0000   | 0             | 15,416        | 15,416                | 0 |
|                            | 138 03/02/21 B BUY        | 69                              | 1.0000   | 0             | 138           | 138                   | 0 |
|                            | 164 03/03/21 B BUY        | 71                              | 1.0000   | 0             | 164           | 164                   | 0 |
|                            | 138 03/04/21 S SELL       | 73                              | 1.0000   | 0             | 138           | 138                   | 0 |
|                            | 164 03/05/21 S SELL       | 80                              | 1.0000   | 0             | 164           | 164                   | 0 |
|                            | 97 03/24/21 S SELL        | 83                              | 1.0000   | 0             | 97            | 97                    | 0 |
|                            | 30,000 03/29/21 B BUY     | 92                              | 1.0000   | 0             | 30,000        | 30,000                | 0 |
|                            | 15,208 04/01/21 S SELL    | 98                              | 1.0000   | 0             | 15,208        | 15,208                | 0 |
|                            | 385 04/05/21 B BUY        | 101                             | 1.0000   | 0             | 385           | 385                   | 0 |
|                            | 3,056 04/06/21 S SELL     | 104                             | 1.0000   | 0             | 3,056         | 3,056                 | 0 |
|                            | 385 04/07/21 S SELL       | 106                             | 1.0000   | 0             | 385           | 385                   | 0 |
|                            | 120,860 04/09/21 B BUY    | 108                             | 1.0000   | 0             | 120,860       | 120,860               | 0 |
|                            | 45,000 04/14/21 B BUY     | 111                             | 1.0000   | 0             | 45,000        | 45,000                | 0 |
|                            | 54 04/22/21 S SELL        | 115                             | 1.0000   | 0             | 54            | 54                    | 0 |
|                            | 94,000 04/26/21 S SELL    | 117                             | 1.0000   | 0             | 94,000        | 94,000                | 0 |
|                            | 67,881 04/27/21 S SELL    | 123                             | 1.0000   | 0             | 67,881        | 67,881                | 0 |
|                            | 15,399 05/03/21 S SELL    | 128                             | 1.0000   | 0             | 15,399        | 15,399                | 0 |
|                            | 677 05/20/21 S SELL       | 138                             | 1.0000   | 0             | 677           | 677                   | 0 |
|                            | 22,000 05/26/21 B BUY     | 140                             | 1.0000   | 0             | 22,000        | 22,000                | 0 |
|                            | 23,184 06/01/21 S SELL    | 148                             | 1.0000   | 0             | 23,184        | 23,184                | 0 |
|                            | 580 06/02/21 S SELL       | 150                             | 1.0000   | 0             | 580           | 580                   | 0 |
|                            | 630 06/03/21 B BUY        | 154                             | 1.0000   | 0             | 630           | 630                   | 0 |
|                            | 630 06/07/21 S SELL       | 161                             | 1.0000   | 0             | 630           | 630                   | 0 |
|                            | 25,000 06/14/21 B BUY     | 171                             | 1.0000   | 0             | 25,000        | 25,000                | 0 |
|                            | 18,278 07/01/21 S SELL    | 182                             | 1.0000   | 0             | 18,278        | 18,278                | 0 |
|                            | 205,806 07/12/21 B BUY    | 187                             | 1.0000   | 0             | 205,806       | 205,806               | 0 |
|                            | 45,000 07/13/21 B BUY     | 189                             | 1.0000   | 0             | 45,000        | 45,000                | 0 |
|                            | 179 07/19/21 B BUY        | 195                             | 1.0000   | 0             | 179           | 179                   | 0 |
|                            | 7,042 07/23/21 B BUY      | 204                             | 1.0000   | 0             | 7,042         | 7,042                 | 0 |
|                            | 63,000 07/27/21 B BUY     | 206                             | 1.0000   | 0             | 63,000        | 63,000                | 0 |
|                            | 2,018,165 07/29/21 B BUY  | 208                             | 1.0000   | 0             | 2,018,165     | 2,018,165             | 0 |
|                            | 2,018,165 07/30/21 S SELL | 210                             | 1.0000   | 0             | 2,018,165     | 2,018,165             | 0 |
|                            | 293,314 08/02/21 S SELL   | 217                             | 1.0000   | 0             | 293,314       | 293,314               | 0 |
|                            | 15,189 09/01/21 S SELL    | 232                             | 1.0000   | 0             | 15,189        | 15,189                | 0 |
| BROKER 5200                | MISCELLANEOUS             |                                 |          |               |               |                       |   |
|                            | 51,049 09/01/21 B BUY     | 337                             | 1.0000   | 0             | 51,049        | 51,049                | 0 |
|                            | 16,013 09/17/21 B BUY     | 338                             | 1.0000   | 0             | 16,013        | 16,013                | 0 |
| BROKER 1                   | CASH SWEEP TRADES         |                                 |          |               |               |                       |   |
|                            | 15,190 10/01/21 S SELL    | 237                             | 1.0000   | 0             | 15,190        | 15,190                | 0 |
| BROKER 5200                | MISCELLANEOUS             |                                 |          |               |               |                       |   |

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EMPLOYEES

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DECEMBER 31, 2020  
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|                            |                        |                | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |
|----------------------------|------------------------|----------------|---------------------------------|----------|---------------|---------------|-----------------------|
| IDENTITY OF PARTY INVOLVED | DESCRIPTION OF ASSET   |                | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |
| BROKER 1                   | 3,655 10/01/21 B BUY   | 339            | 1.0000                          | 0        | 3,655         | 3,655         | 0                     |
|                            | CASH SWEEP TRADES      |                |                                 |          |               |               |                       |
|                            | 8,580 10/15/21 S SELL  | 243            | 1.0000                          | 0        | 8,580         | 8,580         | 0                     |
|                            | 562 10/21/21 S SELL    | 247            | 1.0000                          | 0        | 562           | 562           | 0                     |
|                            | 60 10/27/21 B BUY      | 249            | 1.0000                          | 0        | 60            | 60            | 0                     |
|                            | 3,055 11/01/21 B BUY   | 255            | 1.0000                          | 0        | 3,055         | 3,055         | 0                     |
|                            | 18,245 11/02/21 S SELL | 258            | 1.0000                          | 0        | 18,245        | 18,245        | 0                     |
|                            | 631 11/15/21 B BUY     | 260            | 1.0000                          | 0        | 631           | 631           | 0                     |
|                            | 19,889 12/01/21 B BUY  | 266            | 1.0000                          | 0        | 19,889        | 19,889        | 0                     |
|                            | 38,895 12/28/21 B BUY  | 268            | 1.0000                          | 0        | 38,895        | 38,895        | 0                     |
| -----                      |                        |                | -----                           |          | -----         |               | -----                 |
|                            | 2,818,721              | 27 TOTAL BUYS  |                                 | 0        | 2,818,721     | 2,818,721     | 0                     |
|                            | 2,748,317              | 30 TOTAL SELLS |                                 | 0        | 2,748,317     | 2,748,317     | 0                     |
| -----                      |                        |                | -----                           |          | -----         |               | -----                 |
|                            | 5,567,038              | SECURITY TOTAL |                                 | 0        | 5,567,038     | 5,567,038     | 0                     |

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SCHEDULE H (FORM 5500 - 4J-4)  
SCHEDULE OF REPORTABLE TRANSACTIONS  
TRANSACTIONS WITH SAME PARTY

