

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>	
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		
1a Name of plan <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶	<u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>MARITZ HOLDINGS INC.</u> <u>TAX DEPARTMENT</u> <u>1375 NORTH HIGHWAY DRIVE</u> <u>FENTON, MO 63099</u>		
1c Effective date of plan <u>03/01/1966</u>		
2b Employer Identification Number (EIN) <u>43-0393480</u>		
2c Plan Sponsor's telephone number <u>636-827-1493</u>		
2d Business code (see instructions) <u>551112</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.

SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	STEVE GALLANT
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/16/2023	RICHARD RAMOS
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☐ Same as Plan Sponsor MARITZ HOLDINGS INC RICHARD RAMOS 1375 NORTH HIGHWAY DRIVE FENTON, MO 63099		3b Administrator's EIN 40-0393480
		3c Administrator's telephone number 636-827-1493
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 1866
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year		6a(1) 476
a(2) Total number of active participants at the end of the plan year		6a(2) 449
b Retired or separated participants receiving benefits		6b 452
c Other retired or separated participants entitled to future benefits.....		6c 783
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 1684
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 106
f Total. Add lines 6d and 6e		6f 1790
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 1A 1C 1I		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☒ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>MARITZ HOLDINGS INC.</u>	D Employer Identification Number (EIN) <u>43-0393480</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2022</u>	
2 Assets:	
a Market value.....	2a <u>93177132</u>
b Actuarial value	2b <u>89322160</u>
3 Funding target/participant count breakdown	(1) Number of participants (2) Vested Funding Target (3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>545</u> <u>56077052</u> <u>56077052</u>
b For terminated vested participants.....	<u>847</u> <u>19307819</u> <u>19307819</u>
c For active participants.....	<u>476</u> <u>15280757</u> <u>15280757</u>
d Total	<u>1868</u> <u>90665628</u> <u>90665628</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions.....	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate.....	5 <u>5.20</u> %
6 Target normal cost	
a Present value of current plan year accruals.....	6a <u>0</u>
b Expected plan-related expenses	6b <u>925000</u>
c Total (line 6a + line 6b)	6c <u>925000</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.

SIGN HERE		<u>07/12/2023</u>
Signature of actuary		Date
<u>JASON R. BENBOW</u>		<u>23-07392</u>
Type or print name of actuary		Most recent enrollment number
<u>WILLIS TOWERS WATSON US LLC</u>		<u>314-719-5900</u>
Firm name		Telephone number (including area code)
<u>WILLIS TOWERS WATSON US LLC</u> <u>7733 FORSYTH BOULEVARD SUITE 1350</u> <u>ST. LOUIS, MO 63105</u>		
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) 2022
v. 220413

Part II Beginning of Year Carryover and Prefunding Balances		
	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	0	6072018
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	2170539
9 Amount remaining (line 7 minus line 8)	0	3901479
10 Interest on line 9 using prior year's actual return of <u>9.57</u> %	0	373372
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year).....		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.37</u> %.....		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance.....		0
d Portion of (c) to be added to prefunding balance.....		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12).....	0	4274851

Part III Funding Percentages		
14 Funding target attainment percentage	14	93.80 %
15 Adjusted funding target attainment percentage	15	94.45 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement.....	16	90.00 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ►	18(b)	18(c)

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a Contributions allocated toward unpaid minimum required contributions from prior years.....	19a	0
b Contributions made to avoid restrictions adjusted to valuation date.	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	0
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?..... ☒ Yes ☐ No		
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No		
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
		(4) 4th
		0

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

21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.18 %	3rd segment: 5.92 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 62
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.		☐ Yes ☒ No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.		☒ Yes ☐ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...		☒ Yes ☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment		27

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....		31a	925000
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		5618319	619269
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	1544269
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....		1544269	1544269
36 Additional cash requirement (line 34 minus line 35)		36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37	0
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)		39	0
40 Unpaid minimum required contributions for all years.....		40	0

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☒ 2020 ☐ 2021
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<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan MARITZ HOLDINGS INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 MARITZ HOLDINGS INC.	D Employer Identification Number (EIN) 43-0393480	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

SEQUOIA FINACIAL GROUP, LLC

3500 EMBASSY PKWY
SUITE 100
AKRON, OH 44333

34-1913858

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	150806	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PARAMETRIC PORTFOLIO ASSOCIATES

20-0292745

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	71765	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 50	NONE	47571	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

PENSION BENEFIT INFORMATION LLC

94-2856521

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 65	NONE	12709	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SUN LIFE INVESTMENT MANAGEMENT

68-0635051

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	37704	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TOWERS WATSON DELEWARE INC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50 65	NONE	25000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

LAZARD ASSET MANAGEMENT LLC

05-0530199

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	18172	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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)
a Name:	ARMANINO,LLP
b EIN:	94-6214841
c Position:	ACCOUNTANT
d Address:	12657 ALCOSTA BLVD SUITE 500 SAN RAMON, CA 94583
e Telephone:	925-790-2600

Explanation: A DECISION WAS MADE TO CONSOLIDATE TO ONE AUDITOR FOR FINANCIAL STATEMENTS AND 401 K AUDITS

a Name:	
b EIN:	
c Position:	
d Address:	
e Telephone:	

Explanation:

a Name:	
b EIN:	
c Position:	
d Address:	
e Telephone:	

Explanation:

a Name:	
b EIN:	
c Position:	
d Address:	
e Telephone:	

Explanation:

a Name:	
b EIN:	
c Position:	
d Address:	
e Telephone:	

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
	For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	

A Name of plan MARITZ HOLDINGS INC. RETIREMENT PLAN		B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 MARITZ HOLDINGS INC.		D Employer Identification Number (EIN) 43-0393480	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)		
a Name of MTIA, CCT, PSA, or 103-12 IE: THE BANK OF NEW YORK MELLON			
b Name of sponsor of entity listed in (a): BANK OF NEW YORK MELLON			
c EIN-PN 25-6078093-023	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2318574	
a Name of MTIA, CCT, PSA, or 103-12 IE: BNY MELLON CASH RESERVE			
b Name of sponsor of entity listed in (a): BANK OF NEW YORK MELLON			
c EIN-PN 25-6078093-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MARITZ HOLDINGS INC.</u>	D Employer Identification Number (EIN) <u>43-0393480</u>	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	0	
(2) Participant contributions.....	1b(2)		
(3) Other.....	1b(3)	1714383	3389197
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		10458
(2) U.S. Government securities	1c(2)	2801373	1583777
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	18272935	14970860
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	5172978	2735203
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	2948418	2318574
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	41748667	30530880
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other	1c(15)	21678638	20366545

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	94337392	75905494

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i	569523	0
j Other liabilities	1j		9280
k Total liabilities (add all amounts in lines 1g through 1j)	1k	569523	9280

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	93767869	75896214
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	0	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	349	
(B) U.S. Government securities	2b(1)(B)	14819	
(C) Corporate debt instruments	2b(1)(C)	613982	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		629150
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	40081	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	684360	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		724441
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	9822031	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	7027981	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		2794050
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-5424059	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-5424059

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		33205
(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)		-7605331
c Other income	2c		7131
d Total income. Add all income amounts in column (b) and enter total	2d		-8841413
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7739492	
(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)		7739492
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)	25000	
(2) Contract administrator fees	2i(2)	60280	
(3) Investment advisory and management fees	2i(3)	278446	
(4) Other	2i(4)	927024	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1290750
j Total expenses. Add all expense amounts in column (b) and enter total	2j		9030242
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-17871655
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: **FORVIS LLP**

(2) EIN: **44-0160260**

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 Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 477481.

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration 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>2022</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan MARITZ HOLDINGS INC. RETIREMENT PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 MARITZ HOLDINGS INC.		D Employer Identification Number (EIN) 43-0393480
Part I Distributions		
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 25-1926855 25-1871448		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3 57
Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)		
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III Amendments		
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.		
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14	Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
	a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....	14a	
	b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
	c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
	a The corresponding number for the plan year immediately preceding the current plan year.....	15a	
	b The corresponding number for the second preceding plan year.....	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
	a Enter the number of employers who withdrew during the preceding plan year	16a	
	b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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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	<p>If the total number of participants is 1,000 or more, complete lines (a) through (c)</p> <p>a Enter the percentage of plan assets held as: Stock: <u>43.2</u> % Investment-Grade Debt: <u>24.3</u> % High-Yield Debt: _____ % Real Estate: _____ % Other: <u>32.4</u> %</p> <p>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</p> <p>c What duration measure was used to calculate line 19(b)? ☐ Effective duration ☐ Macaulay duration ☒ Modified duration ☐ Other (specify): _____</p>
20	<p>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.</p> <p>a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☒ No</p> <p>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:</p> <p>☐ Yes.</p> <p>☐ 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.</p> <p>☐ 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.</p> <p>☐ No. Other. Provide explanation _____</p>

