

<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>Annual Return/Report of Employee Benefit Plan</div> <div>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).</div> <div>▶ Complete all entries in accordance with the instructions to the Form 5500.</div>	<div>OMB Nos. 1210-0110 1210-0089</div> <div>2023</div> <div>This Form is Open to Public Inspection</div>
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: <div><div>☐ a multiemployer plan</div><div>☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)</div><div>☒ a single-employer plan</div><div>☐ a DFE (specify) _____</div><div>☐ the first return/report</div><div>☐ the final return/report</div><div>☐ an amended return/report</div><div>☐ a short plan year return/report (less than 12 months)</div></div>
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: <div><div>☒ Form 5558</div><div>☐ automatic extension</div><div>☐ the DFVC program</div><div>☐ special extension (enter description)</div></div>
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 KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN
1b	Three-digit plan number (PN) ▶ 002
1c	Effective date of plan 01/01/1996
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) ELBITAMERICA, INC. 4700 MARINE CREEK PARKWAY FORT WORTH, TX 76179
2b	Employer Identification Number (EIN) 51-0345236
2c	Plan Sponsor's telephone number 817-234-6600
2d	Business code (see instructions) 333310

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.	10/11/2024	CRAIG COLLINS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/11/2024	MICHELLE FIGURSKI
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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 KOLLSMAN, INC. c Plan Name KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	4b EIN 02-0485231 4d PN 002
5 Total number of participants at the beginning of the plan year	5 709
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 110 6a(2) 97 6b 376 6c 101 6d 574 6e 60 6f 634 6g(1) 6g(2) 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 3F 3H 1I 3D

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 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 _____

<div>SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Single-Employer Defined Benefit Plan Actuarial Information</div> <div>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).</div> <div>File as an attachment to Form 5500 or 5500-SF.</div>	<div>OMB No. 1210-0110</div> <div>2023</div> <div>This Form is Open to Public Inspection</div>
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
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 KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	B Three-digit plan number (PN) 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF ELBITAMERICA, INC.	D Employer Identification Number (EIN) 51-0345236
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 01 Day 01 Year 2023			
2	Assets:			
a	Market value	2a	53511986	
b	Actuarial value	2b	53511986	
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	416	35813074	35813074
b	For terminated vested participants	188	14924173	14924173
c	For active participants	110	12483651	12483651
d	Total	714	63220898	63220898
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.22 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	0	
b	Expected plan-related expenses	6b	598274	
c	Target normal cost	6c	598274	

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.

<div>SIGN HERE</div>	<div>Signature of actuary</div> <div>JEFFREY C. LITER</div> <div>Type or print name of actuary</div> <div>THE ANGELL PENSION GROUP, INC.</div> <div>Firm name</div> <div>88 BOYD AVENUE EAST PROVIDENCE, RI 02914</div> <div>Address of the firm</div>	<div>10/09/2024</div> <div>Date</div> <div>23-06544</div> <div>Most recent enrollment number</div> <div>401-438-9250</div> <div>Telephone number (including area code)</div>
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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	351701
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	351701
10 Interest on line 9 using prior year's actual return of <u>-16.09</u> %	0	-56589
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>5.40</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	295112

Part III Funding Percentages		
14 Funding target attainment percentage	14	84.17 %
15 Adjusted funding target attainment percentage	15	84.17 %
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	111.00 %
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
09/13/2024	1329972	0			
Totals ►			18(b)	1329972	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	1219678
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

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost
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21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.00 %	3rd segment: 5.74 %
			☐ N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI	Miscellaneous Items
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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
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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
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31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	598274	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	10004024	916176	
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	1514450	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	295112	295112
36 Additional cash requirement (line 34 minus line 35).....	36	1219338	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	1219678	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	340	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	340	
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)
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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

<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
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 ELBITAMERICA, INC.	D Employer Identification Number (EIN) 51-0345236	

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	
BLACKROCK INC.	345 PARK AVE 29TH FLOOR NEW YORK, NY 10154

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
LAZARD ASSET MANAGEMENT	222 BERKELEY STREET SUITE 1100-B BOSTON, MA 02116

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
LEGG MASSON/WESTERN ASSET MGT	100 LIGHT STREET BALTIMORE, MD 21202

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
LOOMIS SAYLES & COMPANY LP	ONE FINANCIAL CENTER BOSTON, MA 02111

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

METROPOLITAN WEST ASSET MANAGEMENT	11766 WILSHIRE BLVD SUITE 1580 LOS ANGELES, CA 90025
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NEUBERGER BERMAN MANAGEMENT LLC	605 THIRD AVENUE 2ND FLOOR NEW YORK, NY 10158-0180
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

VANGUARD GROUP INC.	100 VANGUARD BLVD MALVERN, PA 19355
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

CONESTOGA FUNDS	CROSSPOINT AT VALLEY FORGE 550 EAST SWEDES FORD RD, STE 120 WAYNE, PA 19087
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

GQG PARTNERS	299 PARK AVE, 13TH FLOOR NEW YORK, NY 10171
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

HOTCHKIS & WILEY	601 SOUTH FIGUEROA ST, 39TH FLOOR LOS ANGELES, CA 90017
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

PIMCO	1633 BROADWAY NEW YORK, NY 10019
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

DWS DISTRIBUTORS, INC.	222 SOUTH RIVERSIDE PLAZA CHICAGO, IL 60606-5808
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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)

THE ANGELL PENSION GROUP, INC.

04-2530412

(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	NONE	52272	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WHITLEY PENN LLP

75-2393478

(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?
10	NONE	22660	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE NORTHERN TRUST COMPANY

36-1561860

(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?
21 24 60 36 49 99	NONE	17507	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

FIDUCIENT ADVISORS LLC

36-4001764

(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?
27	NONE	16646	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRINCIPAL TRUST COMPANY

42-1520346

(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?
21 24 60 64 99	NONE	8319	Yes ☒ No ☐	Yes ☒ No ☐	0	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:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**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>	<div style="text-align: center;">Financial Information</div> <p style="text-align: center; font-size: small;">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).</p> <p style="text-align: center; font-weight: bold;">▶ File as an attachment to Form 5500.</p>	<div style="text-align: center; font-size: x-small;">OMB No. 1210-0110</div> <div style="text-align: center; font-size: large; font-weight: bold; margin-top: 20px;">2023</div> <div style="text-align: center; font-size: x-small; font-weight: bold; margin-top: 20px;">This Form is Open to Public Inspection</div>				
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023						
A Name of plan KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; border-bottom: 1px solid black; padding: 5px;"> B Three-digit plan number (PN) ▶ </td> <td style="width: 20%; border-bottom: 1px solid black; padding: 5px; text-align: center; color: blue;">002</td> </tr> <tr> <td colspan="2" style="background-color: #f0f0f0; height: 20px;"></td> </tr> </table>		B Three-digit plan number (PN) ▶	002		
B Three-digit plan number (PN) ▶	002					
C Plan sponsor's name as shown on line 2a of Form 5500 ELBITAMERICA, INC.	D Employer Identification Number (EIN) 51-0345236					

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
	Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	1329972
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	2302	6323
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	784992
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	649274	0
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	52860409	54120325
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

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	53511985	56241612
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	53511985	56241612

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)	1329972	
(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)		1329972
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	62337	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		62337
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1403216	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1403216
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	5499674	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	5499674	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		19714
(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)		6781601
c Other income	2c		381
d Total income. Add all income amounts in column (b) and enter total	2d		9597221

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6219857	
(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)		6219857
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)	22660	
(5) Investment advisory and investment management fees	2i(5)	16646	
(6) Bank or trust company trustee/custodial fees	2i(6)	25827	
(7) Actuarial fees	2i(7)	52272	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	530332	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		647737
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6867594

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2729627
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: **WHITLEY PENN, LLP**

(2) EIN: **75-2393478**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
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.			

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 520629.