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|                            |                                        | BASED ON MARKET VALUE OF        |          | 4,698,773     | 5% VALUE OF   | 234,938               |
|----------------------------|----------------------------------------|---------------------------------|----------|---------------|---------------|-----------------------|
| IDENTITY OF PARTY INVOLVED | DESCRIPTION OF ASSET                   | PURCHASE PRICE<br>SELLING PRICE | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN<br>OR (LOSS) |
| BROKER 5200                | MISCELLANEOUS                          |                                 |          |               |               |                       |
| -----                      | -----                                  |                                 |          |               |               |                       |
| 298706821                  | EUROPACIFIC GROWTH FUND CLASS R6       |                                 |          |               |               |                       |
| #2616                      |                                        |                                 |          |               |               |                       |
|                            | 4,844 07/22/21 SELL 197                | 70.3200                         | 0        | 218,328       | 340,647       | 122,319               |
| 666997028                  | IR&M LONG GOVERNMENT CREDIT FUND LLC   |                                 |          |               |               |                       |
|                            | 29,304 06/15/21 BUY 278                | 15.1172                         | 0        | 443,000       | 443,000       | 0                     |
|                            | 127,248 07/27/21 SELL 283              | 15.8601                         | 0        | 1,579,987     | 2,018,165     | 438,179               |
| 587992835                  | MERCER ACT LNG CORP INV PORT #600      |                                 |          |               |               |                       |
|                            | 20,877 07/22/21 BUY 327                | 21.8900                         | 0        | 457,000       | 457,000       | 0                     |
|                            | 20,612 07/29/21 BUY 328                | 21.8900                         | 0        | 451,200       | 451,200       | 0                     |
| 587992744                  | MERCER EMRG MARKETS EQUITY CT #425     |                                 |          |               |               |                       |
|                            | 15,878 07/29/21 BUY 320                | 15.2600                         | 0        | 242,300       | 242,300       | 0                     |
| 587992777                  | MERCER LNG DUR PASS FXD INC CT #420    |                                 |          |               |               |                       |
|                            | 11,255 07/22/21 BUY 315                | 27.1000                         | 0        | 305,000       | 305,000       | 0                     |
|                            | 11,152 07/29/21 BUY 316                | 26.9900                         | 0        | 301,000       | 301,000       | 0                     |
| 587992736                  | MERCER NON-US CORE EQUITY CT #330      |                                 |          |               |               |                       |
|                            | 13,904 07/29/21 BUY 301                | 25.7700                         | 0        | 358,300       | 358,300       | 0                     |
| 587992801                  | MERCER US LARGE CAP PASS EQ CT #410    |                                 |          |               |               |                       |
|                            | 11,084 07/22/21 BUY 309                | 49.2600                         | 0        | 546,000       | 546,000       | 0                     |
|                            | 7,967 07/29/21 BUY 311                 | 49.8400                         | 0        | 397,100       | 397,100       | 0                     |
|                            | 5,596 07/30/21 BUY 312                 | 49.5800                         | 0        | 277,446       | 277,446       | 0                     |
| 922040100                  | VANGUARD INSTITUTIONAL INDEX FUND      |                                 |          |               |               |                       |
| #94                        |                                        |                                 |          |               |               |                       |
|                            | 2,662 07/22/21 SELL 202                | 381.7600                        | 0        | 724,392       | 1,016,135     | 291,743               |
| 94988A668                  | ALLSPRING SPECIAL SMALL CAP VALUE FUND |                                 |          |               |               |                       |
|                            | 366 01/27/21 SELL 34                   | 38.3000                         | 0        | 13,026        | 14,000        | 974                   |
|                            | 627 06/11/21 SELL 170                  | 46.2400                         | 0        | 22,349        | 29,000        | 6,651                 |
|                            | 1,834 07/22/21 SELL 203                | 42.8300                         | 0        | 65,368        | 78,567        | 13,200                |
| 298706821                  | EUROPACIFIC GROWTH FUND CLASS R6       |                                 |          |               |               |                       |
| #2616                      |                                        |                                 |          |               |               |                       |
|                            | 246 01/27/21 SELL 30                   | 69.0201                         | 0        | 10,156        | 17,000        | 6,844                 |
|                            | 248 02/24/21 SELL 56                   | 72.4699                         | 0        | 10,241        | 18,000        | 7,759                 |
|                            | 484 04/26/21 BUY 120                   | 72.3800                         | 0        | 35,000        | 35,000        | 0                     |
|                            | 979 06/11/21 SELL 164                  | 74.5800                         | 0        | 42,981        | 73,000        | 30,019                |
|                            | 201 06/16/21 BUY 174                   | 71.8299                         | 0        | 14,432        | 14,432        | 0                     |

FD496  
SCHEDULE H (FORM 5500 - 4J-4)  
SCHEDULE OF REPORTABLE TRANSACTIONS  
TRANSACTIONS WITH SAME PARTY

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

|                                                |     | BASED ON MARKET VALUE OF |          | 4,698,773     | 5% VALUE OF   | 234,938   |
|------------------------------------------------|-----|--------------------------|----------|---------------|---------------|-----------|
| IDENTITY OF PARTY INVOLVED                     |     | PURCHASE PRICE           | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN  |
| DESCRIPTION OF ASSET                           |     | SELLING PRICE            |          |               |               | OR (LOSS) |
| 316389766 FIDELITY SMALL CAP GROWTH FUND       |     |                          |          |               |               |           |
| CLASS-I #1388                                  |     |                          |          |               |               |           |
| 549 01/27/21 SELL                              | 31  | 34.5900                  | 0        | 18,151        | 19,000        | 849       |
| 243 06/11/21 SELL                              | 165 | 36.9699                  | 0        | 8,045         | 9,000         | 955       |
| 2,342 07/22/21 SELL                            | 198 | 36.6000                  | 0        | 77,376        | 85,699        | 8,324     |
| 666997028 IR&M LONG GOVERNMENT CREDIT FUND LLC |     |                          |          |               |               |           |
| 5,356 01/28/21 BUY                             | 275 | 15.6823                  | 0        | 84,000        | 84,000        | 0         |
| 58 02/01/21 SELL                               | 279 | 15.6181                  | 0        | 656           | 899           | 244       |
| 4,320 02/25/21 BUY                             | 276 | 14.5846                  | 0        | 63,000        | 63,000        | 0         |
| 0 03/05/21 BUY                                 | 414 | .0000                    | 0        | 76            | 76            | 0         |
| 6,363 04/27/21 BUY                             | 277 | 14.7733                  | 0        | 94,000        | 94,000        | 0         |
| 56 05/01/21 SELL                               | 281 | 14.7672                  | 0        | 649           | 826           | 177       |
| 0 06/04/21 BUY                                 | 415 | .0000                    | 0        | 86            | 86            | 0         |
| 82 07/27/21 SELL                               | 284 | 15.8600                  | 0        | 1,016         | 1,298         | 282       |
| 479995185 JPMCB STRATEGIC PROPERTY FUND        |     |                          |          |               |               |           |
| 4,171 01/08/21 SELL                            | 287 | 10.3755                  | 0        | 32,663        | 43,275        | 10,612    |
| 87 01/11/21 SELL                               | 289 | 10.3755                  | 0        | 680           | 901           | 221       |
| 0 01/31/21 BUY                                 | 409 | .0000                    | 0        | 748           | 748           | 0         |
| 0 02/28/21 BUY                                 | 410 | .0000                    | 0        | 729           | 729           | 0         |
| 0 03/31/21 BUY                                 | 411 | .0000                    | 0        | 946           | 946           | 0         |
| 11,436 04/08/21 SELL                           | 134 | 10.5682                  | 0        | 90,463        | 120,855       | 30,392    |
| 85 04/08/21 SELL                               | 135 | 10.5682                  | 0        | 671           | 896           | 225       |
| 0 04/30/21 BUY                                 | 412 | .0000                    | 0        | 976           | 976           | 0         |
| 0 05/31/21 BUY                                 | 413 | .0000                    | 0        | 558           | 558           | 0         |
| 0 06/30/21 BUY                                 | 425 | .0000                    | 0        | 600           | 600           | 0         |
| 0 07/07/21 BUY                                 | 428 | .0000                    | 0        | 572           | 572           | 0         |
| 18,921 07/08/21 SELL                           | 293 | 10.8770                  | 0        | 152,369       | 205,800       | 53,431    |
| 72 07/12/21 SELL                               | 292 | 10.8769                  | 0        | 583           | 788           | 205       |
| 57629H293 MASSMUTUAL PREMIER STRATEGIC         |     |                          |          |               |               |           |
| EMERGING MARKETS FUND CLASS I                  |     |                          |          |               |               |           |
| 483 02/24/21 SELL                              | 58  | 16.5500                  | 0        | 7,275         | 8,000         | 725       |
| 608 04/26/21 BUY                               | 122 | 16.4400                  | 0        | 10,000        | 10,000        | 0         |
| 1,787 06/11/21 SELL                            | 168 | 16.7900                  | 0        | 27,136        | 30,000        | 2,864     |
| 4,407 07/22/21 SELL                            | 201 | 15.7800                  | 0        | 66,932        | 69,544        | 2,612     |
| 587992835 MERCER ACT LNG CORP INV PORT #600    |     |                          |          |               |               |           |
| 49 11/30/21 SELL                               | 329 | 21.9002                  | 0        | 1,069         | 1,070         | 1         |
| 76 12/27/21 SELL                               | 330 | 21.7699                  | 0        | 1,667         | 1,658         | (9)       |
| 587992744 MERCER EMRG MARKETS EQUITY CT #425   |     |                          |          |               |               |           |
| 8,805 07/22/21 BUY                             | 319 | 15.5600                  | 0        | 137,000       | 137,000       | 0         |
| 199 08/31/21 SELL                              | 321 | 15.3500                  | 0        | 3,050         | 3,047         | (3)       |
| 350 09/16/21 SELL                              | 322 | 15.0200                  | 0        | 5,379         | 5,257         | (121)     |
| 251 09/30/21 SELL                              | 323 | 14.5700                  | 0        | 3,855         | 3,655         | (200)     |
| 1,370 10/13/21 SELL                            | 324 | 14.6700                  | 0        | 21,060        | 20,105        | (955)     |

FD496  
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SCHEDULE OF REPORTABLE TRANSACTIONS  
TRANSACTIONS WITH SAME PARTY