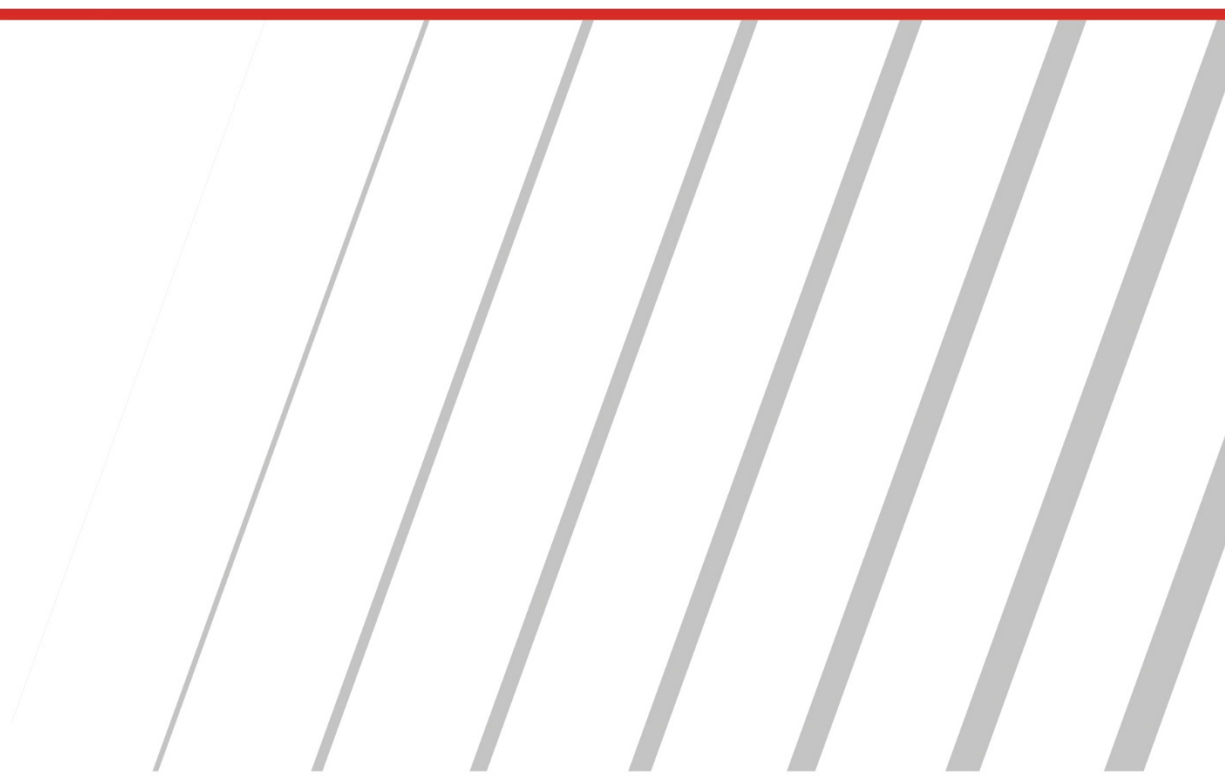


Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

Independent Auditor's Report and Financial Statements

December 31, 2022 and 2021



Maritz Holdings, Inc. Retirement Plan

December 31, 2022 and 2021

Contents

Independent Auditor's Report.....	1
--	----------

Financial Statements

Statements of Net Assets Available for Benefits.....	5
Statements of Changes in Net Assets Available for Benefits.....	6
Notes to Financial Statements	7

Supplemental Schedules

Schedule H, Line 4i – Schedule of Assets (Held at End of Year).....	18
Schedule H, Line 4j – Schedule of Reportable Transactions	23

Independent Auditor's Report

Plan Administrator and Benefits Committee
Maritz Holdings, Inc. Retirement Plan
Fenton, Missouri

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2022 Financial Statements

We have performed an audit of the financial statements of Maritz Holdings, Inc. Retirement Plan (Plan), an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974* (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2022, 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 (2022 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2022 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our 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, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of December 31, 2022, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion on the 2022 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 2022 Financial Statements section:

- The amounts and disclosures in the accompanying 2022 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.
- The information in the accompanying 2022 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 2022 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 2022 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 audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2022 Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern within one year after the date that these 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 2022 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 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 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Other Matters

2022 Supplemental Schedules Required by ERISA

The supplemental schedules listed in the table of contents 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 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including its 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 2021 Financial Statements

Predecessor auditors performed an audit of the 2021 financial statements of the Plan. 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, the prior year audit did not extend to any statements or information related to assets held for investment of the plan that were certified by a qualified institution. Their report dated October 13, 2022 indicated that (a) the amounts and disclosures in the 2021 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 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). Their report also indicated that the form and content of the 2021 supplemental schedules, other than the information in the 2021 supplemental schedule that agreed to or is derived from the certified investment information, were presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2021 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 determines meets the requirements of ERISA Section 103(a)(3)(C).

FORVIS, LLP

St. Louis, Missouri
October 13, 2023

Federal Employer Identification Number: 44-0160260

Maritz Holdings, Inc. Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2022 and 2021

	<u>2022</u>	<u>2021</u>
Assets		
Cash	\$ 10,458	\$ 10,445
Investments, at Fair Value	72,505,839	92,612,564
Receivables:		
Accrued interest and dividends	162,589	159,526
Pending trade receivables	2,726,144	964,119
Prepaid Benefit Payments	<u>500,464</u>	<u>590,738</u>
Total assets	<u>75,905,494</u>	<u>94,337,392</u>
Liabilities		
Other Liabilities	<u>9,280</u>	<u>569,523</u>
Net Assets Available for Benefits	<u><u>\$ 75,896,214</u></u>	<u><u>\$ 93,767,869</u></u>

Maritz Holdings, Inc. Retirement Plan
Statements of Changes in Net Assets Available for Benefits
December 31, 2022 and 2021

	2022	2021
Investment Income (Loss)		
Net appreciation (depreciation) in fair value of investments	\$ (10,228,209)	\$ 7,767,356
Interest and dividends	<u>1,386,796</u>	<u>1,748,012</u>
	<u>(8,841,413)</u>	<u>9,515,368</u>
Employer Contributions	<u>-</u>	<u>660</u>
Total additions, net	<u>(8,841,413)</u>	<u>9,516,028</u>
Deductions		
Benefits paid to participants	7,739,492	11,644,399
Payment to insurance carriers for annuities sold	-	10,656,000
Administrative expenses	<u>1,290,750</u>	<u>1,016,066</u>
Total deductions	<u>9,030,242</u>	<u>23,316,465</u>
Net Decrease	(17,871,655)	(13,800,437)
Net Assets Available for Benefits, Beginning of Year	<u>93,767,869</u>	<u>107,568,306</u>
Net Assets Available for Benefits, End of Year	<u><u>\$ 75,896,214</u></u>	<u><u>\$ 93,767,869</u></u>

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 1: Description of the Plan

The following description of Maritz Holdings, Inc. Retirement Plan (Plan) provides only general information. Additional information about the vesting and benefit provisions and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in the Plan Document, which is available from the Plan Administrator.

General

The Plan is a noncontributory defined benefit plan covering eligible employees of Maritz Holdings, Inc. and its domestic subsidiaries (the "Company") and provides for retirement, death and disability benefits. The Plan is subject to the provisions of the *Employee Retirement Income Security Act of 1974* (ERISA). The Bank of New York Mellon / BNY Mellon, N.A. is the trustee of the Plan.

Employees are a participant in the Plan if they participated in the prior retirement plan and were an active employee on January 1, 1996. Otherwise, employees are eligible after completing 1,000 hours in the first 12 months of employment, if attained by April 30, 2007.

The Plan is administered by the Company's Benefits Committee (Committee), which is a committee of the board of directors of the Company. The Committee has overall responsibility for the operation and administration of the Plan. The Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan's Board of Trustees.

Contributions

The Company has agreed to voluntarily contribute such amounts that are necessary to provide assets sufficient to meet the benefits to be paid to Plan members. The Company's present intention is to make contributions in amounts sufficient to annually fund the Plan's current service cost and the initial past-service costs plus interest on them over a period of 25 years. The Plan has met the minimum funding requirements established by ERISA.

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Pension Benefits

Effective May 1, 2007, the Plan was amended to freeze benefit accruals previously earned under the cash balance formula. Each employee's existing cash balance under the Plan will continue to earn interest at a variable annual rate. At retirement, employees may elect to receive their pension benefit as a lump sum or as an annuity.

Effective March 1, 2016, the Plan was amended so that if a participant's retirement income has a present value that exceeds \$1,000 but does not exceed \$5,000, and the participant does not consent to a distribution after receipt of notice, the present value of such benefit shall be rolled over to an

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Individual Retirement Account established on behalf of the participant, and if the present value does not exceed \$1,000, the present value of such benefit shall be distributed in one lump sum payment to the participant.

Effective December 7, 2021, participation ceased for certain participants whose benefit and assets to fund such liability had been transferred to an insurance company pursuant to the provisions of a group annuity contract.