<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>2023</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 ELBITAMERICA, INC.		D Employer Identification Number (EIN) 51-0345236
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 36-1561860 42-1520346		
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 67
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) 2023 v. 230707		

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

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

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

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation. _____

Part VII	IRS Compliance Questions
-----------------	---------------------------------

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 03 / 30 / 2018 (MM/DD/YYYY) and the Opinion Letter serial number J501729A.

**KOLLSMAN, INC. DEFINED BENEFIT
RETIREMENT PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES**

**Years Ended December 31, 2023 and 2022
with Report of Independent Auditors**

**KOLLSMAN, INC. DEFINED BENEFIT
RETIREMENT PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES**

Years Ended December 31, 2023 and 2022

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REPORT OF INDEPENDENT AUDITORS

To the Investment Committee of the
Kollsman, Inc. Defined Benefit Retirement Plan

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

We have performed audits of the financial statements of the Kollsman, Inc. Defined Benefit Retirement Plan (the “Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (“ERISA”), as permitted by ERISA Section 103(a)(3)(C) (“ERISA Section 103(a)(3)(C) audit”). The financial statements comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

Management has obtained certifications from qualified institutions as of and for the years ended December 31, 2023 and 2022, stating that the certified investment information, as described in Note G to the financial statements, is complete and accurate.

Opinion

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

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor’s Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

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

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

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

Other Matter — Supplemental Schedules Required by ERISA

The supplemental schedules of Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year) and Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions as of December 31, 2023, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL'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 their form and content, are presented in conformity with the DOL'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 DOL'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).

Whitley Penn LLP

Fort Worth, Texas
September 27, 2024

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	<u>2023</u>	<u>2022</u>
Assets		
Investments, at fair value	\$ 54,905,317	\$ 53,509,683
Receivables:		
Employer contributions	1,329,972	-
Investment income	<u>6,323</u>	<u>2,302</u>
Total receivables	<u>1,336,295</u>	<u>2,302</u>
Net assets available for benefits	<u><u>\$ 56,241,612</u></u>	<u><u>\$ 53,511,985</u></u>

See accompanying notes to financial statements.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Year Ended December 31, 2023	2022
Additions to (Reductions from) Net Assets		
Investment income (loss):		
Net realized and unrealized gains (losses) on investments	\$ 6,781,603	\$ (11,919,738)
Interest and dividends	1,485,646	1,308,327
Total investment income (loss)	8,267,249	(10,611,411)
Contributions:		
Employer contributions	1,329,972	-
Total contributions	1,329,972	-
Total additions to (reductions from) net assets	9,597,221	(10,611,411)
Deductions from Net Assets		
Benefits paid to participants	6,219,857	3,005,663
Administrative expenses	647,737	598,273
Total deductions from net assets	6,867,594	3,603,936
Net increase (decrease) in net assets available for benefits	2,729,627	(14,215,347)
Net assets available for benefits at beginning of year	53,511,985	67,727,332
Net assets available for benefits at end of year	<u>\$ 56,241,612</u>	<u>\$ 53,511,985</u>

See accompanying notes to financial statements.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2023 and 2022

A. Description of the Plan

General

The following brief description of the Kollsman, Inc. Defined Benefit Retirement Plan (the “Plan”) is provided for general information purposes only. The Plan is sponsored by ElbitAmerica, Inc. (previously Kollsman, Inc.) (the “Company”). Participants should refer to the Plan document for more complete information.

The Plan was effective January 1, 1996, amended and restated January 1, 2020 to comply with the Pension Protection Act of 2006 and subsequent legislation, as required by the Internal Revenue Service (“IRS”), and is a non-contributory defined benefit plan covering all employees of the Company, except those covered by a collective bargaining agreement and leased employees, who have completed one year of service and have attained age 21. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

In August 2009, the Compensation Committee of the Board of Directors of Elbit Systems US Corp., the parent company of the Company, approved a freeze of the Plan effective January 1, 2010. The “soft freeze” of the Plan prohibits non-represented employees that are hired on or after the freeze date from being added to the Plan. Existing participants would continue to accrue benefits as defined under the Plan’s provisions based on years of service and Plan provisions in effect.

In September 2018, the Board of Directors of the Company authorized a provision and executed an amendment to the Plan to enact a “hard freeze” for all current Plan participants effective December 31, 2018. Under the “hard freeze”, existing participants will no longer continue to accrue benefits after December 31, 2018, as defined under the Plan’s provisions.

Effective June 1, 2023, the Plan changed trustees and custodians from Northern Trust Company to Principal Trust Company.

Contributions

The Plan’s funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement as calculated by an independent actuary. Additionally, the Company makes annual contributions to the Plan based upon the maximum deductibility under the Internal Revenue Code (the “Code”). For the year ended December 31, 2023, the Company made a minimum-funding contribution of approximately \$1,330,000. For the year ended December 31, 2022, the Plan was fully funded as defined by ERISA funding requirements. After consideration of the funded status, the Company elected to make no contribution attributable to 2022.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

A. Description of the Plan – continued

Plan Expenses

Employees of the Company perform certain administrative functions of the Plan with no compensation from the Plan. In accordance with Plan provisions, the Plan pays substantially all administrative expenses and costs relating to asset charges and recordkeeping, as well as Pension Benefit Guarantee Corporation (“PBGC”) premiums. Any administrative expenses, if any, that are paid by the Company are not reflected in the accompanying financial statements.

Plan Benefits

Participants are entitled to pension benefits, to be paid monthly, beginning at normal retirement date. Normal retirement date is defined as the first day of the month coinciding with or following the latter of the participant’s sixty-fifth (65) birthday or fifth anniversary of continuous employment with the Company. The pension benefits payable to the participant equal the sum of (a) 0.9% of the participant’s average monthly compensation multiplied by years and months of benefit service, plus (b) 0.6% of the participant’s average monthly compensation in excess of Social Security covered compensation, multiplied by years and months of benefit service, to a maximum of 35 years, subject to certain minimum benefit payments. Other minimum benefits may apply in some circumstances. The Plan also permits early retirement for participants who have attained the age of fifty-five (55) and completed five years of service. If the participant elects to receive early retirement benefits commencing after the early retirement date, the participant’s accrued benefit is reduced by the appropriate actuarial equivalent factor for each month that commencement of the participant’s retirement date preceded the participant’s normal retirement date, multiplied by the actuarial equivalent factor appropriate to the normal form of payment.

Upon termination of the Plan, all eligible participants may elect to receive either an immediate lump-sum payment, if applicable, or periodic payments.

Vesting

Participants become fully vested upon the attainment of five years of service.

B. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are presented on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”).

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

B. Summary of Significant Accounting Policies – continued

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from these estimates. Refer to Note C for significant assumptions used in determining the Plan's present value of accumulated plan benefits.

Risks and Uncertainties

The Plan directly invests in mutual funds, a money market fund, and a common collective trust, which is considered a cash equivalent. Investment securities, in general, are exposed to various risks, such as interest rate risk, credit risk, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the accompanying financial statements.

Investment Valuation and Income

The investments of the Plan are stated at fair value as of the end of the year and are generally subject to market or credit risks customarily associated with equity and fixed income investments. Fair values are determined in accordance with U.S. GAAP, which defines fair value, establishes a framework for measuring fair value, and requires certain disclosures about assets and liabilities measured at fair value. See Note D for information related to the Plan's valuation methodologies.

Purchases and sales of securities are recorded on a trade-date basis. The net realized and unrealized gains (losses) on investments include realized gains and losses on sales of investments during the year and unrealized increases or decreases in the market value of investments held at year-end. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Payment of Benefits

Benefits are recorded when paid.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are estimated future periodic payments, including lump-sum distributions, attributable under the Plan's provisions to services rendered by employees through the valuation date. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries and present employees or their beneficiaries. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included, to the extent they are deemed attributable to employee service rendered through the valuation date.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

C. Actuarial Present Value of Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by Plan participants to reflect the time value of money and the probability of payment (such as for death, disability, or retirement) between the valuation date and the expected date of payment.