ALERIS RETIREMENT PLAN FOR BARGAINED  
EMPLOYEES

25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

|                            |                                        | BASED ON MARKET VALUE OF |          |               | 4,698,773     | 5% VALUE OF | 234,938 |
|----------------------------|----------------------------------------|--------------------------|----------|---------------|---------------|-------------|---------|
| IDENTITY OF PARTY INVOLVED |                                        | PURCHASE PRICE           | EXPENSES | COST OF ASSET | CURRENT VALUE | NET GAIN    |         |
| DESCRIPTION OF ASSET       |                                        | SELLING PRICE            |          |               |               | OR (LOSS)   |         |
|                            | 508 10/28/21 SELL 325                  | 14.8600                  | 0        | 7,809         | 7,552         | (258)       |         |
|                            | 236 12/27/21 SELL 326                  | 14.5800                  | 0        | 3,634         | 3,448         | (186)       |         |
| 587992751                  | MERCER GLOBAL LOW VOL EQ CT #345       |                          |          |               |               |             |         |
|                            | 7,146 07/22/21 BUY 307                 | 25.6100                  | 0        | 183,000       | 183,000       | 0           |         |
|                            | 6,917 07/29/21 BUY 308                 | 25.9500                  | 0        | 179,500       | 179,500       | 0           |         |
| 587992777                  | MERCER LNG DUR PASS FXD INC CT #420    |                          |          |               |               |             |         |
|                            | 50 11/30/21 SELL 317                   | 27.4998                  | 0        | 1,348         | 1,370         | 23          |         |
|                            | 28 12/27/21 SELL 318                   | 27.1002                  | 0        | 758           | 760           | 2           |         |
| 587992736                  | MERCER NON-US CORE EQUITY CT #330      |                          |          |               |               |             |         |
|                            | 8,353 07/22/21 BUY 300                 | 25.2600                  | 0        | 211,000       | 211,000       | 0           |         |
|                            | 1,842 08/31/21 SELL 302                | 26.0600                  | 0        | 47,116        | 48,002        | 887         |         |
|                            | 410 09/16/21 SELL 303                  | 26.2500                  | 0        | 10,481        | 10,756        | 275         |         |
|                            | 705 10/13/21 SELL 304                  | 25.1000                  | 0        | 18,040        | 17,703        | (338)       |         |
|                            | 413 10/28/21 SELL 305                  | 25.9000                  | 0        | 10,560        | 10,693        | 133         |         |
|                            | 494 12/27/21 SELL 306                  | 25.8100                  | 0        | 12,629        | 12,743        | 114         |         |
| 587992801                  | MERCER US LARGE CAP PASS EQ CT #410    |                          |          |               |               |             |         |
|                            | 1,266 07/23/21 SELL 310                | 49.7600                  | 0        | 62,367        | 63,000        | 633         |         |
|                            | 631 11/30/21 SELL 313                  | 51.7600                  | 0        | 31,236        | 32,639        | 1,404       |         |
|                            | 373 12/27/21 SELL 314                  | 54.3599                  | 0        | 18,486        | 20,287        | 1,801       |         |
| 587992702                  | MERCER US SMALL/MID CAP EQUITY CT      |                          |          |               |               |             |         |
|                            | 3,415 07/22/21 BUY 298                 | 41.5800                  | 0        | 142,000       | 142,000       | 0           |         |
|                            | 2,091 07/29/21 BUY 299                 | 42.4500                  | 0        | 88,765        | 88,765        | 0           |         |
| 552987554                  | MFS MID CAP GROWTH FUND CLASS R6 #4834 |                          |          |               |               |             |         |
|                            | 1,191 01/27/21 BUY 32                  | 29.3900                  | 0        | 35,000        | 35,000        | 0           |         |
|                            | 720 04/26/21 BUY 121                   | 31.9400                  | 0        | 23,000        | 23,000        | 0           |         |
|                            | 1,286 06/11/21 SELL 167                | 31.1100                  | 0        | 37,345        | 40,000        | 2,655       |         |
|                            | 6,394 07/22/21 SELL 200                | 32.7100                  | 0        | 185,708       | 209,139       | 23,431      |         |
| 55272P596                  | MFS MID CAP VALUE FIND CLASS I #1824   |                          |          |               |               |             |         |
|                            | 523 02/24/21 SELL 57                   | 28.7000                  | 0        | 13,521        | 15,000        | 1,479       |         |
|                            | 384 03/26/21 SELL 90                   | 29.9400                  | 0        | 9,936         | 11,500        | 1,564       |         |
|                            | 2,104 06/11/21 SELL 166                | 31.8500                  | 0        | 54,419        | 67,000        | 12,581      |         |
|                            | 6,126 07/22/21 SELL 199                | 30.7400                  | 0        | 158,473       | 188,310       | 29,837      |         |
| 922040100                  | VANGUARD INSTITUTIONAL INDEX FUND #94  |                          |          |               |               |             |         |
|                            | 63 01/27/21 BUY 33                     | 331.2721                 | 0        | 21,000        | 21,000        | 0           |         |
|                            | 115 02/24/21 SELL 59                   | 347.2011                 | 0        | 31,205        | 40,000        | 8,795       |         |
|                            | 12 03/25/21 BUY 85                     | 339.6056                 | 0        | 4,150         | 4,150         | 0           |         |
|                            | 2 03/25/21 BUY 87                      | 339.5520                 | 0        | 515           | 515           | 0           |         |

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25045800  
DECEMBER 31, 2020  
THROUGH DECEMBER 31, 2021

|                                             |         |              |      | BASED ON MARKET VALUE OF | 4,698,773 | 5% VALUE OF   | 234,938       |            |           |
|---------------------------------------------|---------|--------------|------|--------------------------|-----------|---------------|---------------|------------|-----------|
| IDENTITY OF PARTY INVOLVED                  |         |              |      | PURCHASE PRICE           | EXPENSES  | COST OF ASSET | CURRENT VALUE | NET GAIN   |           |
| DESCRIPTION OF ASSET                        |         |              |      | SELLING PRICE            |           |               |               | OR (LOSS)  |           |
|                                             | 33      | 03/25/21     | BUY  | 89                       | 339.6073  | 0             | 11,346        | 11,346     | 0         |
|                                             | 53      | 03/26/21     | SELL | 91                       | 347.0789  | 0             | 14,489        | 18,500     | 4,011     |
|                                             | 60      | 05/25/21     | SELL | 139                      | 366.5689  | 0             | 16,314        | 22,000     | 5,686     |
|                                             | 591     | 06/11/21     | SELL | 169                      | 372.0100  | 0             | 160,753       | 220,000    | 59,247    |
|                                             | 9       | 06/24/21     | BUY  | 176                      | 370.4371  | 0             | 3,263         | 3,263      | 0         |
| 92532P207 VERSUS CAPITAL MULTI-MANAGER REAL |         |              |      |                          |           |               |               |            |           |
| ESTATE INCOME FUND LLC CLASS I              |         |              |      |                          |           |               |               |            |           |
|                                             | 51      | 01/14/21     | BUY  | 27                       | 26.9601   | 0             | 1,371         | 1,371      | 0         |
|                                             | 52      | 04/15/21     | BUY  | 113                      | 27.5200   | 0             | 1,436         | 1,436      | 0         |
|                                             | 52      | 07/15/21     | BUY  | 191                      | 28.6299   | 0             | 1,502         | 1,502      | 0         |
|                                             | 53      | 10/14/21     | BUY  | 239                      | 29.4298   | 0             | 1,570         | 1,570      | 0         |
|                                             | 130     | 12/29/21     | BUY  | 270                      | 30.2100   | 0             | 3,912         | 3,912      | 0         |
| 992995936 WELLS FARGO BANK COLLATERALIZED   |         |              |      |                          |           |               |               |            |           |
| INSTITUTIONAL BANK DEPOSIT ACCOUNT          |         |              |      |                          |           |               |               |            |           |
|                                             | 51,049  | 09/01/21     | BUY  | 337                      | 1.0000    | 0             | 51,049        | 51,049     | 0         |
|                                             | 16,013  | 09/17/21     | BUY  | 338                      | 1.0000    | 0             | 16,013        | 16,013     | 0         |
|                                             | 3,655   | 10/01/21     | BUY  | 339                      | 1.0000    | 0             | 3,655         | 3,655      | 0         |
| -----                                       |         |              |      |                          |           |               |               |            |           |
|                                             | 485,493 | BROKER TOTAL |      |                          |           | 0             | 9,318,316     | 10,500,605 | 1,182,295 |

|                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                    |                                                                                                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <b>SCHEDULE SB</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Single-Employer Defined Benefit Plan</b><br><b>Actuarial Information</b><br><br>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).<br><br><b>► File as an attachment to Form 5500 or 5500-SF.</b> | <small>OMB No. 1210-0110</small><br><br><b>2021</b><br><br><b>This Form is Open to Public Inspection</b> |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

► **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.