The Plan is a cash balance plan where benefits are expressed as an account balance that grows with interest each year. Interest is equal to the lesser of the average yield on one-year treasuries or the average yield on 30 year treasuries for the month of October of the previous Plan year (with a maximum of 8% and a minimum of 4%).

Benefits under the Plan are based on employees' compensation during their years of service. Normal retirement age for plan benefits is 65. Participants may elect to receive reduced benefits upon early retirement at age 55. Accrued benefits are payable as an annuity over the participant's lifetime or as a qualified joint and one half-survivor annuity. Participants may elect to receive the portion of the accrued benefits attributable to the participant's contributions in the form of a lump-sum payment.

Death Benefits

If a participant has satisfied the requirements for a vested benefit and dies prior to the termination of employment and before commencement of benefits, the designated beneficiary may elect either a lump sum death benefit or to receive payment in the form of an annuity.

Vesting

Participants who leave the Company are entitled to receive his or her vested accrued benefit. Eligible employees are fully vested upon completion of three years of vesting service.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates

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

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Investment Valuation and Income Recognition

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. Mutual funds, exchange-traded funds, common stocks, and U.S. government securities are valued at the closing price reported on the active market on which the individual securities are traded. Corporate bonds are valued on the basis of yields currently available on comparable securities of issuers with similar credit ratings.

The Plan's interest in the common collective trust fund, private equity limited partnership and hedge funds are valued at the net asset value (NAV) of shares held by the Plan at year end.

The Plan's Benefits Committee determines the Plan's valuation policies utilizing information provided by its investment advisers, custodians and insurance companies. See Note 5 for a discussion of fair value measurements.

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. Net appreciation (depreciation) in the fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefit payments to participants are recorded upon distribution, except for prepaid benefit payments.

Administrative Expenses

Administrative expenses may be paid by the Company or the Plan, at the Company's discretion.

Accumulated Plan Benefits

Accumulated plan benefits, see Note 6, are those estimated future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries.

Benefits under the Plan are based on employees' average compensation during their years of service. Benefits payable under all circumstances—retirement, death, and termination of employment—are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Pending Trade Receivables

Pending trade receivables represents pending trades at year-end that have not been settled. The Plan records these trades as an asset until the transaction is settled and the resulting cash proceeds will be used to fund benefit payments.

Prepaid Benefit Payments

Prepaid benefit payments represent January 2023 annuity payments paid prior to year-end. The Plan records these payments as an asset at year-end, until the subsequent month when the distribution is recorded.

Reclassifications

Certain reclassifications have been made to the 2021 financial statements to conform to the 2022 financial statement presentation. These reclassifications had no effect on changes in net assets available for benefits.

Note 3: Plan Termination

Although it has not expressed any intention in the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- a. Annuity benefits 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
- b. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. government agency) up to the applicable limitations discussed below
- c. All other vested benefits (that is, vested benefits not insured by the PBGC)
- d. 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 benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

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 the level of benefits guaranteed by the PBGC.

Note 4: Certification of Plan Trustee

The Plan Administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, The Bank of New York Mellon / BNY Mellon, N.A., a qualified institution, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate:

- Investments as shown in the Statements of Net Assets Available for Benefits as of December 31, 2022 and 2021.
- Investment income (loss) as shown in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2022 and 2021.
- Investment information included in the accompanying Schedule of Assets (Held at End of Year) as of December 31, 2022 and the accompanying Schedule of Reportable Transactions for the year ended December 31, 2022.

The Plan's independent auditors did not perform auditing procedures with respect to this certified information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedules.

Note 5: Disclosures About Fair Value of Plan Assets and Liabilities

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. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. The hierarchy comprises three levels of inputs that may be used to measure fair value:

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

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

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

Recurring Measurements

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2022 and 2021:

		2022		
		Fair Value Measurements Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Fair Value			
Government agency obligation	\$ 1,583,777	\$ 1,462,290	\$ 121,487	\$ -
Corporate debt instruments	14,970,860	-	14,970,860	-
Common stocks	2,735,203	2,735,203	-	-
Exchange-traded fund	16,615,495	16,615,495	-	-
Mutual funds	13,915,385	13,915,385	-	-
Total assets in the fair value hierarchy	49,820,720	\$ 34,728,373	\$ 15,092,347	\$ -
Investments measured at net asset value ^(A)	22,685,119			
	\$ 72,505,839			

Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2022 and 2021

	2021			
	Fair Value Measurements Using			
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Fair Value			
Government agency obligation	\$ 2,801,373	\$ 2,644,491	\$ 156,882	\$ -
Corporate debt instruments	18,272,935	-	18,272,935	-
Common stocks	5,172,978	5,172,978	-	-
Exchange-traded fund	21,521,346	21,521,346	-	-
Mutual funds	20,227,321	20,227,321	-	-
Total assets in the fair value hierarchy	67,995,953	\$ 49,566,136	\$ 18,429,817	\$ -
Investments measured at net asset value ^(A)	24,616,611			
	<u>\$ 92,612,564</u>			

(A) 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 statement of net assets available for benefits.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended December 31, 2022 and 2021. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Investments

Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities with similar characteristics or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities, prepayments, defaults, cumulative loss projections and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. The plan has no Level 3 investments.

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2022 and 2021. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

2022				
	Fair Value	Unfunded Commitments	Redemption Frequency (If Currently Eligible)	Redemption Notice Period
Equity Long/Short Hedge Fund ^(A)	\$ 825,879	N/A	Semi-Annually	105 Days
Common Collective Trust Funds ^(B)	2,318,574	N/A	Daily	7 Days
Multi-Strategy Hedge Funds ^(C)	18,131,374	N/A	Quarterly	90 Days
Private Equity Fund ^(D)	1,409,292	N/A	N/A	N/A
	<u>\$ 22,685,119</u>			
2021				
	Fair Value	Unfunded Commitments	Redemption Frequency (If Currently Eligible)	Redemption Notice Period
Equity Long/Short Hedge Fund ^(A)	\$ 2,007,106	N/A	Semi-Annually	105 Days
Common Collective Trust Funds ^(B)	2,937,973	N/A	Daily	7 Days
Multi-Strategy Hedge Funds ^(C)	18,262,240	N/A	Quarterly	90 Days
Private Equity Fund ^(D)	1,409,292	N/A	N/A	N/A
	<u>\$ 24,616,611</u>			

- (A) This category includes investments in hedge funds that take both long and short positions, primarily in U.S. common stocks. Management of the funds has the ability to shift investments among differing investment strategies. The funds aim to provide investors with immediate exposure to long and short positions to further diversify the portfolio of investments.
- (B) This category includes collective trust funds that invest in investments that pursue multiple strategies to exceed the performance of certain industrial averages or to provide targeted returns.

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

- (C) This category includes membership interests in registered private investment funds which are “non-traditional” or “alternative” investment strategies seeking to achieve consistent, non-correlated returns with reduced volatility. Management of the funds focus on investments in select, targeted markets. The funds aim to provide investors with immediate exposure to a large, diverse portfolio of quality investments.
- (D) This category includes a private equity fund that has the sole purpose to purchase an interest in Chime Financial, Inc. Investments primarily consist of private preferred stock investments, with the transaction price being the best estimate of fair value at inception. The Fund generally uses the market approach to value investments in private operating companies.

Note 6: Accumulated Plan Benefits

An actuary from Willis Towers Watson LLC determines the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

The accumulated plan benefit information as of the beginning of the plan year was as follows:

Actuarial Present Value of Accumulated Plan Benefits

Vested benefits	
Retired participants receiving payments	\$ 61,665,849
Other participants	<u>38,083,698</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 99,749,547</u></u>

Changes in the actuarial present value of accumulated plan benefits were as follows:

Actuarial present value of accumulated plan benefits, beginning of year	<u>\$ 125,614,593</u>
Increase (decrease) during the year attributable to	
Change in actuarial assumptions	(7,116,608)
Increase for interest due to the decrease in the discount period	3,370,397
Actuarial loss	181,564
Annuity purchase	(10,656,000)
Benefits paid	<u>(11,644,399)</u>
Net decrease	<u>(25,865,046)</u>
Actuarial present value of accumulated plan benefits, end of year	<u><u>\$ 99,749,547</u></u>

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 5.20%
- Discount rate for benefit plans: 3.71%
- Mortality basis: Pri-2012 with MP 2019 scale adjustments
- Retirement: Rates varying by age, average age 62
- Asset valuation: Market

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 plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2022. Had the valuations been performed as of December 31, there would be no material differences.

Note 7: Related-Party and Party-in-Interest Transactions

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

The Bank of New York Mellon / BNY Mellon, N.A. is the trustee as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. The Company directly pays any other fees related to the Plan's operations.

The Company provides certain administrative services at no cost to the Plan.

Note 8: Tax Status

The Plan has received a determination letter from the Internal Revenue Service dated July 28, 2016, stating that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code and therefore not subject to tax. The Plan Administrator believes that the Plan and related trust are currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Maritz Holdings, Inc. Retirement Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 9: Risks and Uncertainties

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

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

Note 10: Subsequent Events

Subsequent events have been evaluated through October 13, 2023, which is the date the financial statements were available to be issued.