The actuarial present value of the accumulated plan benefits information based on a beginning of the year valuation is as follows:

	January 1, 2023
Vested benefits:	
Participants currently receiving payments	\$31,379,010
Other vested participants	23,208,523
Total vested benefits	54,587,533
Non-vested benefits	-
Total actuarial present value of accumulated plan benefits	<u>\$54,587,533</u>

The following is a summary of the changes in the actuarial present value of accumulated plan benefits between the applicable benefit information dates:

	Year Ended January 1, 2023
Actuarial present value of accumulated plan benefits at beginning of the year	\$53,250,703
Changes during the year:	
Benefits accumulated and actuarial gains	857,965
Changes in actuarial assumptions	-
Increase for interest due to change in the discount period	3,484,528
Benefits paid	<u>(3,005,663)</u>
Actuarial present value of accumulated plan benefits at end of the year	<u>\$54,587,533</u>

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

C. Actuarial Present Value of Accumulated Plan Benefits – continued

The actuarial cost method used was the traditional unit credit actuarial cost method. For 2023 and 2022, the increases to salary were not assumed, as Plan benefits are frozen, and the Social Security taxable wages base was assumed to not increase. The more significant assumptions underlying the actuarial computations as of January 1, 2023 and 2022, for the respective actuarial valuations are as follows:

	<u>2023</u>	<u>2022</u>
Interest discount rate	5.220%	5.400%
Retirement age	From age 55 to 71	From age 55 to 71

The actuarial assumptions related to the mortality basis are based on prescribed male/female tables by the IRS for 2023 and 2022.

The change in the actuarial assumptions was primarily due to the following: (1) a change in the Plan's effective interest rate from 5.400% in 2022 to 5.220% in 2023; and (2) changes to the mortality tables from the 2022 IRS prescribed tables to the 2023 IRS prescribed tables.

These actuarial assumptions are based on the presumption that the Plan will continue. If the Company terminates the Plan at some future date, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

D. Fair Value Measurements

U.S. GAAP defines fair value as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date and establishes a three-tier hierarchy that is used to identify assets and liabilities measured at fair value. The hierarchy focuses on the inputs used to measure fair value and requires that the lowest level input be used. The three levels defined are as follows:

Level 1 — Inputs are unadjusted, quoted prices in active markets for identical assets or liabilities at the measurement date.

Level 2 — Inputs (other than quoted prices included in Level 1) are either directly or indirectly observable for assets or liabilities through correlation with market data at the measurement date and for the duration of the instruments' anticipated lives.

Level 3 — Inputs reflect the best estimate of what market participants would use in pricing assets or liabilities at the measurement date. Consideration is given to the risk inherent in the valuation technique and the risk inherent in the inputs to the model.

There have been no changes in the methodologies used at December 31, 2023 and 2022. For the years ended December 31, 2023 and 2022, there were no significant transfers between levels. The Plan held no Level 2 or 3 investments as of December 31, 2023 or 2022.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

D. Fair Value Measurements – continued

The following is a description of the valuation methodologies used for assets measured at fair value.

Mutual funds and money market fund: The fair values of the mutual funds and the money market fund are considered Level 1, as the investments have readily available quoted prices in active markets.

Cash and cash equivalents: The fair value of the cash and cash equivalents is considered Level 1, as the investment is primarily comprised of a common collective trust mostly made up of short-term money market funds valued at cost, which approximates fair value.

Investments measured at fair value on a recurring basis at December 31,:

	2023	
	Level 1	Total
Mutual funds	\$54,120,325	\$54,120,325
Money market fund	784,992	784,992
Total investments, at fair value	<u>\$54,905,317</u>	<u>\$54,905,317</u>
	2022	
	Level 1	Total
Mutual funds	\$52,860,408	\$52,860,408
Cash and cash equivalents	649,275	649,275
Total investments, at fair value	<u>\$53,509,683</u>	<u>\$53,509,683</u>

E. 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 organization, or relatives of such persons.

The Plan invests in units of a money market fund managed by Principal Funds, Inc., an affiliate of Principal Bank, the trustee. Transactions in such investments qualify as party-in-interest transactions, which are exempt from the prohibited transaction rules. The Plan paid certain expenses related to Plan operations and investment activity to various service providers. These transactions are party-in-interest transactions under ERISA, which are exempt from the prohibited transaction rules.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS *(continued)*

F. Plan Termination

While the Company has not expressed any intent to permanently discontinue its contributions, it is free to do so under the provisions of the Plan at any time, subject to the provisions of ERISA. Should the Company terminate the Plan at some future time, its net assets will generally not be available on a pro-rata basis to provide participant benefits.

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

G. Certified Investments

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedules, including investments held and investment income receivable at December 31, 2023 and 2022, net realized and unrealized gains (losses) on investments, and interest and dividends for the years ended December 31, 2023 and 2022, was obtained by management and agreed to or derived from information certified as complete and accurate by Northern Trust Company and Principal Bank (the trustees of the Plan).

H. Income Tax Status

The Plan utilizes the Angell Pension Group Inc. Volume Submitter Defined Benefit Plan, which has a favorable opinion letter from the IRS. This opinion letter dated March 30, 2018, states that the form of the prototype plan is acceptable under Section 401 of the Code. The Company may rely on this letter with respect to the qualification of the Plan under Code Section 401(a) with certain limitations. The Company believes that the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan was qualified and the related trust was tax exempt as of the financial statement date.

U.S. GAAP requires management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

I. Subsequent Events

In preparing the accompanying financial statements, management has evaluated all subsequent events and transactions for potential recognition or disclosure through September 27, 2024, the date the financial statements were available for issuance.

SUPPLEMENTAL SCHEDULES

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN
FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

December 31, 2023

EIN: 51-0345236

Plan #: 002

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Vanguard Institutional Index Fund	Equity mutual fund	\$ 9,129,295	\$ 18,599,858
	Vanguard Total International Stock Index Fund	Equity mutual fund	7,037,816	7,944,345
	Loomis Investment Grade Fixed Income Fund	Fixed-income mutual fund	8,153,767	6,860,220
	Metropolitan West Total Return Bond Fund	Fixed-income mutual fund	8,025,132	6,776,657
	DWS RREEF Real Assets Fund Class	Equity mutual fund	2,500,382	2,734,167
	Hotchkis & Wiley Small Cap Diversivied Value Fund	Equity mutual fund	2,177,297	2,343,580
	Conestoga Small Cap Fund	Equity mutual fund	2,060,675	2,319,459
	Brandywineglobal Global Oportunities Bond Fund	Fixed-income mutual fund	2,419,300	2,076,098
	Blackrock Strategic Income Opportunities Portfolio	Fixed-income mutual fund	2,124,318	1,992,424
	GQG Partners Emerging Markets Equity Fund	Equity mutual fund	1,133,031	1,251,430
	Pimco RAE Emerging Markets Fund	Equity mutual fund	1,147,458	1,222,087
*	Principal Government Money Market Fund	Money market fund	784,922	784,992
	Total investments		<u>\$ 46,693,393</u>	<u>\$ 54,905,317</u>

* Represents a party in interest to the Plan as defined by ERISA.