|                                                                                                                                                         |                                                             |     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----|
| <b>A</b> Name of plan<br>ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES                                                                                 | <b>B</b> Three-digit plan number (PN)                       | 003 |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF<br>NOVELIS ALR ROLLED PRODUCTS, INC.                                           | <b>D</b> Employer Identification Number (EIN)<br>27-1539745 |     |
| <b>E</b> Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B               |                                                             |     |
| <b>F</b> Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500 |                                                             |     |

|               |                                                                                                                                                                                                           |                            |                           |
|---------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|---------------------------|
| <b>Part I</b> | <b>Basic Information</b>                                                                                                                                                                                  |                            |                           |
| <b>1</b>      | Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2021</u>                                                                                                                                  |                            |                           |
| <b>2</b>      | Assets:                                                                                                                                                                                                   |                            |                           |
|               | <b>a</b> Market value                                                                                                                                                                                     | <b>2a</b>                  | 4,826,769                 |
|               | <b>b</b> Actuarial value                                                                                                                                                                                  | <b>2b</b>                  | 4,406,197                 |
| <b>3</b>      | Funding target/participant count breakdown                                                                                                                                                                | (1) Number of participants | (2) Vested Funding Target |
|               | <b>a</b> For retired participants and beneficiaries receiving payment                                                                                                                                     | 97                         | 2,137,167                 |
|               | <b>b</b> For terminated vested participants                                                                                                                                                               | 54                         | 1,180,109                 |
|               | <b>c</b> For active participants                                                                                                                                                                          | 26                         | 632,150                   |
|               | <b>d</b> Total                                                                                                                                                                                            | 177                        | 3,949,426                 |
| <b>4</b>      | If the plan is in at-risk status, check the box and complete lines (a) and (b). <input type="checkbox"/>                                                                                                  |                            |                           |
|               | <b>a</b> Funding target disregarding prescribed at-risk assumptions                                                                                                                                       | <b>4a</b>                  |                           |
|               | <b>b</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 | <b>4b</b>                  |                           |
| <b>5</b>      | Effective interest rate                                                                                                                                                                                   | <b>5</b>                   | 5.63%                     |
| <b>6</b>      | Target normal cost                                                                                                                                                                                        |                            |                           |
|               | <b>a</b> Present value of current plan year accruals                                                                                                                                                      | <b>6a</b>                  | 0                         |
|               | <b>b</b> Expected plan-related expenses                                                                                                                                                                   | <b>6b</b>                  | 40,000                    |
|               | <b>c</b> Total (line 6a + line 6b)                                                                                                                                                                        | <b>6c</b>                  | 40,000                    |

**Statement by Enrolled Actuary**

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

|                  |                                                                              |                                                |
|------------------|------------------------------------------------------------------------------|------------------------------------------------|
| <b>SIGN HERE</b> | <div style="font-size: 2em; font-weight: bold;">RDR</div>                    | <div style="font-size: 1.2em;">9/14/2022</div> |
|                  | Signature of actuary                                                         | Date                                           |
|                  | Rochelle Ramirez, ASA, EA                                                    | 2008763                                        |
|                  | Type or print name of actuary                                                | Most recent enrollment number                  |
|                  | Willis Towers Watson US LLC                                                  | 678-684-0679                                   |
|                  | Firm name                                                                    | Telephone number (including area code)         |
|                  | 5 Concourse Parkway<br>18th Floor<br>Atlanta GA 30328<br>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 ☐

**For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF.**

**Schedule SB (Form 5500) 2021**  
v. 201209



**Part V Assumptions Used to Determine Funding Target and Target Normal Cost****21** Discount rate:**a** Segment rates:1st segment:  
4.75 %2nd segment:  
5.36 %3rd segment:  
6.11 %☐ N/A, full yield curve used**b** Applicable month (enter code) .....**21b**

0

**22** Weighted average retirement age .....**22**

63

**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** Is the plan required to provide a Schedule of Active Participants? 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****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** 40,000**b** Excess assets, if applicable, but not greater than line 31a ..... **31b** 40,000**32** Amortization installments:**a** Net shortfall amortization installment ..... Outstanding Balance 0 Installment 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 |
|------------------------------------------------------------------------|-------------------|--------------------|---------------|
| <b>35</b> 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** 42,517**38** Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36) ..... **38a** 42,517**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 Pension Relief Act of 2010 (See Instructions)****41** If an election was made to use PRA 2010 funding relief for this plan:**a** Schedule elected ..... ☐ 2 plus 7 years ☐ 15 years**b** Eligible plan year(s) for which the election in line 41a was made ..... ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

# SCHEDULE SB ATTACHMENTS

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## Schedule SB – Statement by Enrolled Actuary

|                          |                                                |
|--------------------------|------------------------------------------------|
| <b>Plan Sponsor</b>      | Novelis ALR Rolled Products, Inc.              |
| <b>EIN/PN</b>            | 27-1539745/003                                 |
| <b>Plan Name</b>         | Aleris Retirement Plan for Bargained Employees |
| <b>Valuation Date</b>    | January 1, 2021                                |
| <b>Enrolled Actuary</b>  | Rochelle Ramirez, ASA, EA                      |
| <b>Enrollment Number</b> | 20-08763                                       |

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2021

### Ashville

| x  | $q_x^r$ | $l_x$ | ${}_{x-55}P_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|----|---------|-------|----------------------------------|------------------------|----------------------------|
| 55 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 56 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 57 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 58 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 59 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 60 | 0.15    | 1,000 | 1.000000                         | 0.150000               | 9.000000                   |
| 61 | 0.10    | 850   | 0.850000                         | 0.085000               | 5.185000                   |
| 62 | 0.25    | 765   | 0.765000                         | 0.191250               | 11.857500                  |
| 63 | 0.10    | 574   | 0.573750                         | 0.057375               | 3.614625                   |
| 64 | 0.10    | 516   | 0.516375                         | 0.051638               | 3.304800                   |
| 65 | 1.00    | 465   | 0.464738                         | 0.464738               | 30.207938                  |
| 66 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 67 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 68 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 69 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 70 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |

Average age at retirement

63.169863

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# SCHEDULE SB ATTACHMENTS

## Richmond

| x                         | $q_x^r$ | $l_x$ | ${}_{x-55}p_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|---------------------------|---------|-------|----------------------------------|------------------------|----------------------------|
| 55                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 56                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 57                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 58                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 59                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 60                        | 0.15    | 1,000 | 1.000000                         | 0.150000               | 9.000000                   |
| 61                        | 0.10    | 850   | 0.850000                         | 0.085000               | 5.185000                   |
| 62                        | 0.40    | 765   | 0.765000                         | 0.306000               | 18.972000                  |
| 63                        | 0.10    | 459   | 0.459000                         | 0.045900               | 2.891700                   |
| 64                        | 0.10    | 413   | 0.413100                         | 0.041310               | 2.643840                   |
| 65                        | 1.00    | 372   | 0.371790                         | 0.371790               | 24.166350                  |
| 66                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 67                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 68                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 69                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 70                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| Average age at retirement |         |       |                                  |                        | 62.858890                  |

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 Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Employees with >= 30 years of service

| x  | $q_x^r$ | $l_x$ | $_{x-55}p_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|----|---------|-------|--------------------------------|------------------------|----------------------------|
| 55 | 0.05    | 1,000 | 1.000000                       | 0.050000               | 2.750000                   |
| 56 | 0.05    | 950   | 0.950000                       | 0.047500               | 2.660000                   |
| 57 | 0.05    | 903   | 0.902500                       | 0.045125               | 2.572125                   |
| 58 | 0.05    | 857   | 0.857375                       | 0.042869               | 2.486388                   |
| 59 | 0.05    | 815   | 0.814506                       | 0.040725               | 2.402793                   |
| 60 | 0.10    | 774   | 0.773781                       | 0.077378               | 4.642686                   |
| 61 | 0.10    | 696   | 0.696403                       | 0.069640               | 4.248057                   |
| 62 | 0.40    | 627   | 0.626763                       | 0.250705               | 15.543711                  |
| 63 | 0.10    | 376   | 0.376058                       | 0.037606               | 2.369162                   |
| 64 | 0.10    | 338   | 0.338452                       | 0.033845               | 2.166091                   |
| 65 | 1.00    | 305   | 0.304607                       | 0.304607               | 19.799429                  |
| 66 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 67 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 68 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 69 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 70 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |

Average age at retirement

61.640444

## Weighted Average

| Group         | Number of EEs | Avg Ret Age | B x C   |
|---------------|---------------|-------------|---------|
| Ashville      | 14            | 63.17       | 884.38  |
| Richmond      | 5             | 62.86       | 314.29  |
| Emp >= 30 yrs | 7             | 61.64       | 431.48  |
| Total         | 26            |             | 1630.16 |

Average:

62.70

63

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Plan Name: Aleris Retirement Plan for Bargained Employees  
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 Plan Sponsor: Novelis ALR Rolled Products, Inc.  
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# SCHEDULE SB ATTACHMENTS

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

### Economic Assumptions

Interest rate basis:

|                       |                 |
|-----------------------|-----------------|
| ■ Applicable month    | January 2021    |
| ■ Interest rate basis | 3-Segment Rates |

Interest rates:

|                           | Reflecting<br>Corridors <sup>1</sup> | Not Reflecting<br>Corridors <sup>2</sup> |
|---------------------------|--------------------------------------|------------------------------------------|
| ■ First segment rate      | 4.75%                                | 1.75%                                    |
| ■ Second segment rate     | 5.36%                                | 3.04%                                    |
| ■ Third segment rate      | 6.11%                                | 3.65%                                    |
| ■ Effective interest rate | 5.63%                                | 3.30%                                    |

### Demographic Assumptions

|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Inclusion date           | The valuation date coincident with or next following the date on which the employee becomes a participant.                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| New or rehired employees | It was assumed there will be no new or rehired employees.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Mortality                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| ■ Healthy                | Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019). |

<sup>1</sup> Used for benefit restrictions and calculations of contributions.

<sup>2</sup> Used for PBGC, At-Risk calculations and calculation of maximum deductible contributions.