Supplemental Schedules

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) December 31, 2022

Issuer and Description of Investment	Shares/Units	Current Value
Mutual Funds		
KOPERNIK GLOBAL ALL-CAP-INST	138,817 shares	\$ 1,549,198
VANGUARD TOT INT ST IDX-INST	110,987 shares	12,366,187
		13,915,385
Exchange Traded Funds		
COLUMBIA EMERGING MARKETS CO	72,523 shares	1,429,428
ISHARES CORE S&P 500 ETF	35,883 shares	13,786,607
ISHARES CORE MSCI EMERGING	29,967 shares	1,399,460
		16,615,495
Government Agency Obligations		
CALIFORNIA ST	100,000 shares	121,487
U S TREASURY NOTE	105,000 shares	99,126
U S TREASURY NOTE	300,000 shares	298,593
U S TREASURY NOTE	255,000 shares	261,176
U S TREASURY BD CPN STRIP	370,000 shares	152,362
U S TREASURY BD CPN STRIP	385,000 shares	151,582
U S TREASURY BD CPN STRIP	250,000 shares	94,905
U S TREASURY BD CPN STRIP	250,000 shares	91,195
U S TREASURY BD CPN STRIP	220,000 shares	78,390
U S TREASURY BD CPN STRIP	210,000 shares	72,223
U S TREASURY BD CPN STRIP	150,000 shares	49,106
U S TREASURY BD CPN STRIP	350,000 shares	113,632
		1,583,777
Corporate Debt Instruments		
AT&T INC	90,000 shares	85,933
ABBVIE INC	105,000 shares	95,049
AERCAP IRELAND CAPITAL DAC / A	105,000 shares	96,890
ALABAMA POWER CO	95,000 shares	79,316
ALIBABA GROUP HOLDING LTD	185,000 shares	178,910
ALLSTATE CORP/THE	95,000 shares	79,132
AMAZON.COM INC	190,000 shares	121,157
AMEREN ILLINOIS CO	175,000 shares	139,568
AMERICAN EXPRESS CO	85,000 shares	88,398
AMERICAN TOWER CORP	185,000 shares	167,941
ANHEUSER-BUSCH INBEV WORLDWIDE	95,000 shares	93,990
ELEVANCE HEALTH INC	185,000 shares	174,855
APPLE INC	175,000 shares	161,777
AVIATION CAPITAL GROUP LL 144A	150,000 shares	148,779
BMO 2022-C2 MORTGAGE TRU C2 AS	90,000 shares	84,058
BAKER HUGHES HOLDINGS LLC / BA	55,000 shares	49,365
BANCO SANTANDER SA	170,000 shares	169,091
BANK OF AMERICA CORP	250,000 shares	210,810
BANK OF NOVA SCOTIA/THE	75,000 shares	60,538
BARCLAYS PLC	210,000 shares	199,954

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year), Continued December 31, 2022

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
TRUIST BANK	175,000 shares	\$ 163,732
BELROSE FUNDING TRUST 144A	85,000 shares	64,565
BENCHMARK 2020-IG2 IG2 B 144A	140,000 shares	89,009
BENCHMARK 2020-I IG3 T33B 144A	100,000 shares	72,001
BERKSHIRE HATHAWAY ENERGY CO	150,000 shares	147,245
BLACKSTONE PRIVATE CREDIT FUND	85,000 shares	70,451
BNP PARIBAS SA 144A	140,000 shares	115,175
BOSTON GAS CO 144A	175,000 shares	150,462
BP CAPITAL MARKETS AMERICA INC	120,000 shares	113,886
BP CAPITAL MARKETS AMERICA INC	60,000 shares	50,442
BROOKFIELD FINANCE INC	125,000 shares	123,099
BURLINGTON NORTHERN SANTA FE L	135,000 shares	132,558
CF HIPPOLYTA ISSUER 1A A1 144A	95,142 shares	82,379
CIGNA GROUP/THE	70,000 shares	58,762
CVS HEALTH CORP	180,000 shares	168,340
CAMERON LNG LLC 144A	65,000 shares	55,019
CAPITAL ONE FINANCIAL CORP	325,000 shares	321,038
CAPITAL ONE FINANCIAL CORP	45,000 shares	43,578
CENTERPOINT ENERGY RESOURCES C	65,000 shares	51,408
CISCO SYSTEMS INC	80,000 shares	83,886
CITIGROUP INC	110,000 shares	90,476
COMCAST CORP	260,000 shares	245,388
COMCAST CORP	65,000 shares	47,826
COMCAST CORP	105,000 shares	95,538
COMMONWEALTH EDISON CO	65,000 shares	53,114
COMMONWEALTH EDISON CO	65,000 shares	50,881
CONAGRA BRANDS INC	70,000 shares	58,402
CONSOLIDATED EDISON CO OF NEW	95,000 shares	81,982
CONSUMERS ENERGY CO	110,000 shares	79,743
CORPORATE OFFICE PROPERTIES LP	50,000 shares	38,441
DTE ELECTRIC CO	145,000 shares	99,147
WALT DISNEY CO/THE	70,000 shares	58,851
DRIVE AUTO RECEIVABLES TRU 2 C	180,000 shares	173,216
ELECTRICITE DE FRANCE SA 144A	105,000 shares	84,874
EMERSON ELECTRIC CO	60,000 shares	48,753
ENEL FINANCE INTERNATIONAL 144A	105,000 shares	92,217
EXETER AUTOMOBILE RECEIVABLES 3A C	185,000 shares	175,485
FREMF 2016-K53 MORT K53 C 144A	110,000 shares	102,623
FREMF 2016-K60 MORT K60 C 144A	90,000 shares	81,533
FINANCE AMER STRUCTURED SECS	100,000 shares	90,576
FLORIDA POWER & LIGHT CO	145,000 shares	145,447
FLORIDA POWER & LIGHT CO	100,000 shares	85,201
GS MORTGAGE SECURITIES GC22 B	90,000 shares	84,804
GENERAL DYNAMICS CORP	75,000 shares	68,823

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
GENERAL MOTORS FINANCIAL CO IN	110,000 shares	\$ 101,883
GILEAD SCIENCES INC	145,000 shares	128,396
GOLDMAN SACHS GROUP INC/THE	200,000 shares	152,580
HSBC HOLDINGS PLC	165,000 shares	158,737
HOME DEPOT INC/THE	130,000 shares	118,700
INTEL CORP	125,000 shares	94,396
INTERCONTINENTAL EXCHANGE INC	105,000 shares	73,489
JPMDB COMMERCIAL MORTGAG C5 AS	190,000 shares	173,367
JPMDB COMMERCIAL MORTGAG C28 B	55,000 shares	50,431
JPMORGAN CHASE & CO	305,000 shares	254,370
JOHNSON & JOHNSON	110,000 shares	108,369
JOHNSON & JOHNSON	75,000 shares	51,972
KIMBERLY-CLARK CORP	155,000 shares	127,718
KIMCO REALTY OP LLC	145,000 shares	133,181
KINDER MORGAN ENERGY PARTNERS	205,000 shares	201,620
LLOYDS BANKING GROUP PLC	205,000 shares	203,602
LOEWS CORP	175,000 shares	169,115
LOWE'S COS INC	90,000 shares	86,483
MANUFACTURERS & TRADERS TRUST	185,000 shares	168,851
MANULIFE FINANCIAL CORP	95,000 shares	86,620
MASTERCARD INC	150,000 shares	122,457
MEDTRONIC INC	115,000 shares	109,114
MICROSOFT CORP	85,000 shares	60,717
MILL CITY MORTGAGE L 2 M3 144A	85,000 shares	74,197
MITSUBISHI UFJ FINANCIAL GROUP	180,000 shares	168,583
NATIONAL RURAL UTILITIES COOPE	335,000 shares	315,389
NATIONAL RURAL UTILITIES COOPE	50,000 shares	46,156
NATWEST GROUP PLC	60,000 shares	52,015
NEW RESIDENTIAL MOR 2A B3 144A	78,217 shares	72,774
NEW RESIDENTIAL M RPL3 M1 144A	110,000 shares	90,768
NEW YORK LIFE INSURANCE C 144A	110,000 shares	84,767
NORTHROP GRUMMAN CORP	75,000 shares	69,290
O'REILLY AUTOMOTIVE INC	100,000 shares	77,829
OMNICOM GROUP INC	105,000 shares	86,205
ONCOR ELECTRIC DELIVERY CO LLC	175,000 shares	141,754
ORACLE CORP	150,000 shares	156,179
PNC BANK NA	170,000 shares	160,194
PACIFICORP	35,000 shares	37,436
PFIZER INC	143,000 shares	124,732
PROLOGIS LP	105,000 shares	79,858
PRUDENTIAL FINANCIAL INC	100,000 shares	74,913
PUBLIC SERVICE ELECTRIC AND GA	150,000 shares	126,248
PUBLIC SERVICE ELECTRIC AND GA	55,000 shares	50,005
QUALCOMM INC	50,000 shares	52,088
SANTANDER DRIVE AUTO RECEI 3 C	175,000 shares	169,572
SANTANDER DRIVE AUTO RECEI 4 C	90,000 shares	86,207
SIMON PROPERTY GROUP LP	185,000 shares	172,655
SIMON PROPERTY GROUP LP	125,000 shares	91,443
SOUTHWESTERN PUBLIC SERVICE CO	160,000 shares	140,179
SOUTHWESTERN PUBLIC SERVICE CO	45,000 shares	38,032