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

(a)	(b)	(f)	(c), (d), (h)	(g)	(i)
DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
-----	-----	-----	-----	-----	-----
Identity of party involved	Description of asset (including interest rate and maturity in case of loan)		Purchase price, Selling price, and Current value of assets on transaction date	Cost of assets	Net gain (loss)
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
03/30/23 B	1	1.000	0	1-	1
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
03/30/23 S	1	1.000	0	1 *	1
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/01/23 B	1,653,684	1.000	0	1,653,684-	1,653,684
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/02/23 S	273,516	1.000	0	273,516 *	273,516
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/13/23 B	4,425	1.000	0	4,425-	4,425
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/13/23 B	4,425	1.000	0	4,425-	4,425
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/15/23 S	4,425	1.000	0	4,425 *	4,425
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/21/23 S	12,005	1.000	0	12,005 *	12,005
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
06/23/23 S	8,500	1.000	0	8,500 *	8,500
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/03/23 S	268,335	1.000	0	268,335 *	268,335
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/06/23 B	9,901	1.000	0	9,901-	9,901
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/07/23 B	132	1.000	0	132-	132
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/11/23 S	132	1.000	0	132 *	132
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/14/23 S	219	1.000	0	219 *	219
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/14/23 S	300	1.000	0	300 *	300
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
07/20/23 B	32	1.000	0	32-	32
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
08/01/23 S	269,329	1.000	0	269,329 *	269,329
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
08/01/23 B	334	1.000	0	334-	334
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **					
08/02/23 S	3,921	1.000	0	3,921 *	3,921

Column (e) is not applicable

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) **REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE** **ELBIT SYSTEMS KOLLSMAN**
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/03/23 S	334	1.000	0	334 *	334	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/10/23 B	4	1.000	0	4--*	4	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/11/23 S	2	1.000	0	2 *	2	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/14/23 S	75	1.000	0	75 *	75	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/17/23 S	2,047	1.000	0	2,047 *	2,047	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/25/23 B	850,000	1.000	0	850,000--*	850,000	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
08/25/23 S	10,300	1.000	0	10,300 *	10,300	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/01/23 S	271,536	1.000	0	271,536 *	271,536	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/01/23 B	659	1.000	0	659--*	659	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/08/23 S	9,571	1.000	0	9,571 *	9,571	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/11/23 B	2,263	1.000	0	2,263--*	2,263	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/28/23 S	11,295	1.000	0	11,295 *	11,295	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
09/29/23 S	10,300	1.000	0	10,300 *	10,300	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/02/23 S	268,295	1.000	0	268,295 *	268,295	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/04/23 B	3,683,875	1.000	0	3,683,875--*	3,683,875	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/13/23 S	530,332	1.000	0	530,332 *	530,332	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/16/23 S	450	1.000	0	450 *	450	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/20/23 S	5,893	1.000	0	5,893 *	5,893	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
10/30/23 S	2,060	1.000	0	2,060 *	2,060	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
11/01/23 S	256,067	1.000	0	256,067 *	256,067	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
11/10/23 S	150	1.000	0	150 *	150	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
11/14/23 B	820	1.000	0	820--*	820	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
11/16/23 S	820	1.000	0	820 *	820	0

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
11/21/23 S	887	1.000	0	887 *	887	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/01/23 S	258,321	1.000	0	258,321 *	258,321	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/06/23 B	270	1.000	0	270-*	270	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/08/23 S	2,971,830	1.000	0	2,971,830 *	2,971,830	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/08/23 S	150	1.000	0	150 *	150	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/15/23 S	9,436	1.000	0	9,436 *	9,436	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/26/23 B	38,841	1.000	0	38,841-*	38,841	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/27/23 S	38,841	1.000	0	38,841 *	38,841	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL**						
12/29/23 B	35,000	1.000	0	35,000-*	35,000	
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST						
10/03/23 B	76,923	14.300	0	1,100,000-*	1,100,000	
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST						
12/28/23 R	2,081	15.870	0	33,031-*	33,031	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
06/30/23 R	687	9.190	0	6,313-*	6,313	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
07/31/23 R	863	9.230	0	7,964-*	7,964	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
08/31/23 R	906	9.170	0	8,307-*	8,307	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
09/30/23 R	851	9.050	0	7,701-*	7,701	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
10/03/23 S	11,136	8.980	0	100,000 *	112,194	-12,194
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
10/31/23 R	840	8.980	0	7,544-*	7,544	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
11/30/23 R	821	9.200	0	7,558-*	7,558	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
12/31/23 R	780	9.440	0	7,364-*	7,364	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
10/03/23 B	33,184	64.790	0	2,150,000-*	2,150,000	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
12/04/23 R	300	68.120	0	20,405-*	20,405	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
12/28/23 S	1,693	73.840	0	125,000 *	109,730	15,270
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487						
10/03/23 B	238,327	10.280	0	2,450,000-*	2,450,000	

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487						
12/19/23 R	4,494	11.210	0	50,382-*	50,382	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
10/03/23 B	184,867	11.630	0	2,150,000-*	2,150,000	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
12/07/23 R	17,083	11.540	0	197,135-*	197,135	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
12/28/23 S	14,613	12.660	0	185,000 *	169,837	15,163
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361						
08/17/23 R	140	15.660	0	2,198-*	2,198	
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361						
10/03/23 S	170,954	15.010	0	2,566,018 *	3,170,810	-604,792
ISSUE: 524686318 - BRANDYWINEGLB-GLB OPP BD-IS #2266						
12/19/23 R	193	9.260	0	1,790-*	1,790	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
06/29/23 R	2,103	10.180	0	21,409-*	21,409	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
07/28/23 R	2,430	10.130	0	24,611-*	24,611	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
08/30/23 R	2,651	10.030	0	26,586-*	26,586	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
09/28/23 R	2,492	9.780	0	24,369-*	24,369	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
10/03/23 S	72,464	9.660	0	700,000 *	902,220	-202,220
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
10/30/23 R	2,829	9.610	0	27,189-*	27,189	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
11/29/23 R	2,319	10.050	0	23,310-*	23,310	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
12/15/23 R	2,965	10.320	0	30,598-*	30,598	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
12/28/23 B	19,212	10.410	0	200,000-*	200,000	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
06/30/23 R	2,410	8.500	0	20,486-*	20,486	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
07/31/23 R	3,065	8.480	0	25,988-*	25,988	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
08/31/23 R	3,275	8.390	0	27,477-*	27,477	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
09/30/23 R	2,873	8.110	0	23,299-*	23,299	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
10/03/23 S	50,188	7.970	0	400,000 *	513,468	-113,468
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
10/31/23 R	3,100	7.920	0	24,555-*	24,555	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
11/30/23 R	3,064	8.290	0	25,401-*	25,401	

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) **REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE** **ELBIT SYSTEMS KOLLSMAN**
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
12/31/23 R	2,974	8.620	0	25,634-*	25,634	
ISSUE: 64122Q531 - NEUBERGER BERMAN GENES-R6 #3616						
10/03/23 S	88,676	56.410	0	5,002,221 *	5,016,183	-13,962
ISSUE: 72202L645 - PIMCO RAE EMERG MKT-INST #2143						
10/03/23 B	116,773	9.420	0	1,100,000-*	1,100,000	
ISSUE: 72202L645 - PIMCO RAE EMERG MKT-INST #2143						
12/26/23 R	4,828	9.830	0	47,458-*	47,458	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
06/16/23 R	493	122.380	0	60,310-*	60,310	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
09/15/23 R	244	118.910	0	29,038-*	29,038	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
10/03/23 B	16,053	112.130	0	1,800,000-*	1,800,000	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
12/15/23 R	934	121.250	0	113,236-*	113,236	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
12/28/23 B	604	124.270	0	75,000-*	75,000	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
06/28/23 R	226	365.250	0	82,588-*	82,588	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
08/24/23 S	2,322	366.060	0	850,000 *	439,586	410,414
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
09/27/23 R	208	356.720	0	74,260-*	74,260	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
10/03/23 S	8,781	353.040	0	3,100,000 *	1,667,855	1,432,145
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
12/27/23 R	737	394.390	0	290,743-*	290,743	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
06/16/23 R	558	26.340	0	14,692-*	14,692	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
09/15/23 R	840	25.460	0	21,379-*	21,379	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
10/03/23 S	104,720	24.500	0	2,565,637 *	2,902,538	-336,901
GRAND TOTAL			0	39,845,525	39,256,070	589,454

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) **REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE** **ELBIT SYSTEMS KOLLSMAN**
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

** = A party-in-interest as defined by ERISA

(ii) REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	SERIES / BY BROKER UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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*** NO TRANSACTIONS QUALIFIED ***