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## SCHEDULE SB ATTACHMENTS

- Disabled Separate rates for non-annuitants (based on RP-2014 "Employees" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019) and annuitants (based on RP-2014 "Healthy Annuitants" table without collar or amount adjustments, adjusted backward to 2006 with MP-2014, and then projected forward with a static projection as specified in the regulations under §1.430(h)(3)-1 using Scale MP-2019).

### Termination

Rates vary by age

Sample rates:

#### Percentage leaving during the year

| Age | Percentage |
|-----|------------|
| 20  | 4.86%      |
| 25  | 3.90%      |
| 30  | 3.10%      |
| 35  | 2.42%      |
| 40  | 1.88%      |
| 45  | 1.46%      |
| 50  | 1.12%      |
| 55  | 0.84%      |
| 60  | 0.60%      |
| 65  | 0.38%      |

### Disability

Rates vary by age and gender

#### Disability Incidence

| Age | Male  | Female |
|-----|-------|--------|
| 20  | 0.15% | 0.09%  |
| 25  | 0.22% | 0.15%  |
| 30  | 0.31% | 0.25%  |
| 35  | 0.43% | 0.39%  |
| 40  | 0.60% | 0.55%  |
| 45  | 0.83% | 0.78%  |
| 50  | 1.22% | 1.20%  |
| 55  | 2.12% | 1.96%  |
| 60  | 3.24% | 2.33%  |
| 65  | 4.37% | 2.72%  |

### Retirement

Rates vary by age and service as shown below

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## SCHEDULE SB ATTACHMENTS

### Percentage retiring during the year

| Age   | <30 years of service for Ashville | <30 years of service for Richmond | 30+ years of service |
|-------|-----------------------------------|-----------------------------------|----------------------|
| 55-59 | 0%                                | 0%                                | 5%                   |
| 60    | 15%                               | 15%                               | 10%                  |
| 61    | 10%                               | 10%                               | 10%                  |
| 62    | 25%                               | 40%                               | 40%                  |
| 63-64 | 10%                               | 10%                               | 10%                  |
| 65    | 100%                              | 100%                              | 100%                 |

#### Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have been eligible for early retirement.
- Disability Upon Disablement
- Deferred vested benefit Richmond Participants: Age 62 with 10 years of service or Age 65  
Ashville Participants: Age 65
- Retirement benefit Immediate upon termination of employment after reaching early retirement eligibility.

#### Form of payment

100% of single participants are assumed to elect a life annuity; 25% of married participants are assumed to elect a life annuity and 75% of married participants are assumed to elect a 50% joint and survivor (with pop-up) annuity option.

#### Percent married

75%

#### Spouse age

Wife three years younger than husband.

#### Administrative expenses

\$40,000

#### Cash flows:

- Timing of benefit payments Annuity payments are payable monthly at the beginning of the month.

### Methods

Plan Name: Aleris Retirement Plan for Bargained Employees  
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Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

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|                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Valuation date                                                           | First day of plan year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Funding target                                                           | Present value of accrued benefits as required by regulations under IRC §430.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Target normal cost                                                       | Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Actuarial value of assets for determining minimum required contributions | <p>Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2020 plan year).</p> <p>The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.</p> |
| Benefits not valued                                                      | All benefits described in the Plan Provisions section of this report were valued. Willis Towers Watson has reviewed the plan provisions with Novelis and, based on that review, is not aware of any significant benefits required to be valued that were not.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
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| Valuation Date: | January 1, 2021                                |

# SCHEDULE SB ATTACHMENTS

## Sources of Data and Other Information

In preparing the valuation contained in this report, Willis Towers Watson has relied upon data and information regarding plan provisions, participants, assets, contributions, and sponsor funding elections and accounting policies and methods provided to us by Novelis and other persons or organizations designated by Novelis. We have relied on all the data and information provided as complete and accurate. We have reviewed this data and information for overall reasonableness and consistency, but have neither audited nor independently verified this information. Based on discussions with and concurrence by the plan sponsor, assumptions or estimates may have been made if data were not available. The data was not adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date since the data collection date and the measurement date are the same. We are not aware of any material errors, omissions or inconsistencies in the data, that would have a significant effect on the results of our calculations.

A summary of participant data reflected can be found in Section 3 of this report.

## Assumptions Rationale - Significant Economic Assumptions

|                         |                                                                                                                                                                      |
|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Discount rate           | The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time. |
| Administrative expenses | The plan pays PBGC Premiums out of plan assets. Thus, the expected administrative expense is equal to the expected PBGC Premium for the fiscal year.                 |

## Assumptions Rationale - Significant Demographic Assumptions

|                    |                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Healthy Mortality  | Assumptions used for funding purposes are as prescribed by IRC §430(h).                                                                                                                                                                                                                                                                                                                                                |
| Disabled Mortality | Assumptions used for funding purposes are as prescribed by IRC §430(h).                                                                                                                                                                                                                                                                                                                                                |
| Termination        | Termination rates are based on the Society of Actuaries 2003 small plan, age-based turnover table with adjustments, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. This assumption was set by the prior actuary.                                                                                                                  |
| Retirement         | Retirement rates were developed based on the prior actuary's experience with similar plans taking into consideration retirement subsidies the plan offers at various ages and the age social insurance programs are first available, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. This assumption was set by the prior actuary. |

|                 |                                                |
|-----------------|------------------------------------------------|
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# SCHEDULE SB ATTACHMENTS

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## Source of Prescribed Methods

|                 |                                                                                                                                                                                                                                                                                                                                                |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Funding methods | The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430. |
|-----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

## Changes in Assumptions and Methods

|                                             |                                                                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Change in assumptions since prior valuation | <p>The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of January 2020 to January 2021.</p> <p>The mortality improvement tables were updated from MP-2018 to MP-2019, as prescribed by the IRS.</p> <p>The assumed plan-related expenses added to the target normal cost were changed from \$150,000 for 2020 to \$40,000 for 2021.</p> |
| Change in methods since prior valuation     | None.                                                                                                                                                                                                                                                                                                                                                                                                            |

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
| EIN / PN:       | 27-1539745/003                                 |
| Plan Sponsor:   | Novelis ALR Rolled Products, Inc.              |
| Valuation Date: | January 1, 2021                                |

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Part V Summary of Plan Provisions

### Plan Provisions

|                   |                                                                                                                                                                                                                                                                                                               |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date    | Restated Plan: January 1, 2015. The most recent amendment reflected in the following plan provisions was effective April 1, 2018.                                                                                                                                                                             |
| Covered Employees | An individual employed by the Employer or any other employer require to be aggregated with the Employer.                                                                                                                                                                                                      |
| Participation     | Bargaining employees who have attained age 21 with four calendar quarters of service at the Richmond Plant 44 location whose date of employment occurred prior to September 1, 2001 or a bargaining employee of the Ashville Ohio Plant Location whose date of employment occurred prior to February 1, 2001. |

### Definitions

|                              |                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Eligibility service          | All service is measured in full and fractional years on the basis that 365 days equals one year from the employee's hire date (reduced by any period of Severance).                                                                                                                                                                                                                      |
| Benefit service              | <p>All service measured from the date of employment, expressed as the total number of calendar quarters in each of which the employee receives wages, disability benefits or workman's compensation.</p> <p>Credited Service was frozen effective January 1, 2008 for all participants with the exception of Ashville union participants who were frozen effective February 1, 2008.</p> |
| Normal retirement date (NRD) | <p>The first day of the month following or coincident with the earliest of :</p> <ul style="list-style-type: none"><li>▪ The later of 65 and 5 years of vesting service</li><li>▪ 30 years of vesting service</li></ul>                                                                                                                                                                  |

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## Normal retirement benefit

### Richmond Location

The sum of the pension factors from the appropriate wage grades times the service earned while in the wage grade, less the amount payable from any prior plan. Participants who retire between August 1, 2004 and August 1, 2006 are eligible for all the benefit increases in the bargaining period.

| Pre-August 1, 2001<br>wage grade | Service prior to<br>August 1, 2001 | Service between<br>August 1, 2001 and<br>August 1, 2004 |
|----------------------------------|------------------------------------|---------------------------------------------------------|
| 1 to 4                           | \$33.25                            | \$39.25                                                 |
| 5 to 8                           | \$34.55                            | \$40.55                                                 |
| 9 to 12                          | \$35.90                            | \$41.90                                                 |
| 13 to 16                         | \$37.25                            | \$43.25                                                 |
| 17 to 20                         | \$38.55                            | \$44.55                                                 |
| 21 to 24                         | \$39.90                            | \$45.90                                                 |
| 25 +                             | \$41.25                            | \$47.25                                                 |

|               | <i>Service on and after August 1, 2004</i> |                                |                                |
|---------------|--------------------------------------------|--------------------------------|--------------------------------|
| Wage<br>Grade | Effective<br>August 1,<br>2004             | Effective<br>August 1,<br>2005 | Effective<br>August 1,<br>2006 |
| 1 to 4        | \$41.25                                    | \$43.25                        | \$45.25                        |
| 5 to 8        | \$42.55                                    | \$44.55                        | \$46.55                        |
| 9 to 12       | \$43.90                                    | \$45.90                        | \$47.90                        |
| 13 to 16      | \$45.25                                    | \$47.25                        | \$49.25                        |
| 17 to 20      | \$46.55                                    | \$48.55                        | \$50.55                        |
| 21 to 24      | \$47.90                                    | \$49.90                        | \$51.90                        |
| 25 +          | \$49.25                                    | \$51.25                        | \$53.25                        |