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
SPECTRA ENERGY PARTNERS LP	170,000 shares	\$ 168,910
STATE STREET CORP	115,000 shares	97,804
EQUINOR ASA	150,000 shares	126,221
ENERGY TRANSFER LP	160,000 shares	151,229
TARGET CORP	45,000 shares	43,889
TELEFONICA EMISIONES SA	130,000 shares	123,516
TRUSTEES OF PRINCETON UNIVERSI	60,000 shares	40,292
UNION ELECTRIC CO	175,000 shares	163,160
UNITED PARCEL SERVICE INC	100,000 shares	82,404
UNITEDHEALTH GROUP INC	130,000 shares	147,646
UNITEDHEALTH GROUP INC	85,000 shares	82,713
VALLEY NATIONAL BANCORP	75,000 shares	74,527
VENTAS REALTY LP	178,000 shares	174,048
VERIZON COMMUNICATIONS INC	65,000 shares	59,769
VERIZON COMMUNICATIONS INC	172,000 shares	161,489
VMWARE INC	55,000 shares	53,974
WALMART INC	750,000 shares	71,868
WELLS FARGO & CO	315,000 shares	303,657
WELLS FARGO COMMERCIAL LC25 B	45,000 shares	40,541
WELLTOWER OP LLC	155,000 shares	151,680
		<u>14,970,860</u>
Corporate Stock - Common		
ALPHABET INC	2,431 shares	214,487
ANALOG DEVICES INC	1,222 shares	200,445
ARMSTRONG WORLD INDUSTRIES INC	751 shares	51,511
CROWN CASTLE INC	1,237 shares	167,787
DOLLAR TREE INC	827 shares	116,971
ELECTRONIC ARTS INC	732 shares	89,436
ENVISTA HOLDINGS CORP	4,757 shares	160,168
META PLATFORMS INC	425 shares	51,145
FISERV INC	1,119 shares	113,097
LKQ CORP	3,109 shares	166,052
LABORATORY CORP OF AMERICA HOL	675 shares	158,949
OTIS WORLDWIDE CORP	1,816 shares	142,211
S&P GLOBAL INC	487 shares	163,116
SKYWORKS SOLUTIONS INC	1,607 shares	146,446
SYSCO CORP	1,635 shares	124,996
VAIL RESORTS INC	425 shares	101,299
VERISIGN INC	605 shares	124,291
VERISK ANALYTICS INC	574 shares	101,265
VISA INC	569 shares	118,215
VULCAN MATERIALS CO	512 shares	89,656
WASTE MANAGEMENT INC	852 shares	133,660
		<u>2,735,203</u>

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Common Collective Trust Funds		
BNY Temporary Investment Fund *	2,318,574 units	\$ 2,318,574
Private Equity Limited Partnership		
SKYBRIDGE CHIME	1,409,292 units	1,409,292
Hedge Fund		
CANYON VALUE REALIZATION	208 units	2,122,455
GOLDENTREE SELECT OFFSHORE	4,324 units	6,411,932
SERENGETI CARACAL FUND LTD	838 units	1,002,221
CF POINTER OFFSHORE LTD III	459 units	825,879
SERENGETI LYCAON	475,210 units	475,210
RIVA RIDGE OVERSEAS FUND LTD	1,000 units	1,695,870
RIVA RIDGE OVERSEAS CLASS F, MARCH 2021	1,000 units	1,524,460
RIVA RIDGE OVERSEAS CLASS F, APRIL 2021	3,000 units	4,458,510
SERENGETI CARACAL II	450 units	440,716
		18,957,253
		\$ 72,505,839

* Represents a party-in-interest to the Plan

Maritz Holdings, Inc. Retirement Plan
EIN 43-0393480 PN 001
Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2022

Identity	Description	Purchase Price	Selling Price	Expenses Incurred in Transactions	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions						
Purchases						
BNY Temporary Investment Fund	Short Term Investment Fund	\$ 16,507,123	\$ -	\$ -	\$ 16,507,123	\$ -
Sales						
BNY Temporary Investment Fund	Short Term Investment Fund	\$ -	\$ 17,126,522	\$ -	\$ 17,126,522	\$ -

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2022

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

Age	Retirement Rate	Assumed Number Eligible	Assumed Number Retiring	Age * Number Retiring
55	5%	10,000	500	27,500
56	5%	9,500	475	26,600
57	5%	9,025	451	25,707
58	5%	8,574	429	24,882
59	5%	8,145	407	24,013
60	5%	7,738	387	23,220
61	10%	7,351	735	44,835
62	20%	6,616	1,323	82,026
63	20%	5,293	1,059	66,717
64	10%	4,234	423	27,072
65	50%	3,811	1,906	123,890
66	40%	1,905	762	50,292
67	40%	1,143	457	30,619
68	40%	686	274	18,632
69	40%	412	165	11,385
70	100%	247	247	17,290
			10,000	624,680
				/ 10,000
			Weighted Average Retirement Age	62

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2022

Attained Age	Attained Years of Credited Service ¹										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	2	0	0	0	0	0	0	0	0	2
35-39	0	8	7	0	0	0	0	0	0	0	15
40-44	0	14	21	15	0	0	0	0	0	0	50
45-49	0	3	19	23	5	0	0	0	0	0	50
50-54	0	7	30	26	32	15	0	0	0	0	110
55-59	0	7	29	15	30	40	6	0	0	0	127
60-64	0	5	24	11	20	19	10	4	0	0	93
65-69	0	0	5	4	5	3	1	3	1	0	22
70 & over	0	3	2	1	1	0	0	0	0	0	7
Total	0	49	137	95	93	77	17	7	1	0	476

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Maritz Holdings, Inc. Retirement Plan

EIN / PN: 43-0393480/001

Plan Sponsor: Maritz Holdings, Inc.

Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2022	1,810,246	2,696,907	6,161,193	10,668,346
2023	1,578,522	1,319,216	5,958,041	8,855,779
2024	1,478,974	1,507,232	5,746,677	8,732,883
2025	1,374,235	1,602,644	5,526,573	8,503,452
2026	1,353,919	2,140,850	5,297,679	8,792,448
2027	1,279,738	1,860,256	5,060,393	8,200,387
2028	1,283,763	1,647,688	4,814,068	7,745,519
2029	1,180,847	1,559,010	4,559,378	7,299,235
2030	1,103,059	1,447,706	4,297,234	6,847,999
2031	1,024,478	1,421,904	4,028,636	6,475,018
2032	925,461	1,646,147	3,755,404	6,327,012
2033	862,130	1,287,877	3,478,920	5,628,927
2034	826,127	1,445,633	3,201,354	5,473,114
2035	730,727	1,109,169	2,925,201	4,765,097
2036	676,029	1,099,290	2,653,174	4,428,493
2037	595,284	565,920	2,388,080	3,549,284
2038	589,489	754,158	2,132,670	3,476,317
2039	533,617	610,565	1,889,487	3,033,669
2040	497,384	509,397	1,660,764	2,667,545
2041	477,855	677,404	1,448,307	2,603,566
2042	455,808	346,057	1,253,404	2,055,269
2043	426,897	314,005	1,076,771	1,817,673
2044	396,493	305,901	918,570	1,620,964
2045	377,582	361,630	778,464	1,517,676
2046	353,123	230,107	655,704	1,238,934
2047	333,530	211,485	549,227	1,094,242
2048	310,421	160,259	457,756	928,436
2049	292,044	134,175	379,878	806,097
2050	272,232	118,511	314,110	704,853

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2051	252,392	106,051	258,969	617,412
2052	233,419	97,627	213,034	544,080
2053	213,966	81,957	174,973	470,896
2054	195,186	70,682	143,578	409,446
2055	176,412	60,129	117,782	354,323
2056	158,307	50,421	96,657	305,385
2057	140,835	41,650	79,402	261,887
2058	124,212	33,868	65,343	223,423
2059	108,599	27,093	53,917	189,609
2060	94,085	21,309	44,654	160,048
2061	80,758	16,468	37,167	134,393
2062	68,672	12,497	31,132	112,301
2063	57,846	9,306	26,283	93,435
2064	48,269	6,795	22,396	77,460
2065	39,897	4,863	19,287	64,047
2066	32,665	3,408	16,803	52,876
2067	26,489	2,338	14,814	43,641
2068	21,275	1,568	13,211	36,054
2069	16,922	1,028	11,904	29,854
2070	13,328	659	10,821	24,808
2071	10,392	412	9,903	20,707

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2022

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2022	(4,407,698)	15.00000	(4,407,698)	(407,322)
2. Shortfall	01/01/2021	(914,950)	14.00000	(881,097)	(85,311)
3. Shortfall	01/01/2020	11,843,028	13.00000	10,907,114	1,111,902
Total				5,618,319	619,269

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Maritz Holdings, Inc.
EIN/PN	43-0393480/001
Plan Name	Maritz Holdings, Inc. Retirement Plan
Valuation Date	January 1, 2022
Enrolled Actuary	Jason R. Benbow
Enrollment Number	23-07392

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, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- Applicable month September
- Yield curve basis 3-Segment Rates

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
■ First segment rate	4.75%	1.07%
■ Second segment rate	5.18%	2.68%
■ Third segment rate	5.92%	3.36%
■ Effective interest rate	5.20%	2.58%

Annual rates of increase:

- Compensation N/A
- Interest crediting rate 4.00%

Expenses assumed to be paid from the trust are treated as an addition to target normal cost.