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
** ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL						
03/30/23 B	1	1.000	0	1-	1	
06/01/23 B	1,653,684	1.000	0	1,653,684-	1,653,684	
06/13/23 B	4,425	1.000	0	4,425-	4,425	
06/13/23 B	4,425	1.000	0	4,425-	4,425	
07/06/23 B	9,901	1.000	0	9,901-	9,901	
07/07/23 B	132	1.000	0	132-	132	
07/20/23 B	32	1.000	0	32-	32	
08/01/23 B	334	1.000	0	334-	334	
08/10/23 B	4	1.000	0	4-	4	
08/25/23 B	850,000	1.000	0	850,000-	850,000	
09/01/23 B	659	1.000	0	659-	659	
09/11/23 B	2,263	1.000	0	2,263-	2,263	
10/04/23 B	3,683,875	1.000	0	3,683,875-	3,683,875	
11/14/23 B	820	1.000	0	820-	820	
12/06/23 B	270	1.000	0	270-	270	
12/26/23 B	38,841	1.000	0	38,841-	38,841	
12/29/23 B	35,000	1.000	0	35,000-	35,000	
SUB-TOTAL OF BUYS # 17			0	6,284,666	6,284,666	
03/30/23 S	1	1.000	0	1 *	1	0
06/02/23 S	273,516	1.000	0	273,516 *	273,516	0
06/15/23 S	4,425	1.000	0	4,425 *	4,425	0
06/21/23 S	12,005	1.000	0	12,005 *	12,005	0
06/23/23 S	8,500	1.000	0	8,500 *	8,500	0
07/03/23 S	268,335	1.000	0	268,335 *	268,335	0
07/11/23 S	132	1.000	0	132 *	132	0
07/14/23 S	219	1.000	0	219 *	219	0
07/14/23 S	300	1.000	0	300 *	300	0
08/01/23 S	269,329	1.000	0	269,329 *	269,329	0
08/02/23 S	3,921	1.000	0	3,921 *	3,921	0
08/03/23 S	334	1.000	0	334 *	334	0
08/11/23 S	2	1.000	0	2 *	2	0
08/14/23 S	75	1.000	0	75 *	75	0
08/17/23 S	2,047	1.000	0	2,047 *	2,047	0

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
08/25/23 S	10,300	1.000	0	10,300 *	10,300	0
09/01/23 S	271,536	1.000	0	271,536 *	271,536	0
09/08/23 S	9,571	1.000	0	9,571 *	9,571	0
09/28/23 S	11,295	1.000	0	11,295 *	11,295	0
09/29/23 S	10,300	1.000	0	10,300 *	10,300	0
10/02/23 S	268,295	1.000	0	268,295 *	268,295	0
10/13/23 S	530,332	1.000	0	530,332 *	530,332	0
10/16/23 S	450	1.000	0	450 *	450	0
10/20/23 S	5,893	1.000	0	5,893 *	5,893	0
10/30/23 S	2,060	1.000	0	2,060 *	2,060	0
11/01/23 S	256,067	1.000	0	256,067 *	256,067	0
11/10/23 S	150	1.000	0	150 *	150	0
11/16/23 S	820	1.000	0	820 *	820	0
11/21/23 S	887	1.000	0	887 *	887	0
12/01/23 S	258,321	1.000	0	258,321 *	258,321	0
12/08/23 S	2,971,830	1.000	0	2,971,830 *	2,971,830	0
12/08/23 S	150	1.000	0	150 *	150	0
12/15/23 S	9,436	1.000	0	9,436 *	9,436	0
12/27/23 S	38,841	1.000	0	38,841 *	38,841	0
SUB-TOTAL OF SALES # 34			0	5,499,675	5,499,675	0
SUB-TOTAL			0	11,784,341	11,784,341	0
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST						
12/28/23 R	2,081	15.870	0	33,031-*	33,031	
SUB-TOTAL OF REINVS # 1			0	33,031	33,031	
10/03/23 B	76,923	14.300	0	1,100,000-*	1,100,000	
SUB-TOTAL OF BUYS # 1			0	1,100,000	1,100,000	
SUB-TOTAL			0	1,133,031	1,133,031	0
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
06/30/23 R	687	9.190	0	6,313-*	6,313	
07/31/23 R	863	9.230	0	7,964-*	7,964	
08/31/23 R	906	9.170	0	8,307-*	8,307	
09/30/23 R	851	9.050	0	7,701-*	7,701	

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
10/31/23 R	840	8.980	0	7,544-*	7,544	
11/30/23 R	821	9.200	0	7,558-*	7,558	
12/31/23 R	780	9.440	0	7,364-*	7,364	
SUB-TOTAL OF REINVS # 7			0	52,751	52,751	
10/03/23 S	11,136	8.980	0	100,000 *	112,194	-12,194
SUB-TOTAL OF SALES # 1			0	100,000	112,194	-12,194
SUB-TOTAL			0	152,751	164,945	-12,194
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
12/04/23 R	300	68.120	0	20,405-*	20,405	
SUB-TOTAL OF REINVS # 1			0	20,405	20,405	
10/03/23 B	33,184	64.790	0	2,150,000-*	2,150,000	
SUB-TOTAL OF BUYS # 1			0	2,150,000	2,150,000	
12/28/23 S	1,693	73.840	0	125,000 *	109,730	15,270
SUB-TOTAL OF SALES # 1			0	125,000	109,730	15,270
SUB-TOTAL			0	2,295,405	2,280,135	15,270
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487						
12/19/23 R	4,494	11.210	0	50,382-*	50,382	
SUB-TOTAL OF REINVS # 1			0	50,382	50,382	
10/03/23 B	238,327	10.280	0	2,450,000-*	2,450,000	
SUB-TOTAL OF BUYS # 1			0	2,450,000	2,450,000	
SUB-TOTAL			0	2,500,382	2,500,382	0

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
12/07/23 R	17,083	11.540	0	197,135-*	197,135	
SUB-TOTAL OF REINVS # 1			0	197,135	197,135	
10/03/23 B	184,867	11.630	0	2,150,000-*	2,150,000	
SUB-TOTAL OF BUYS # 1			0	2,150,000	2,150,000	
12/28/23 S	14,613	12.660	0	185,000 *	169,837	15,163
SUB-TOTAL OF SALES # 1			0	185,000	169,837	15,163
SUB-TOTAL			0	2,532,135	2,516,972	15,163
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361						
08/17/23 R	140	15.660	0	2,198-*	2,198	
SUB-TOTAL OF REINVS # 1			0	2,198	2,198	
10/03/23 S	170,954	15.010	0	2,566,018 *	3,170,810	-604,792
SUB-TOTAL OF SALES # 1			0	2,566,018	3,170,810	-604,792
SUB-TOTAL			0	2,568,216	3,173,008	-604,792
ISSUE: 524686318 - BRANDYWINEGLB-GLB OPP BD-IS #2266						
12/19/23 R	193	9.260	0	1,790-*	1,790	
SUB-TOTAL OF REINVS # 1			0	1,790	1,790	
SUB-TOTAL			0	1,790	1,790	0
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
06/29/23 R	2,103	10.180	0	21,409-*	21,409	
07/28/23 R	2,430	10.130	0	24,611-*	24,611	
08/30/23 R	2,651	10.030	0	26,586-*	26,586	