### Ashville Location

Pension factor determined by employment date times service, less the amount payable from any prior plan. Participants who retire between May 23, 2003 and February 1, 2006 are eligible for all the benefit increases in the bargaining period.

| Service                        | Employment<br>Prior to<br>March 1, 1984 | Employment<br>on and after<br>March 1, 1984 |
|--------------------------------|-----------------------------------------|---------------------------------------------|
| Prior to February 1, 1998      | \$21.00                                 | \$18.50                                     |
| On and after February 1, 1998: | \$24.00                                 | \$21.50                                     |
| Effective February 1, 1999     | \$28.00                                 | \$25.50                                     |
| Effective February 1, 2000     | \$32.00                                 | \$29.50                                     |

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|                            |         |         |
|----------------------------|---------|---------|
| Effective February 1, 2001 | \$35.00 | \$32.50 |
| Effective February 1, 2002 | \$38.00 | \$35.50 |
| Effective February 1, 2003 | \$40.00 | \$37.50 |
| Effective February 1, 2004 | \$42.00 | \$39.50 |
| Effective February 1, 2005 | \$43.00 | \$40.50 |

If the participant is an active participant at retirement, the accrued benefit paid to a married participant receiving a 50% joint and survivor annuity will be reduced 5%.

If the participant is an inactive participant at retirement, the accrued benefit paid to a married participant receiving a 50% joint and survivor annuity will be reduced by the optional form conversion factors shown in the "Conversion factors for optional forms of payment" section.

Pension benefits need to be reduced by the benefit payable under the Reynolds Metals Company Pension Plan prior to March 17, 1997 and the benefit payable under the Owens Corning merged retirement plan on May 22, 2003.

### Supplemental retirement benefit

#### Eligibility:

Richmond employees who have attained age 55 with 30 years of service.

#### Form:

Monthly annuity payable until age 62

#### Benefit:

Amount determined by subtracting the amount of the accrued benefit from the graded minimum monthly benefit shown below:

| <u>Wage grade</u> | <u>Graded Minimum<br/>Monthly Benefit</u> |
|-------------------|-------------------------------------------|
| 1 to 4            | \$1,070                                   |
| 5 to 8            | \$1,100                                   |
| 9 to 12           | \$1,130                                   |
| 13 to 16          | \$1,160                                   |
| 17 to 20          | \$1,190                                   |
| 21 to 24          | \$1,220                                   |
| 25 +              | \$1,250                                   |

The supplemental amount is reduced by \$1 for each \$2 that earned income after retirement is over \$10,000 per year.

### Disability benefit

The accrued benefit determined as of disability date, payable immediately.

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Eligibility for Benefits

|                              |                                                                                                                        |
|------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Normal retirement            | Retirement on NRD                                                                                                      |
| Early retirement             | Retirement before NRD and on or after both attaining age 60 and completing ten years of Vested Service                 |
| Postponed retirement         | Retirement after NRD                                                                                                   |
| Vested termination           | Termination after completing five years of eligibility service or attaining age 65                                     |
| Disability                   | Completion of ten years of eligibility service and determination that participant is totally and permanently disabled. |
| Preretirement spouse benefit | Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.     |

## Benefits Paid Upon the Following Events

|                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Normal retirement    | Normal retirement benefit payable immediately.                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Early retirement     | <u>Richmond Location</u><br><br>Accrued benefit on early retirement date reduced 6% each year in which the early retirement date precedes age 62. No reduction applies after attaining age 62.<br><br><u>Ashville Location</u><br><br>Accrued benefit on early retirement date reduced 6% each year in which the early retirement date precedes age 65. The special retirement benefit will not become payable for an inactive participant until the month following age 65 or 30 years of employment. |
| Postponed retirement | Greater of accrued benefit on normal retirement date actuarially increased to late retirement date or accrued benefit on late retirement date.                                                                                                                                                                                                                                                                                                                                                         |
| Vested termination   | Normal retirement payable unreduced at age 65, reduced as for early retirement if commencement of payments precedes NRD.                                                                                                                                                                                                                                                                                                                                                                               |

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

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### Death with preretirement spouse benefits

#### Benefit if active

Monthly annuity payable to spouse equal to 50% of the accrued benefit.

If the participant was at the Richmond Location and had attained age 55 with 30 years of service at the date of death, the spouse will also receive 50% of the Supplemental Retirement Benefit, payable until the participant would have attained age 62.

#### Benefit if inactive

Monthly annuity payable to spouse, deferred to attained age 60, equal to the amount that would have been paid had the participant terminated employment on the date of death and survived to his/her age 60, retired with a qualified joint and 50% survivor annuity in effect, then died the next day.

### Disability

#### Richmond Location

If the participant is less than attained age 62, accrued benefit on the date of disability (minimum \$400) plus a supplemental benefit of \$400 per month payable until attaining age 62 or Social Security Disability payments start.

#### Ashville Location

If the participant is not eligible for Social Security Disability payments, accrued benefit on the date of disability (minimum \$100) plus a supplemental benefit of \$100 per month payable until attaining age 62 or Social Security Disability payments start.

## Other Plan Provisions

### Forms of payment

For single employees, benefits will be paid in the form of a single life annuity. For married employees, benefits will be paid in the form of the 50% joint and survivor annuity.

### Optional Forms

- Life Annuity
- 50% Joint and Survivor annuity with pop-up
- 75% Joint and Survivor annuity

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

Conversion factors for optional forms of payment

The 50% joint and survivor with pop-up for active participants is equal to 95% of the life annuity.

The 50% joint and survivor for inactive participants is based on the following factors:

| Years that spouse is younger | Reduction | Years that spouse is older | Reduction |
|------------------------------|-----------|----------------------------|-----------|
| 20 or more                   | 23%       | 0 to 1                     | 13%       |
| 17 to 19                     | 22%       | 2 to 4                     | 11%       |
| 14 to 16                     | 21%       | 5 to 7                     | 10%       |
| 11 to 13                     | 19%       | 8 to 10                    | 8%        |
| 8 to 10                      | 18%       | 11 to 13                   | 7%        |
| 5 to 7                       | 16%       | 14 to 16                   | 5%        |
| 2 to 4                       | 15%       | 17 to 19                   | 4%        |
| 0 to 1                       | 13%       | 20 or more                 | 3%        |

The other optional forms use Applicable Interest rate and Mortality found in Code Section 417(e)(3).

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in dollar limits are assumed for pension cost, but not for determining contributions.

### Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

### Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

|                 |                                                |
|-----------------|------------------------------------------------|
| Plan Name:      | Aleris Retirement Plan for Bargained Employees |
| EIN / PN:       | 27-1539745/003                                 |
| Plan Sponsor:   | Novelis ALR Rolled Products, Inc.              |
| Valuation Date: | January 1, 2021                                |

# **SCHEDULE SB ATTACHMENTS**

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## **Schedule SB, Line 24 Change in Actuarial Assumptions**

The assumed plan-related expenses added to the target normal cost were changed from \$150,000 for 2020 to \$40,000 for 2021.

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 26 Schedule of Active Participant Data as of January 1, 2021

| Attained Age | Attained Years of Credited Service <sup>3</sup> |     |     |       |       |       |       |       |       |           | Total |
|--------------|-------------------------------------------------|-----|-----|-------|-------|-------|-------|-------|-------|-----------|-------|
|              | Under 1                                         | 1-4 | 5-9 | 10-14 | 15-19 | 20-24 | 25-29 | 30-34 | 35-39 | 40 & Over |       |
| Under 25     | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 25-29        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 30-34        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 35-39        | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| 40-44        | 0                                               | 0   | 2   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 2     |
| 45-49        | 0                                               | 0   | 3   | 2     | 0     | 0     | 0     | 0     | 0     | 0         | 5     |
| 50-54        | 0                                               | 0   | 2   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 2     |
| 55-59        | 0                                               | 0   | 3   | 2     | 2     | 2     | 0     | 0     | 0     | 0         | 9     |
| 60-64        | 0                                               | 0   | 0   | 2     | 0     | 2     | 0     | 1     | 0     | 0         | 5     |
| 65-69        | 0                                               | 0   | 1   | 0     | 0     | 0     | 0     | 0     | 2     | 0         | 3     |
| 70 & over    | 0                                               | 0   | 0   | 0     | 0     | 0     | 0     | 0     | 0     | 0         | 0     |
| Total        | 0                                               | 0   | 11  | 6     | 2     | 4     | 0     | 1     | 2     | 0         | 26    |

<sup>3</sup> Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Aleris Retirement Plan for Bargained Employees

EIN / PN: 27-1539745/003

Plan Sponsor: Novelis ALR Rolled Products, Inc.

Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

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## Schedule SB – Statement by Enrolled Actuary

|                          |                                                |
|--------------------------|------------------------------------------------|
| <b>Plan Sponsor</b>      | Novelis ALR Rolled Products, Inc.              |
| <b>EIN/PN</b>            | 27-1539745/003                                 |
| <b>Plan Name</b>         | Aleris Retirement Plan for Bargained Employees |
| <b>Valuation Date</b>    | January 1, 2021                                |
| <b>Enrolled Actuary</b>  | Rochelle Ramirez, ASA, EA                      |
| <b>Enrollment Number</b> | 20-08763                                       |

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2021

### Ashville

| x  | $q_x^r$ | $l_x$ | ${}_{x-55}P_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|----|---------|-------|----------------------------------|------------------------|----------------------------|
| 55 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 56 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 57 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 58 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 59 | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 60 | 0.15    | 1,000 | 1.000000                         | 0.150000               | 9.000000                   |
| 61 | 0.10    | 850   | 0.850000                         | 0.085000               | 5.185000                   |
| 62 | 0.25    | 765   | 0.765000                         | 0.191250               | 11.857500                  |
| 63 | 0.10    | 574   | 0.573750                         | 0.057375               | 3.614625                   |
| 64 | 0.10    | 516   | 0.516375                         | 0.051638               | 3.304800                   |
| 65 | 1.00    | 465   | 0.464738                         | 0.464738               | 30.207938                  |
| 66 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 67 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 68 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 69 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 70 | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |

Average age at retirement

63.169863

Plan Name: Aleris Retirement Plan for Bargained Employees  
 EIN / PN: 27-1539745/003  
 Plan Sponsor: Novelis ALR Rolled Products, Inc.  
 Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Richmond

| x                         | $q_x^r$ | $l_x$ | ${}_{x-55}p_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|---------------------------|---------|-------|----------------------------------|------------------------|----------------------------|
| 55                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 56                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 57                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 58                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 59                        | 0.00    | 1,000 | 1.000000                         | 0.000000               | 0.000000                   |
| 60                        | 0.15    | 1,000 | 1.000000                         | 0.150000               | 9.000000                   |
| 61                        | 0.10    | 850   | 0.850000                         | 0.085000               | 5.185000                   |
| 62                        | 0.40    | 765   | 0.765000                         | 0.306000               | 18.972000                  |
| 63                        | 0.10    | 459   | 0.459000                         | 0.045900               | 2.891700                   |
| 64                        | 0.10    | 413   | 0.413100                         | 0.041310               | 2.643840                   |
| 65                        | 1.00    | 372   | 0.371790                         | 0.371790               | 24.166350                  |
| 66                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 67                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 68                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 69                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| 70                        | 0.00    | 0     | 0.000000                         | 0.000000               | 0.000000                   |
| Average age at retirement |         |       |                                  |                        | 62.858890                  |

Plan Name: Aleris Retirement Plan for Bargained Employees  
 EIN / PN: 27-1539745/003  
 Plan Sponsor: Novelis ALR Rolled Products, Inc.  
 Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Employees with >= 30 years of service

| x  | $q_x^r$ | $l_x$ | $_{x-55}p_{55} = l_x / l_{55}$ | $q_x^r * l_x / l_{55}$ | $x * q_x^r * l_x / l_{55}$ |
|----|---------|-------|--------------------------------|------------------------|----------------------------|
| 55 | 0.05    | 1,000 | 1.000000                       | 0.050000               | 2.750000                   |
| 56 | 0.05    | 950   | 0.950000                       | 0.047500               | 2.660000                   |
| 57 | 0.05    | 903   | 0.902500                       | 0.045125               | 2.572125                   |
| 58 | 0.05    | 857   | 0.857375                       | 0.042869               | 2.486388                   |
| 59 | 0.05    | 815   | 0.814506                       | 0.040725               | 2.402793                   |
| 60 | 0.10    | 774   | 0.773781                       | 0.077378               | 4.642686                   |
| 61 | 0.10    | 696   | 0.696403                       | 0.069640               | 4.248057                   |
| 62 | 0.40    | 627   | 0.626763                       | 0.250705               | 15.543711                  |
| 63 | 0.10    | 376   | 0.376058                       | 0.037606               | 2.369162                   |
| 64 | 0.10    | 338   | 0.338452                       | 0.033845               | 2.166091                   |
| 65 | 1.00    | 305   | 0.304607                       | 0.304607               | 19.799429                  |
| 66 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 67 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 68 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 69 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |
| 70 | 0.00    | 0     | 0.000000                       | 0.000000               | 0.000000                   |

Average age at retirement

61.640444

## Weighted Average

| Group         | Number of EEs | Avg Ret Age | B x C   |
|---------------|---------------|-------------|---------|
| Ashville      | 14            | 63.17       | 884.38  |
| Richmond      | 5             | 62.86       | 314.29  |
| Emp >= 30 yrs | 7             | 61.64       | 431.48  |
| Total         | 26            |             | 1630.16 |

Average:

62.70

63

SCHB\_WARA

Plan Name: Aleris Retirement Plan for Bargained Employees  
 EIN / PN: 27-1539745/003  
 Plan Sponsor: Novelis ALR Rolled Products, Inc.  
 Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Schedule SB, Part V Summary of Plan Provisions

### Plan Provisions

|                   |                                                                                                                                                                                                                                                                                                               |
|-------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date    | Restated Plan: January 1, 2015. The most recent amendment reflected in the following plan provisions was effective April 1, 2018.                                                                                                                                                                             |
| Covered Employees | An individual employed by the Employer or any other employer require to be aggregated with the Employer.                                                                                                                                                                                                      |
| Participation     | Bargaining employees who have attained age 21 with four calendar quarters of service at the Richmond Plant 44 location whose date of employment occurred prior to September 1, 2001 or a bargaining employee of the Ashville Ohio Plant Location whose date of employment occurred prior to February 1, 2001. |

### Definitions

|                              |                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Eligibility service          | All service is measured in full and fractional years on the basis that 365 days equals one year from the employee's hire date (reduced by any period of Severance).                                                                                                                                                                                                                      |
| Benefit service              | <p>All service measured from the date of employment, expressed as the total number of calendar quarters in each of which the employee receives wages, disability benefits or workman's compensation.</p> <p>Credited Service was frozen effective January 1, 2008 for all participants with the exception of Ashville union participants who were frozen effective February 1, 2008.</p> |
| Normal retirement date (NRD) | <p>The first day of the month following or coincident with the earliest of :</p> <ul style="list-style-type: none"><li>▪ The later of 65 and 5 years of vesting service</li><li>▪ 30 years of vesting service</li></ul>                                                                                                                                                                  |

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
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Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Normal retirement benefit

### Richmond Location

The sum of the pension factors from the appropriate wage grades times the service earned while in the wage grade, less the amount payable from any prior plan. Participants who retire between August 1, 2004 and August 1, 2006 are eligible for all the benefit increases in the bargaining period.

| Pre-August 1, 2001<br>wage grade | Service prior to<br>August 1, 2001 | Service between<br>August 1, 2001 and<br>August 1, 2004 |
|----------------------------------|------------------------------------|---------------------------------------------------------|
| 1 to 4                           | \$33.25                            | \$39.25                                                 |
| 5 to 8                           | \$34.55                            | \$40.55                                                 |
| 9 to 12                          | \$35.90                            | \$41.90                                                 |
| 13 to 16                         | \$37.25                            | \$43.25                                                 |
| 17 to 20                         | \$38.55                            | \$44.55                                                 |
| 21 to 24                         | \$39.90                            | \$45.90                                                 |
| 25 +                             | \$41.25                            | \$47.25                                                 |

|               | <i>Service on and after August 1, 2004</i> |                                |                                |
|---------------|--------------------------------------------|--------------------------------|--------------------------------|
| Wage<br>Grade | Effective<br>August 1,<br>2004             | Effective<br>August 1,<br>2005 | Effective<br>August 1,<br>2006 |
| 1 to 4        | \$41.25                                    | \$43.25                        | \$45.25                        |
| 5 to 8        | \$42.55                                    | \$44.55                        | \$46.55                        |
| 9 to 12       | \$43.90                                    | \$45.90                        | \$47.90                        |
| 13 to 16      | \$45.25                                    | \$47.25                        | \$49.25                        |
| 17 to 20      | \$46.55                                    | \$48.55                        | \$50.55                        |
| 21 to 24      | \$47.90                                    | \$49.90                        | \$51.90                        |
| 25 +          | \$49.25                                    | \$51.25                        | \$53.25                        |

### Ashville Location

Pension factor determined by employment date times service, less the amount payable from any prior plan. Participants who retire between May 23, 2003 and February 1, 2006 are eligible for all the benefit increases in the bargaining period.

| Service                        | Employment<br>Prior to<br>March 1, 1984 | Employment<br>on and after<br>March 1, 1984 |
|--------------------------------|-----------------------------------------|---------------------------------------------|
| Prior to February 1, 1998      | \$21.00                                 | \$18.50                                     |
| On and after February 1, 1998: | \$24.00                                 | \$21.50                                     |
| Effective February 1, 1999     | \$28.00                                 | \$25.50                                     |
| Effective February 1, 2000     | \$32.00                                 | \$29.50                                     |

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 EIN / PN: 27-1539745/003  
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## SCHEDULE SB ATTACHMENTS

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|                            |         |         |
|----------------------------|---------|---------|
| Effective February 1, 2001 | \$35.00 | \$32.50 |
| Effective February 1, 2002 | \$38.00 | \$35.50 |
| Effective February 1, 2003 | \$40.00 | \$37.50 |
| Effective February 1, 2004 | \$42.00 | \$39.50 |
| Effective February 1, 2005 | \$43.00 | \$40.50 |

If the participant is an active participant at retirement, the accrued benefit paid to a married participant receiving a 50% joint and survivor annuity will be reduced 5%.