As permitted by law, rates reflecting stabilization are used to determine the funding target, and thus the minimum required contribution under IRC §430 for the plan. Because these assumptions are subject to a corridor based on average interest rates over a 25-year period, they may differ from (and currently are higher than) current market interest rates, and may be inconsistent with other economic assumptions used in the valuation.

Rates not reflecting stabilization are used to determine the PBGC variable rate premiums if the alternative method is used, and are used to determine the PBGC FTAP and the PBGC 4010 FS.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Demographic and Other 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-2020) 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-2020).

■ **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-2020) 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-2020).

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Termination

Rates varying by age and service.

Representative Termination Rates

Percentage leaving during the year						
Attained Age	Years of Service					
	1	2	3	4	5	6+
20	23.5%	20.0%	16.5%	13.0%	11.0%	9.0%
25	23.5%	20.0%	16.5%	13.0%	11.0%	7.8%
30	23.5%	20.0%	16.5%	13.0%	11.0%	5.8%
35	23.5%	20.0%	16.5%	13.0%	11.0%	4.7%
40	23.5%	20.0%	16.5%	13.0%	11.0%	4.2%
45	23.5%	20.0%	16.5%	13.0%	11.0%	3.5%
50	23.5%	20.0%	16.5%	13.0%	11.0%	0.0%
55	23.5%	20.0%	16.5%	13.0%	11.0%	0.0%
60	23.5%	20.0%	16.5%	13.0%	11.0%	0.0%
65	23.5%	20.0%	16.5%	13.0%	11.0%	0.0%

Disability

None.

Retirement

Rates varying by age, average age 62.

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
Age	Rate
55	5%
56	5%
57	5%
58	5%
59	5%
60	5%
61	10%
62	20%
63	20%
64	10%
65	50%
66	40%
67	40%
68	40%
69	40%
70	100%

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55.
- Deferred vested benefit Upon termination of employment.
- Retirement benefit Upon termination of employment.

Form of payment

Upon retirement, 70% of participants are assumed to elect a lump sum form of payment under the plan; 30% of single participants and 15% of married participants are assumed to elect a single life annuity and; 15% of married participants are assumed to elect a 50% Joint and Survivor annuity. Upon death or termination, 100% of participants or beneficiaries are assumed to elect a lump sum form of payment.

Percent married

100% of males; 100% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.

Spouse age

Wife three years younger than husband.

Plan-related expenses

\$925,000. Plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year.

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date

First day of plan year.

Funding target

Present value of accrued benefits.

Target normal cost

Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Decrement timing

The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Actuarial value of assets

Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, 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.

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.

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 Maritz Holdings, Inc. and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

The plan sponsor furnished participant data as of January 1, 2022. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, the following assumptions were made for missing or apparently inconsistent data elements:

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

- Missing birth dates for beneficiaries of retirees with joint and survivor payment forms were assumed to be three years prior to the retirees' birth dates if the retirees were female and three years after the retirees' birth dates if the retirees were male
- Missing sex of beneficiaries were assumed to be opposite of the retirees' sex.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

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.
Cash Balance Interest crediting rate	The plan credits interest to cash balance accounts using the average yield on 1-year treasuries for the month of October preceding the first day of the plan year, but with a minimum interest credit rate of 4.00% and a maximum interest credit rate of 8.00%. Maritz Holdings, Inc. has selected an expected future rate of 4.00%. After examining historical variability in this rate, and considering the increase (reduction) in interest crediting expected to be caused by the minimum (maximum) interest credit, we believe the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.
Annuity conversion rate for hybrid plans	As required by IRC 430, annuity benefits are valued by converting accounts to annuities using the current IRC 430 interest rates, so that the interest rates assumed are effectively the same as described above for the discount rate.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Plan Name:	Maritz Holdings, Inc. Retirement Plan
EIN / PN:	43-0393480/001
Plan Sponsor:	Maritz Holdings, Inc.
Valuation Date:	January 1, 2022

SCHEDULE SB ATTACHMENTS

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	Assumed termination rates differ by age and service because of expected differences in termination rates by service.
Retirement	Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.

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.
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Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	<ul style="list-style-type: none">■ The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.■ The mortality table used to calculate the funding target and target normal cost was updated from Scale MP-2019 to Scale MP-2020, as required by IRC §430.■ The assumed plan related expenses added to the normal cost were changed from \$880,000 in 2021 to \$925,000 in 2022.
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Plan Name:	Maritz Holdings, Inc. Retirement Plan
EIN / PN:	43-0393480/001
Plan Sponsor:	Maritz Holdings, Inc.
Valuation Date:	January 1, 2022

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment reflected in the following plan provisions was adopted and effective on December 7, 2021.

Covered employees Prior to April 30, 2007, all employees were eligible to become participants the last day of the plan year following completion of 1,000 hours of service. No employee who was not an active participant in the plan as of April 30, 2007 shall be eligible to participate in the plan.

Participation date Date of becoming a covered employee

Definitions

Vesting service Years and months of service from date of participation.

Pension service Years and months of service from date of participation and no service accruing after December 31, 2009.

Average earnings The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on the earlier of the participant's termination date or retirement date

Covered compensation The average of the Social Security taxable wage bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the Participant attains Social Security Retirement Age (as defined in Section 415(b)(8) of the Internal Revenue Code).

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65 with five years of pension service.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Monthly Pension Benefit

Monthly pension benefit under prior plan As of any date, one-twelfth of the sum of:

1. 1% of average earnings plus .5% of such earnings in excess of Covered Compensation. The total is multiplied by years of credited service up to 25 years.
2. .5% of average earnings multiplied by credited service in excess of 25 years.

Participants who were at least age 45 and whose age plus service totalled at least 55 as of December 31, 1995 receive ongoing accruals under this formula until December 31, 2009, when accruals under this formula ceased. For all other participants, accruals under this formula ceased effective December 31, 1995.

Minimum pension benefit under prior plan

The greater of:

1. \$16 times years of credited service; and
2. The accrued benefit under the Plan in effect on December 31, 1993, plus benefit accruals after December 31, 1993 subject to the new pay limits.

Participants who were at least age 45 and whose age plus service totalled at least 55 as of December 31, 1995 receive ongoing accruals under this formula until December 31, 2009, when accruals under this formula ceased. For all other participants, accruals under this formula ceased effective December 31, 1995.

Opening balance credit

The actuarial present value of the accrued benefit on December 31, 1995, using an interest rate of 6% and the 1983 Group Annuity Mortality table weighted 50% male and 50% female.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Cash balance benefit

The accumulated value of the opening balance credit and the annual credits to a participant's account, according to the following schedule:

Age as of 12/31	Credit Percentage
Less than 30	2.50%
30 – 34	3.00%
35 – 39	3.50%
40 – 44	4.00%
45 – 49	4.50%
50 – 54	5.00%
55 – 59	5.50%
60 or older	6.00%

The above amounts are credited each year a participant completes at least 1,000 hours of service. All amounts are accumulated using an interest credit equal to the average yield on 1-year treasuries for the month of October preceding the first day of the plan year. In no event will the interest credit be less than 4% nor greater than 8%.

No pay credits are provided to non-grandfathered participants after April 30, 2007. No pay credits are provided to grandfathered participants after December 31, 2009.

Monthly preretirement death benefit

Cash Balance Account death benefit is equal to the actuarial equivalent of the participant's cash balance account, payable as a lump sum or a monthly annuity for the life of the beneficiary. Monthly preretirement death benefit payable on behalf of an active employee with accruals frozen as of December 31, 2009 under prior plan formula is calculated as if participant terminated employment on the date of death, survived to age 55 (if death occurs prior to age 55) and elected a 50% J&S annuity commencing immediately. (The surviving spouse may elect a Cash Balance Account death benefit in lieu of this benefit.)