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
09/28/23 R	2,492	9.780	0	24,369-*	24,369	
10/30/23 R	2,829	9.610	0	27,189-*	27,189	
11/29/23 R	2,319	10.050	0	23,310-*	23,310	
12/15/23 R	2,965	10.320	0	30,598-*	30,598	
SUB-TOTAL OF REINVS # 7			0	178,072	178,072	
12/28/23 B	19,212	10.410	0	200,000-*	200,000	
SUB-TOTAL OF BUYS # 1			0	200,000	200,000	
10/03/23 S	72,464	9.660	0	700,000 *	902,220	-202,220
SUB-TOTAL OF SALES # 1			0	700,000	902,220	-202,220
SUB-TOTAL			0	1,078,072	1,280,292	-202,220
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
06/30/23 R	2,410	8.500	0	20,486-*	20,486	
07/31/23 R	3,065	8.480	0	25,988-*	25,988	
08/31/23 R	3,275	8.390	0	27,477-*	27,477	
09/30/23 R	2,873	8.110	0	23,299-*	23,299	
10/31/23 R	3,100	7.920	0	24,555-*	24,555	
11/30/23 R	3,064	8.290	0	25,401-*	25,401	
12/31/23 R	2,974	8.620	0	25,634-*	25,634	
SUB-TOTAL OF REINVS # 7			0	172,840	172,840	
10/03/23 S	50,188	7.970	0	400,000 *	513,468	-113,468
SUB-TOTAL OF SALES # 1			0	400,000	513,468	-113,468
SUB-TOTAL			0	572,840	686,308	-113,468
ISSUE: 64122Q531 - NEUBERGER BERMAN GENES-R6 #3616						
10/03/23 S	88,676	56.410	0	5,002,221 *	5,016,183	-13,962
SUB-TOTAL OF SALES # 1			0	5,002,221	5,016,183	-13,962

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
SUB-TOTAL			0	5,002,221	5,016,183	-13,962
ISSUE: 72202L645 - PIMCO RAE EMERG MRKT-INST #2143						
12/26/23 R	4,828	9.830	0	47,458-*	47,458	
SUB-TOTAL OF REINVS # 1			0	47,458	47,458	
10/03/23 B	116,773	9.420	0	1,100,000-*	1,100,000	
SUB-TOTAL OF BUYS # 1			0	1,100,000	1,100,000	
SUB-TOTAL			0	1,147,458	1,147,458	0
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
06/16/23 R	493	122.380	0	60,310-*	60,310	
09/15/23 R	244	118.910	0	29,038-*	29,038	
12/15/23 R	934	121.250	0	113,236-*	113,236	
SUB-TOTAL OF REINVS # 3			0	202,584	202,584	
10/03/23 B	16,053	112.130	0	1,800,000-*	1,800,000	
12/28/23 B	604	124.270	0	75,000-*	75,000	
SUB-TOTAL OF BUYS # 2			0	1,875,000	1,875,000	
SUB-TOTAL			0	2,077,584	2,077,584	0
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
06/28/23 R	226	365.250	0	82,588-*	82,588	
09/27/23 R	208	356.720	0	74,260-*	74,260	
12/27/23 R	737	394.390	0	290,743-*	290,743	
SUB-TOTAL OF REINVS # 3			0	447,591	447,591	
08/24/23 S	2,322	366.060	0	850,000 *	439,586	410,414
10/03/23 S	8,781	353.040	0	3,100,000 *	1,667,855	1,432,145

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

ELBIT SYSTEMS KOLLSMAN

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
			-----	-----	-----	-----
	SUB-TOTAL OF SALES # 2		0	3,950,000	2,107,441	1,842,559
			-----	-----	-----	-----
	SUB-TOTAL		0	4,397,591	2,555,032	1,842,559
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
06/16/23 R	558	26.340	0	14,692-*	14,692	
09/15/23 R	840	25.460	0	21,379-*	21,379	
			-----	-----	-----	
	SUB-TOTAL OF REINVS # 2		0	36,071	36,071	
10/03/23 S	104,720	24.500	0	2,565,637 *	2,902,538	-336,901
			-----	-----	-----	
	SUB-TOTAL OF SALES # 1		0	2,565,637	2,902,538	-336,901
			-----	-----	-----	
	SUB-TOTAL		0	2,601,708	2,938,609	-336,901
			-----	-----	-----	
	GRAND TOTAL		0	39,845,525	39,256,070	589,454

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE

B = BUY TRANSACTION

S = SELL TRANSACTION

R = REINVESTMENT TRANSACTION

** = A party-in-interest as defined by ERISA

(iv) REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	SINGLE / BY BROKER UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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*** NO TRANSACTIONS QUALIFIED ***

5500 Supplemental Schedules

1 JAN 23 - 31 DEC 23

Account number 2240633
Account Name ZZKOLLSMAN INC - FUNDS

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

◆ 5% Report - Part A

(i) Single Transaction in Excess of 5%

(a)	(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
			Purchase Price	Selling Price		Expenses incurred with transaction	Cost of asset	Current value of asset on transaction date	

THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

(a) Identity of party involved

(b) Description of asset (including interest rate and maturity in case of loan)

5500 Supplemental Schedules

1 JAN 23 - 31 DEC 23

Account number 2240633
Account Name ZZKOLLSMAN INC - FUNDS

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

◆ 5% Report - Part B

(ii) Series of Non-Security Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
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THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

5500 Supplemental Schedules

1 JAN 23 - 31 DEC 23

Account number 2240633
Account Name ZZKOLLSMAN INC - FUNDS

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

◆ 5% Report - Part C Summary

(iii) Series of Transactions by Issue in Excess of 5%

Security Description / Asset ID		Number of Transactions	Transaction Aggregate		Lease Rental	Expenses Incurred	Cost of Asset	Current Value of Asset on Transaction
			Acquisition Price	Disposition Price				
NT COLLECTIVE SHORT TERM INVT FD CUSIP: 66586U452	Total acquisitions	11	2,380,103.40			0.00	2,380,103.40	2,380.103.40
	Total dispositions	18		3,029,378.11		0.00	3,029,378.11	3,029.378.11

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

5500 Supplemental Schedules

1 JAN 23 - 31 DEC 23

Account number 2240633
Account Name ZZKOLLSMAN INC - FUNDS

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

◆ 5% Report - Part D

(iv) Series of Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
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THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

Plan Name: Kollsman, Inc. Defined Benefit Retirement Plan
EIN: 51-0345236
Plan Number: 002

Schedule SB, Line 26a -- Schedule of Active Participant Data																				
YEARS OF CREDITED SERVICE																				
Attained Age	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 & up	
	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*	No.	Avg. Comp*
Under 25	0		0		0		0		0		0		0		0		0		0	
25 to 29	0		0		0		0		0		0		0		0		0		0	
30 to 34	0		0		0		0		0		0		0		0		0		0	
35 to 39	0		0		0		1		2		0		0		0		0		0	
40 to 44	0		0		0		2		2		1		0		0		0		0	
45 to 49	0		0		0		1		9		0		0		0		0		0	
50 to 54	0		0		0		3		5		3		2		0		0		0	
55 to 59	0		0		0		4		5		1		1		1		5		6	
60 to 64	0		0		0		2		7		3		2		1		5		16	
65 to 69	0		0		0		1		2		1		1		1		2		7	
70 & up	0		0		0		0		2		0		0		0		1		2	
Total	0		0		0		14		34		9		6		3		13		31	

*The plan is "hard frozen", and average annual accrued benefits are reported in lieu of average annual compensation.

SECTION XII

ACTUARIAL COST METHODS

Traditional Unit Credit (TUC)

The actuarial cost method used in the development of the minimum contribution was the unit credit cost method.

The normal cost is the sum of all the individual normal costs for each participant. For active participants, the individual normal cost is the present value of the benefit earned during the year being valued. For active participants whose credited service equals or exceeds the plan maximum, if any, and for non-active participants, the normal cost is zero.

The actuarial accrued liability is the sum of the individual accrued liabilities for all participants. The individual accrued liability for an active participant is the present value of the accrued benefit as of the valuation date. The unfunded liability is the actuarial accrued liability less the valuation assets.

The total annual cost of the plan is the normal cost plus an amount to amortize the shortfall amount.

Projected Unit Credit (PUC)

The actuarial cost method used in the development of the maximum contribution was the projected unit credit cost method.

Under this method, the normal cost is the sum of the individual normal costs for all participants. For an active participant, the individual normal cost is the present value at the current age of the projected benefit at the assumed retirement age, based on the actuarial assumptions, divided by the participant's expected years of credited service at that age. For a non-active participant, the normal cost is zero.