If the participant is an inactive participant at retirement, the accrued benefit paid to a married participant receiving a 50% joint and survivor annuity will be reduced by the optional form conversion factors shown in the "Conversion factors for optional forms of payment" section.

Pension benefits need to be reduced by the benefit payable under the Reynolds Metals Company Pension Plan prior to March 17, 1997 and the benefit payable under the Owens Corning merged retirement plan on May 22, 2003.

### Supplemental retirement benefit

#### Eligibility:

Richmond employees who have attained age 55 with 30 years of service.

#### Form:

Monthly annuity payable until age 62

#### Benefit:

Amount determined by subtracting the amount of the accrued benefit from the graded minimum monthly benefit shown below:

| <u>Wage grade</u> | <u>Graded Minimum<br/>Monthly Benefit</u> |
|-------------------|-------------------------------------------|
| 1 to 4            | \$1,070                                   |
| 5 to 8            | \$1,100                                   |
| 9 to 12           | \$1,130                                   |
| 13 to 16          | \$1,160                                   |
| 17 to 20          | \$1,190                                   |
| 21 to 24          | \$1,220                                   |
| 25 +              | \$1,250                                   |

The supplemental amount is reduced by \$1 for each \$2 that earned income after retirement is over \$10,000 per year.

### Disability benefit

The accrued benefit determined as of disability date, payable immediately.

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Valuation Date: January 1, 2021

# SCHEDULE SB ATTACHMENTS

## Eligibility for Benefits

|                              |                                                                                                                        |
|------------------------------|------------------------------------------------------------------------------------------------------------------------|
| Normal retirement            | Retirement on NRD                                                                                                      |
| Early retirement             | Retirement before NRD and on or after both attaining age 60 and completing ten years of Vested Service                 |
| Postponed retirement         | Retirement after NRD                                                                                                   |
| Vested termination           | Termination after completing five years of eligibility service or attaining age 65                                     |
| Disability                   | Completion of ten years of eligibility service and determination that participant is totally and permanently disabled. |
| Preretirement spouse benefit | Death while eligible for normal, early, postponed or deferred vested retirement benefits, with a surviving spouse.     |

## Benefits Paid Upon the Following Events

|                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Normal retirement    | Normal retirement benefit payable immediately.                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Early retirement     | <u>Richmond Location</u><br><br>Accrued benefit on early retirement date reduced 6% each year in which the early retirement date precedes age 62. No reduction applies after attaining age 62.<br><br><u>Ashville Location</u><br><br>Accrued benefit on early retirement date reduced 6% each year in which the early retirement date precedes age 65. The special retirement benefit will not become payable for an inactive participant until the month following age 65 or 30 years of employment. |
| Postponed retirement | Greater of accrued benefit on normal retirement date actuarially increased to late retirement date or accrued benefit on late retirement date.                                                                                                                                                                                                                                                                                                                                                         |
| Vested termination   | Normal retirement payable unreduced at age 65, reduced as for early retirement if commencement of payments precedes NRD.                                                                                                                                                                                                                                                                                                                                                                               |

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
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Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

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### Death with preretirement spouse benefits

#### Benefit if active

Monthly annuity payable to spouse equal to 50% of the accrued benefit.

If the participant was at the Richmond Location and had attained age 55 with 30 years of service at the date of death, the spouse will also receive 50% of the Supplemental Retirement Benefit, payable until the participant would have attained age 62.

#### Benefit if inactive

Monthly annuity payable to spouse, deferred to attained age 60, equal to the amount that would have been paid had the participant terminated employment on the date of death and survived to his/her age 60, retired with a qualified joint and 50% survivor annuity in effect, then died the next day.

### Disability

#### Richmond Location

If the participant is less than attained age 62, accrued benefit on the date of disability (minimum \$400) plus a supplemental benefit of \$400 per month payable until attaining age 62 or Social Security Disability payments start.

#### Ashville Location

If the participant is not eligible for Social Security Disability payments, accrued benefit on the date of disability (minimum \$100) plus a supplemental benefit of \$100 per month payable until attaining age 62 or Social Security Disability payments start.

## Other Plan Provisions

### Forms of payment

For single employees, benefits will be paid in the form of a single life annuity. For married employees, benefits will be paid in the form of the 50% joint and survivor annuity.

### Optional Forms

- Life Annuity
- 50% Joint and Survivor annuity with pop-up
- 75% Joint and Survivor annuity

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

## SCHEDULE SB ATTACHMENTS

Conversion factors for optional forms of payment

The 50% joint and survivor with pop-up for active participants is equal to 95% of the life annuity.

The 50% joint and survivor for inactive participants is based on the following factors:

| Years that spouse is younger | Reduction | Years that spouse is older | Reduction |
|------------------------------|-----------|----------------------------|-----------|
| 20 or more                   | 23%       | 0 to 1                     | 13%       |
| 17 to 19                     | 22%       | 2 to 4                     | 11%       |
| 14 to 16                     | 21%       | 5 to 7                     | 10%       |
| 11 to 13                     | 19%       | 8 to 10                    | 8%        |
| 8 to 10                      | 18%       | 11 to 13                   | 7%        |
| 5 to 7                       | 16%       | 14 to 16                   | 5%        |
| 2 to 4                       | 15%       | 17 to 19                   | 4%        |
| 0 to 1                       | 13%       | 20 or more                 | 3%        |

The other optional forms use Applicable Interest rate and Mortality found in Code Section 417(e)(3).

Maximum on benefits and pay

All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in dollar limits are assumed for pension cost, but not for determining contributions.

### Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

### Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

Plan Name: Aleris Retirement Plan for Bargained Employees  
EIN / PN: 27-1539745/003  
Plan Sponsor: Novelis ALR Rolled Products, Inc.  
Valuation Date: January 1, 2021

# ALERIS RETIREMENT PLAN FOR BARGAINED EMPLOYEES

**EIN 27-1539745**

**Plan Number - 003**

**December 31, 2021**

## SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

| (a) | (b)                                                               | (c)                                                                                                              | (d)                 | (e)                 |
|-----|-------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|---------------------|---------------------|
|     | Identity of Issuer, Borrower,<br>Lessor, or Similar Party         | Description of Investment<br>Including Maturity Date,<br>Rate of Interest, Collateral,<br>Par, or Maturity Value | Cost                | Current<br>Value    |
|     | <b>Interest-Bearing Cash:</b>                                     |                                                                                                                  |                     |                     |
| *   | Wells Fargo Bank Collateralized Instl<br>Bank Deposit             | 134,612 shares                                                                                                   | \$ 134,612          | \$ 134,612          |
|     | <b>Mutual Funds:</b>                                              |                                                                                                                  |                     |                     |
|     | Vesut Capital Multi-Manger Real Estate<br>Income fund LLC Class I | 5,416 shares                                                                                                     | 146,692             | 164,383             |
|     | <b>Collective Trust Funds :</b>                                   |                                                                                                                  |                     |                     |
|     | Mercer Act Lng Corp Inv Port #600                                 | 41,364 shares                                                                                                    | 905,464             | 900,086             |
|     | Mercer Emrg Markets Equity CT #425                                | 21,768 shares                                                                                                    | 334,513             | 317,598             |
|     | Mercer Global Low Vol Eq CT #345                                  | 14,063 shares                                                                                                    | 362,500             | 380,680             |
|     | Mercer Lng Dur Pass Fixed Inc CT #420                             | 22,329 shares                                                                                                    | 603,894             | 605,117             |
|     | Mercer Non-US Core Equity CT #330                                 | 18,393 shares                                                                                                    | 470,273             | 475,466             |
|     | Mercer US Large Cap Pass Eq CT #410                               | 22,378 shares                                                                                                    | 1,108,457           | 1,210,181           |
|     | Mercer US Small/Mid Cap Equity CT                                 | 5,506 shares                                                                                                     | 230,765             | 247,502             |
|     | <b>Limited Partnership Interests:</b>                             |                                                                                                                  |                     |                     |
|     | Neuberger Berman US Equity Index<br>Putwrite Fund LLC             | 500,000 shares                                                                                                   | 500,000             | 704,318             |
|     |                                                                   |                                                                                                                  | <u>\$ 4,797,170</u> | <u>\$ 5,139,943</u> |

\*Indicates a party-in-interest to the Plan, was defined by ERISA.

Note: The above data is based upon information that has been certified as complete and accurate by Principal, except for the Limited Partnership Interest fund.

# **SCHEDULE SB ATTACHMENTS**

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## **Schedule SB, Line 24 Change in Actuarial Assumptions**

The assumed plan-related expenses added to the target normal cost were changed from \$150,000 for 2020 to \$40,000 for 2021.

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