Eligibility for Benefits

Normal retirement

Retirement on NRD

Early retirement

Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service

Postponed retirement

Retirement after NRD

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB ATTACHMENTS

Vested termination	Termination for reasons other than death or retirement after completing three years of vesting service
---------------------------	--

Preretirement death 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	Monthly pension benefit determined as of NRD
--------------------------	--

Early retirement	The actuarial equivalent of the current cash balance account, but not greater than the accrued benefit. For participants with frozen accruals under the prior plan, the prior plan early retirement benefit is provided as a minimum benefit, where the monthly pension benefit is determined as of early retirement date. Benefit under prior plan formula is reduced 4.0% for each year that payment precedes NRD.
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Postponed retirement	Monthly pension benefit determined as of actual retirement date
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Vested termination	Monthly pension benefit determined as of termination date. Benefit under prior plan formula is reduced 5.0% for each year that payment precedes NRD.
---------------------------	--

Preretirement death	Monthly preretirement death benefit.
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Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a ten-year certain and life annuity, or (for married participants) a life annuity. Actuarial equivalence is based on the 417(e) applicable mortality table and an 8.00% interest rate.
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Plan Name:	Maritz Holdings, Inc. Retirement Plan
EIN / PN:	43-0393480/001
Plan Sponsor:	Maritz Holdings, Inc.
Valuation Date:	January 1, 2022

SCHEDULE SB ATTACHMENTS

Pension Increases None

Plan participants' contributions None

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 the dollar limits are assumed for determining pension cost but not for determining contributions.

Future Plan Changes

No future plan changes were recognized in determining pension cost or in determining minimum and maximum contributions. Willis Towers Watson is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

Martiz Holdings, Inc. purchased annuities for a group of participants on December 7, 2021.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2022

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>MARITZ HOLDINGS INC.</u>	D Employer Identification Number (EIN) <u>43-0393480</u>
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☐ 101-500 ☒ More than 500

Part I	Basic Information
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2022</u>	
2 Assets:	
a Market value	2a <u>93,177,132</u>
b Actuarial value	2b <u>89,322,160</u>
3 Funding target/participant count breakdown	
a For retired participants and beneficiaries receiving payment	(1) Number of participants <u>545</u> (2) Vested Funding Target <u>56,077,052</u> (3) Total Funding Target <u>56,077,052</u>
b For terminated vested participants	<u>847</u> <u>19,307,819</u> <u>19,307,819</u>
c For active participants	<u>476</u> <u>15,280,757</u> <u>15,280,757</u>
d Total	<u>1,868</u> <u>90,665,628</u> <u>90,665,628</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐	
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 <u>5.20%</u>
6 Target normal cost	
a Present value of current plan year accruals	6a <u>0</u>
b Expected plan-related expenses	6b <u>925,000</u>
c Total (line 6a + line 6b)	6c <u>925,000</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.

SIGN HERE	<u>JASON R. BENBOW</u> <i>JRB</i> Signature of actuary	<u>07-12-2023</u> Date
<u>JASON R. BENBOW</u> Type or print name of actuary		<u>2307392</u> Most recent enrollment number
<u>WILLIS TOWERS WATSON US LLC</u> Firm name		<u>314-719-5900</u> Telephone number (including area code)
<u>7733 FORSYTH BOULEVARD</u> <u>SUITE 1350</u> <u>ST. LOUIS MO 63105</u> 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) 2022
v. 220413

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	6,072,018
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	2,170,539
9	Amount remaining (line 7 minus line 8)	0	3,901,479
10	Interest on line 9 using prior year's actual return of <u>9.57</u> %	0	373,372
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.37</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	4,274,851

Part III		Funding Percentages	
14	Funding target attainment percentage	14	93.80 %
15	Adjusted funding target attainment percentage	15	94.45 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV		Contributions and Liquidity Shortfalls			
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c)
					0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:			
a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0	
b Contributions made to avoid restrictions adjusted to valuation date	19b	0	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0	
20 Quarterly contributions and liquidity shortfalls:			
a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No			
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No			
c If line 20a is "Yes," see instructions and complete the following table as applicable:			
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.18 %	3rd segment: 5.92 %	☐ N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions)	☐ Prescribed - combined	☒ Prescribed - separate	☐ Substitute	

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	☐ Yes	☒ No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.	☒ Yes	☐ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	☒ Yes	☐ No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	925,000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	5,618,319	619,269	
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	1,544,269	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	1,544,269	1,544,269
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☒ 2020 ☐ 2021
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Maritz Holdings, Inc. Retirement Plan
EIN 43-0393480 PN 001
Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2022

Identity	Description	Purchase Price	Selling Price	Expenses Incurred in Transactions	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions						
Purchases						
BNY Temporary Investment Fund	Short Term Investment Fund	\$ 16,507,123	\$ -	\$ -	\$ 16,507,123	\$ -
Sales						
BNY Temporary Investment Fund	Short Term Investment Fund	\$ -	\$ 17,126,522	\$ -	\$ 17,126,522	\$ -

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) December 31, 2022

Issuer and Description of Investment	Shares/Units	Current Value
Mutual Funds		
KOPERNIK GLOBAL ALL-CAP-INST	138,817 shares	\$ 1,549,198
VANGUARD TOT INT ST IDX-INST	110,987 shares	12,366,187
		13,915,385
Exchange Traded Funds		
COLUMBIA EMERGING MARKETS CO	72,523 shares	1,429,428
ISHARES CORE S&P 500 ETF	35,883 shares	13,786,607
ISHARES CORE MSCI EMERGING	29,967 shares	1,399,460
		16,615,495
Government Agency Obligations		
CALIFORNIA ST	100,000 shares	121,487
U S TREASURY NOTE	105,000 shares	99,126
U S TREASURY NOTE	300,000 shares	298,593
U S TREASURY NOTE	255,000 shares	261,176
U S TREASURY BD CPN STRIP	370,000 shares	152,362
U S TREASURY BD CPN STRIP	385,000 shares	151,582
U S TREASURY BD CPN STRIP	250,000 shares	94,905
U S TREASURY BD CPN STRIP	250,000 shares	91,195
U S TREASURY BD CPN STRIP	220,000 shares	78,390
U S TREASURY BD CPN STRIP	210,000 shares	72,223
U S TREASURY BD CPN STRIP	150,000 shares	49,106
U S TREASURY BD CPN STRIP	350,000 shares	113,632
		1,583,777
Corporate Debt Instruments		
AT&T INC	90,000 shares	85,933
ABBVIE INC	105,000 shares	95,049
AERCAP IRELAND CAPITAL DAC / A	105,000 shares	96,890
ALABAMA POWER CO	95,000 shares	79,316
ALIBABA GROUP HOLDING LTD	185,000 shares	178,910
ALLSTATE CORP/THE	95,000 shares	79,132
AMAZON.COM INC	190,000 shares	121,157
AMEREN ILLINOIS CO	175,000 shares	139,568
AMERICAN EXPRESS CO	85,000 shares	88,398
AMERICAN TOWER CORP	185,000 shares	167,941
ANHEUSER-BUSCH INBEV WORLDWIDE	95,000 shares	93,990
ELEVANCE HEALTH INC	185,000 shares	174,855
APPLE INC	175,000 shares	161,777
AVIATION CAPITAL GROUP LL 144A	150,000 shares	148,779
BMO 2022-C2 MORTGAGE TRU C2 AS	90,000 shares	84,058
BAKER HUGHES HOLDINGS LLC / BA	55,000 shares	49,365
BANCO SANTANDER SA	170,000 shares	169,091
BANK OF AMERICA CORP	250,000 shares	210,810
BANK OF NOVA SCOTIA/THE	75,000 shares	60,538
BARCLAYS PLC	210,000 shares	199,954

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

Schedule H, Line 4i – Schedule of Assets (Held at End of Year), Continued December 31, 2022