The actuarial accrued liability is the sum of the individual accrued liabilities for all plan participants. For an active participant, the individual accrued liability is the product of the normal cost and the total years of credited service at the current age. For non-active participants, the individual accrued liability is the present value at the current age of future benefits. The unfunded actuarial accrued liability equals the actuarial accrued liability less the valuation assets.

SECTION XIII ACTUARIAL METHODS AND ASSUMPTIONS

A summary of the actuarial assumptions used in the valuation is presented below:

Valuation Assets

The Actuarial Value of Assets equals the Market Value of Assets

IRS Required Discount Rates

Minimum Required Contribution (as adjusted for MAP-21/HATFA/ARPA)

1. Segment Rate 1 for Years 1 Through 5	4.75%
2. Segment Rate 2 for Years 6 Through 20	5.00%
3. Segment Rate 3 for Years After 20	5.74%

Maximum Deductible Contribution

1. Segment Rate 1 for Years 1 Through 5	1.41%
2. Segment Rate 2 for Years 6 Through 20	3.09%
3. Segment Rate 3 for Years After 20	3.58%

Plan Effective Interest Rate

5.22%

Financial Accounting Standards Board ASC 960 Discount Rates and Mortality

Discount Rates

1. Pre-Retirement Discount Rate:	6.75%
2. Post-Retirement Discount Rate:	6.75%

Mortality Tables

1. Employee Mortality - Male	PRI-2012 EE M BC/WC 40/60 Projected Generationally in 2D with Scale MP-2021
Employee Mortality - Female	PRI-2012 EE F BC/WC 40/60 Projected Generationally in 2D with Scale MP-2021
2. Healthy Annuitant Mortality - Male	PRI-2012 RET M B/W 40/60 Projected Generationally in 2D with Scale MP-2021
Healthy Annuitant Mortality - Female	PRI-2012 RET F B/C 40/60 Projected Generationally in 2D with Scale MP-2021
3. Disabled Annuitant Mortality - Male	Pri-2012(TDS) Male Disabled Annuitant Projected Generationally in 2D with Scale MP-2021
Disabled Annuitant Mortality - Female	Pri-2012(TDS) Female Disabled Annuitant Projected Generationally in 2D with Scale MP-2021
4. Beneficiary Mortality - Male	PRI-2012 CONT M B/W 40/60 Projected Generationally in 2D with Scale MP-2021
Beneficiary Mortality - Female	PRI-2012 CONT F B/C 40/60 Projected Generationally in 2D with Scale MP-2021

SECTION XIII
ACTUARIAL METHODS AND ASSUMPTIONS (cont'd)

Salary Scale Salary increases were not assumed in the valuation.

Taxable Wage Base Increase Assumption No TWB increase was assumed in the valuation.

Social Security CPI Assumption No CPI increase was assumed in the valuation.

Plan Benefit COLA Assumption No COLA increase was assumed in the valuation.

Retirement Rates Retirement Rates were assumed in the valuation.

The following are sample retirement rates for various ages with 100% assumed to retire at age 71

	Male	Female
55 - 61	0.010000	0.010000
62	0.060000	0.060000
63	0.060000	0.060000
64	0.060000	0.060000
65	0.550000	0.550000
66	0.350000	0.350000
67	0.400000	0.400000
68	0.500000	0.500000
69	0.300000	0.300000
70	0.100000	0.100000
71	1.000000	1.000000

Termination Rates Termination Rates were assumed in the valuation.

The following are sample termination rates for various ages that apply to new hires:

	Male	Female
20	0.174600	0.174600
25	0.185100	0.185100
30	0.121900	0.121900
35	0.087800	0.087800
40	0.070000	0.070000
45	0.062100	0.062100
50	0.056300	0.056300
55	0.029200	0.029200
60	0.022000	0.022000

Disability Rates Disability Rates were not assumed in the valuation.

SECTION XIII
ACTUARIAL METHODS AND ASSUMPTIONS (cont'd)

Pre-Retirement Mortality Rates: Pre-Retirement Mortality was assumed in the valuation.

Male: 2023 IRS Non-Annuitant Male

Female: 2023 IRS Non-Annuitant Female

The following are sample pre-retirement mortality rates for various ages:

	Male	Female
20	0.000194	0.000082
25	0.000276	0.000101
30	0.000321	0.000143
35	0.000436	0.000217
40	0.000542	0.000299
45	0.000750	0.000423
50	0.001169	0.000654
55	0.001898	0.001100
60	0.003483	0.001865
65	0.006759	0.002929
70	0.01174	0.005055
75	0.020625	0.009171

Post-Retirement Mortality Rates: Post-Retirement Mortality was assumed in the valuation.

Male: 2023 IRS Annuitant Male

Female: 2023 IRS Annuitant Female

The following are sample post-retirement mortality rates for various ages:

	Male	Female
55	0.003903	0.002380
60	0.005773	0.003965
65	0.008992	0.006378
70	0.014211	0.010311
75	0.023860	0.017832
80	0.042409	0.032611
85	0.076650	0.061163
90	0.139404	0.113553
95	0.222904	0.189259
100	0.318715	0.282507
105	0.417508	0.383361
110	0.496973	0.469951

SECTION XIII
ACTUARIAL METHODS AND ASSUMPTIONS (cont'd)

Post-Disablement Mortality Rates Post-Disablement Mortality was assumed in the valuation.

Male: 2023 IRS Annuitant Male

Female: 2023 IRS Annuitant Female

The following are sample post-disablement mortality rates for various ages:

	Male	Female
55	0.003903	0.002380
60	0.005773	0.003965
65	0.008992	0.006378
70	0.014211	0.010311
75	0.023860	0.017832
80	0.042409	0.032611
85	0.076650	0.061163
90	0.139404	0.113553
95	0.222904	0.189259
100	0.318715	0.282507
105	0.417508	0.383361
110	0.496973	0.469951

Administrative Expenses \$ 598,274

Percent Married 80% of males and 70% of females are assumed to be married.

Age of Spouse Spouses of Males are assumed to be 3 years younger than the participant.
 Spouses of Females are assumed to be 3 years older than the participant.

SECTION XIII (Cont.)

SELECTION OF ACTUARIAL ASSUMPTIONS

Assumption		Entity Who Selects Assumption	Basis for Assumption Selection	Change in Assumption
Segment Interest Rates for Minimum Contribution	Segment 1: 4.75% Segment 2: 5.00% Segment 3: 5.74%	Prescribed by Internal Revenue Service (IRC Sec. 430(h)(2)(C))	The Funding Target Liability for Minimum Contribution is determined using three 24-month average interest rates ("segment rates"), each of which applies to cash flows during specified periods. The Plan Sponsor has elected a 4 month look back for determining these rates each Plan Year. These segment rates are adjusted by the applicable percentage of the 25-year average segment rates.	The segment 1, segment 2 and segment 3 interest rates changed from 4.75%, 5.18%, and 5.92%, respectively as of the prior measurement date, January 1, 2022, to reflect the current prescribed rates. This change increased the Funding Target Liability for Minimum Contribution as of the current measurement date, January 1, 2023, by 1.68%.
Segment Interest Rates for Maximum Contribution	Segment 1: 1.41% Segment 2: 3.09% Segment 3: 3.58%	Prescribed by Internal Revenue Service (IRC Sec. 404(o)(6))	The Funding Target Liability for Maximum Contribution is determined using three 24-month average interest rates ("segment rates"), each of which applies to cash flows during specified periods. The Plan Sponsor has elected a 4 month look back for determining these rates each Plan Year.	The segment 1, segment 2 and segment 3 interest rates changed from 1.07%, 2.68%, and 3.36%, respectively as of the prior measurement date, January 1, 2022, to reflect the current prescribed rates. This change decreased the Funding Target Liability for Maximum Contribution as of the current measurement date, January 1, 2023, by 3.79%.
ASC 960 Interest Rate	6.75%	Kollsman, Inc.	The ASC 960 interest rate is developed based on the allocation of the Plan's assets by investment class and the capital market outlook for each investment class. This information is provided by the Plan's investment advisor.	None
Inflation Rate	3.00%	The Angell Pension Group, Inc.	Long-term CPI-U experience.	None
Salary Scale	N/A	The Angell Pension Group, Inc.	Plan benefits are frozen and do not depend on the salary scale.	None
Taxable Wage Base Increase	N/A	The Angell Pension Group, Inc.	Plan benefits are frozen and do not depend on the wage base increase.	None
IRC 415 and 401(a)(17) Limit Projection	N/A	N/A	Projected increases to benefit and pay limits are not applicable under the Actuarial Funding Method used for the Funding Target Liability and the ASC 960 Actuarial Present Value of Accrued Benefits.	None
Pre-Retirement Mortality	2023 IRS Non-annuitant Mortality (M/F)	Prescribed by Internal Revenue Service (IRC Sec. 430(h)(3))	The IRS prescribes by regulation mortality tables to be used in determining minimum and maximum contributions. Those tables are based on the actual experience of pension plans and projected trends in that experience. Current prescribed tables are based on the RP-2014 Mortality Tables Report, adjusted for mortality improvement using generational improvement scale MP-2021.	The mortality tables changed from the 2022 IRS Non-annuitant Mortality (M/F) tables as of the prior measurement date, January 1, 2022, to reflect the current prescribed tables. This change, together with the change in post-retirement mortality, decreased the Funding Target Liability for Minimum Contribution as of the current measurement date, January 1, 2023, by 0.39%.