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
TRUIST BANK	175,000 shares	\$ 163,732
BELROSE FUNDING TRUST 144A	85,000 shares	64,565
BENCHMARK 2020-IG2 IG2 B 144A	140,000 shares	89,009
BENCHMARK 2020-I IG3 T33B 144A	100,000 shares	72,001
BERKSHIRE HATHAWAY ENERGY CO	150,000 shares	147,245
BLACKSTONE PRIVATE CREDIT FUND	85,000 shares	70,451
BNP PARIBAS SA 144A	140,000 shares	115,175
BOSTON GAS CO 144A	175,000 shares	150,462
BP CAPITAL MARKETS AMERICA INC	120,000 shares	113,886
BP CAPITAL MARKETS AMERICA INC	60,000 shares	50,442
BROOKFIELD FINANCE INC	125,000 shares	123,099
BURLINGTON NORTHERN SANTA FE L	135,000 shares	132,558
CF HIPPOLYTA ISSUER 1A A1 144A	95,142 shares	82,379
CIGNA GROUP/THE	70,000 shares	58,762
CVS HEALTH CORP	180,000 shares	168,340
CAMERON LNG LLC 144A	65,000 shares	55,019
CAPITAL ONE FINANCIAL CORP	325,000 shares	321,038
CAPITAL ONE FINANCIAL CORP	45,000 shares	43,578
CENTERPOINT ENERGY RESOURCES C	65,000 shares	51,408
CISCO SYSTEMS INC	80,000 shares	83,886
CITIGROUP INC	110,000 shares	90,476
COMCAST CORP	260,000 shares	245,388
COMCAST CORP	65,000 shares	47,826
COMCAST CORP	105,000 shares	95,538
COMMONWEALTH EDISON CO	65,000 shares	53,114
COMMONWEALTH EDISON CO	65,000 shares	50,881
CONAGRA BRANDS INC	70,000 shares	58,402
CONSOLIDATED EDISON CO OF NEW	95,000 shares	81,982
CONSUMERS ENERGY CO	110,000 shares	79,743
CORPORATE OFFICE PROPERTIES LP	50,000 shares	38,441
DTE ELECTRIC CO	145,000 shares	99,147
WALT DISNEY CO/THE	70,000 shares	58,851
DRIVE AUTO RECEIVABLES TRU 2 C	180,000 shares	173,216
ELECTRICITE DE FRANCE SA 144A	105,000 shares	84,874
EMERSON ELECTRIC CO	60,000 shares	48,753
ENEL FINANCE INTERNATIONAL 144A	105,000 shares	92,217
EXETER AUTOMOBILE RECEIVABLES 3A C	185,000 shares	175,485
FREMF 2016-K53 MORT K53 C 144A	110,000 shares	102,623
FREMF 2016-K60 MORT K60 C 144A	90,000 shares	81,533
FINANCE AMER STRUCTURED SECS	100,000 shares	90,576
FLORIDA POWER & LIGHT CO	145,000 shares	145,447
FLORIDA POWER & LIGHT CO	100,000 shares	85,201
GS MORTGAGE SECURITIES GC22 B	90,000 shares	84,804
GENERAL DYNAMICS CORP	75,000 shares	68,823

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
GENERAL MOTORS FINANCIAL CO IN	110,000 shares	\$ 101,883
GILEAD SCIENCES INC	145,000 shares	128,396
GOLDMAN SACHS GROUP INC/THE	200,000 shares	152,580
HSBC HOLDINGS PLC	165,000 shares	158,737
HOME DEPOT INC/THE	130,000 shares	118,700
INTEL CORP	125,000 shares	94,396
INTERCONTINENTAL EXCHANGE INC	105,000 shares	73,489
JPMDB COMMERCIAL MORTGAG C5 AS	190,000 shares	173,367
JPMBB COMMERCIAL MORTGAG C28 B	55,000 shares	50,431
JPMORGAN CHASE & CO	305,000 shares	254,370
JOHNSON & JOHNSON	110,000 shares	108,369
JOHNSON & JOHNSON	75,000 shares	51,972
KIMBERLY-CLARK CORP	155,000 shares	127,718
KIMCO REALTY OP LLC	145,000 shares	133,181
KINDER MORGAN ENERGY PARTNERS	205,000 shares	201,620
LLOYDS BANKING GROUP PLC	205,000 shares	203,602
LOEWS CORP	175,000 shares	169,115
LOWE'S COS INC	90,000 shares	86,483
MANUFACTURERS & TRADERS TRUST	185,000 shares	168,851
MANULIFE FINANCIAL CORP	95,000 shares	86,620
MASTERCARD INC	150,000 shares	122,457
MEDTRONIC INC	115,000 shares	109,114
MICROSOFT CORP	85,000 shares	60,717
MILL CITY MORTGAGE L 2 M3 144A	85,000 shares	74,197
MITSUBISHI UFJ FINANCIAL GROUP	180,000 shares	168,583
NATIONAL RURAL UTILITIES COOPE	335,000 shares	315,389
NATIONAL RURAL UTILITIES COOPE	50,000 shares	46,156
NATWEST GROUP PLC	60,000 shares	52,015
NEW RESIDENTIAL MOR 2A B3 144A	78,217 shares	72,774
NEW RESIDENTIAL M RPL3 M1 144A	110,000 shares	90,768
NEW YORK LIFE INSURANCE C 144A	110,000 shares	84,767
NORTHROP GRUMMAN CORP	75,000 shares	69,290
O'REILLY AUTOMOTIVE INC	100,000 shares	77,829
OMNICOM GROUP INC	105,000 shares	86,205
ONCOR ELECTRIC DELIVERY CO LLC	175,000 shares	141,754
ORACLE CORP	150,000 shares	156,179
PNC BANK NA	170,000 shares	160,194
PACIFICORP	35,000 shares	37,436
PFIZER INC	143,000 shares	124,732
PROLOGIS LP	105,000 shares	79,858
PRUDENTIAL FINANCIAL INC	100,000 shares	74,913
PUBLIC SERVICE ELECTRIC AND GA	150,000 shares	126,248
PUBLIC SERVICE ELECTRIC AND GA	55,000 shares	50,005
QUALCOMM INC	50,000 shares	52,088
SANTANDER DRIVE AUTO RECEI 3 C	175,000 shares	169,572
SANTANDER DRIVE AUTO RECEI 4 C	90,000 shares	86,207
SIMON PROPERTY GROUP LP	185,000 shares	172,655
SIMON PROPERTY GROUP LP	125,000 shares	91,443
SOUTHWESTERN PUBLIC SERVICE CO	160,000 shares	140,179
SOUTHWESTERN PUBLIC SERVICE CO	45,000 shares	38,032

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Corporate Debt Instruments Continued		
SPECTRA ENERGY PARTNERS LP	170,000 shares	\$ 168,910
STATE STREET CORP	115,000 shares	97,804
EQUINOR ASA	150,000 shares	126,221
ENERGY TRANSFER LP	160,000 shares	151,229
TARGET CORP	45,000 shares	43,889
TELEFONICA EMISIONES SA	130,000 shares	123,516
TRUSTEES OF PRINCETON UNIVERSI	60,000 shares	40,292
UNION ELECTRIC CO	175,000 shares	163,160
UNITED PARCEL SERVICE INC	100,000 shares	82,404
UNITEDHEALTH GROUP INC	130,000 shares	147,646
UNITEDHEALTH GROUP INC	85,000 shares	82,713
VALLEY NATIONAL BANCORP	75,000 shares	74,527
VENTAS REALTY LP	178,000 shares	174,048
VERIZON COMMUNICATIONS INC	65,000 shares	59,769
VERIZON COMMUNICATIONS INC	172,000 shares	161,489
VMWARE INC	55,000 shares	53,974
WALMART INC	750,000 shares	71,868
WELLS FARGO & CO	315,000 shares	303,657
WELLS FARGO COMMERCIAL LC25 B	45,000 shares	40,541
WELLTOWER OP LLC	155,000 shares	151,680
		<u>14,970,860</u>
Corporate Stock - Common		
ALPHABET INC	2,431 shares	214,487
ANALOG DEVICES INC	1,222 shares	200,445
ARMSTRONG WORLD INDUSTRIES INC	751 shares	51,511
CROWN CASTLE INC	1,237 shares	167,787
DOLLAR TREE INC	827 shares	116,971
ELECTRONIC ARTS INC	732 shares	89,436
ENVISTA HOLDINGS CORP	4,757 shares	160,168
META PLATFORMS INC	425 shares	51,145
FISERV INC	1,119 shares	113,097
LKQ CORP	3,109 shares	166,052
LABORATORY CORP OF AMERICA HOL	675 shares	158,949
OTIS WORLDWIDE CORP	1,816 shares	142,211
S&P GLOBAL INC	487 shares	163,116
SKYWORKS SOLUTIONS INC	1,607 shares	146,446
SYSCO CORP	1,635 shares	124,996
VAIL RESORTS INC	425 shares	101,299
VERISIGN INC	605 shares	124,291
VERISK ANALYTICS INC	574 shares	101,265
VISA INC	569 shares	118,215
VULCAN MATERIALS CO	512 shares	89,656
WASTE MANAGEMENT INC	852 shares	133,660
		<u>2,735,203</u>

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

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

Description of Investment	Shares	Current Value
Common Collective Trust Funds		
BNY Temporary Investment Fund *	2,318,574 units	\$ 2,318,574
Private Equity Limited Partnership		
SKYBRIDGE CHIME	1,409,292 units	1,409,292
Hedge Fund		
CANYON VALUE REALIZATION	208 units	2,122,455
GOLDENTREE SELECT OFFSHORE	4,324 units	6,411,932
SERENGETI CARACAL FUND LTD	838 units	1,002,221
CF POINTER OFFSHORE LTD III	459 units	825,879
SERENGETI LYCAON	475,210 units	475,210
RIVA RIDGE OVERSEAS FUND LTD	1,000 units	1,695,870
RIVA RIDGE OVERSEAS CLASS F, MARCH 2021	1,000 units	1,524,460
RIVA RIDGE OVERSEAS CLASS F, APRIL 2021	3,000 units	4,458,510
SERENGETI CARACAL II	450 units	440,716
		18,957,253
		\$ 72,505,839

* Represents a party-in-interest to the Plan