SECTION XIII (Cont.)

SELECTION OF ACTUARIAL ASSUMPTIONS

Assumption		Entity Who Selects Assumption	Basis for Assumption Selection	Change in Assumption
Post-Retirement Mortality	2023 IRS Annuitant Mortality (M/F)	Prescribed by Internal Revenue Service (IRC Sec. 430(h)(3))	The IRS prescribes by regulation mortality tables to be used in determining minimum and maximum contributions. Those tables are based on the actual experience of pension plans and projected trends in that experience. Current prescribed tables are based on the RP-2014 Mortality Tables Report, adjusted for mortality improvement using generational improvement scale MP-2021.	The mortality tables changed from the 2022 IRS Annuitant Mortality (M/F) tables as of the prior measurement date, January 1, 2022, to reflect the current prescribed tables. This change, together with the change in pre-retirement mortality, decreased the Funding Target Liability for Minimum Contribution as of the current measurement date, January 1, 2023, by 0.39%.
Pre-Retirement Mortality for ASC 960	Pri-2012 Employee with MP-2021 Generational Projection (M/F); base tables are blended 60% White Collar and 40% Blue Collar	Kollsman, Inc.	The Society of Actuaries published a study of retirement experience in October, 2019. The Pri-2012 tables presented in the study represent the most current and complete benchmarks of U.S. private pension plan mortality experience. These tables include generational projections of mortality improvement.	None
Post-Retirement Mortality for ASC 960	Pri-2012 Healthy Annuitant and Contingent Survivor with MP-2021 Generational Projection (M/F); base tables are blended 60% White Collar and 40% Blue Collar	Kollsman, Inc.	The Society of Actuaries published a study of retirement experience in October, 2019. The Pri-2012 tables presented in the study represent the most current and complete benchmarks of U.S. private pension plan mortality experience. These tables include generational projections of mortality improvement.	None
Disability Mortality	2023 IRS Annuitant Mortality (M/F)	The Angell Pension Group, Inc.	The Disability Mortality table is the same as the Post-Retirement Mortality Table.	The mortality table changed from the 2022 IRS Annuitant Mortality (M/F) tables as of the prior measurement date, January 1, 2022, to reflect the current prescribed tables. This change had no impact on plan liabilities as of the current measurement date, January 1, 2023, because there are currently no disabled participants.
Disability Rates	None	The Angell Pension Group, Inc.	The incidence of disability under the Plan is negligible.	None
Withdrawal Rates	2003 Society of Actuaries Pension Plan Turnover - Basic Age Table	The Angell Pension Group, Inc.	Because of the relatively small number of Plan participants, the withdrawal experience under the Plan is not credible for establishing Plan-specific withdrawal rates. The Society of Actuaries table was developed for such plans, and a review of experience under the Plan indicated that this table is a good estimate of future experience under the Plan.	None

SECTION XIII (Cont.)

SELECTION OF ACTUARIAL ASSUMPTIONS

Assumption		Entity Who Selects Assumption	Basis for Assumption Selection	Change in Assumption
Retirement Rates	Age Rate 55-61 1% 62-64 6% 65 55% 66 35% 67 40% 68 50% 69 30% 70 10% 71+ 100%	The Angell Pension Group, Inc.	This assumption was set based on a review of experience under the Plan.	None
Administrative Expenses	Equals the amount of Plan-related expenses paid from Plan assets in the prior Plan year.	The Angell Pension Group, Inc.	Internal Revenue Service regulations require the Target Normal Cost to be increased by the amount of Plan-related expenses expected to be paid from Plan assets during the Plan year. Our best estimate of these expenses is the actual amount of Plan-related expenses paid from Plan assets in the prior Plan year.	None
Percent Married	80% of males and 70% of females are assumed to be married.	The Angell Pension Group, Inc.	This assumption was set based on a review of experience under the Plan.	None
Age of Spouse	The female spouse is assumed to be 3 years younger than the male spouse.	The Angell Pension Group, Inc.	This assumption was set based on a review of experience under the Plan and general experience from similarly situated plans.	None

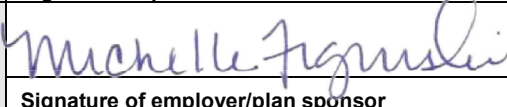
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
	☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report
	☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. ▶	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program
	☐ special extension (enter description) _____
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶	☐

Part II	Basic Plan Information—enter all requested information
1a Name of plan KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	1b Three-digit plan number (PN) ▶ 002
	1c Effective date of plan 01/01/1996
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) ELBITAMERICA, INC. 4700 MARINE CREEK PARKWAY FORT WORTH TX 76179	2b Employer Identification Number (EIN) 51-0345236
	2c Plan Sponsor's telephone number 817-234-6600
	2d Business code (see instructions) 333310

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		10/11/2024	Craig Collins
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		10/11/2024	Michelle Figurski
	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 (2023)
v. 2300728

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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 KOLLSMAN, INC. c Plan Name KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	4b EIN 02-0485231 4d PN 002
5 Total number of participants at the beginning of the plan year	5 709
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 110 6a(2) 97 6b 376 6c 101 6d 574 6e 60 6f 634 6g(1) 6g(2) 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 3F 3H 1I 3D	

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
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached _____
- (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 2023 Form M-1 annual report. If the plan was not required to file the 2023 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 _____

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023				ELBIT SYSTEMS KOLLSMAN	
(a) DATE BOUGHT / SOLD	(b) SHARES/ PAR VALUE	(f) EXPENSE INCURRED	(c), (d), (h) PRINCIPAL CASH	(g) TRANSACTION COST	(i) REALIZED GAIN/LOSS
Identity of party involved	Description of asset (including interest rate and maturity in case of loan)	UNIT PRICE	Purchase price, Selling price, and Current value of assets on transaction date	Cost of assets	Net gain (loss)
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
03/30/23 B	1	1.000	1 -*	1	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
03/30/23 S	1	1.000	1 *	1	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/01/23 B	1,653,684	1.000	1,653,684 -*	1,653,684	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/02/23 S	273,516	1.000	273,516 *	273,516	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/13/23 B	4,425	1.000	4,425 -*	4,425	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/13/23 B	4,425	1.000	4,425 -*	4,425	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/15/23 S	4,425	1.000	4,425 *	4,425	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/21/23 S	12,005	1.000	12,005 *	12,005	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
06/23/23 S	8,500	1.000	8,500 *	8,500	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/03/23 S	268,335	1.000	268,335 *	268,335	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/06/23 B	9,901	1.000	9,901 -*	9,901	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/07/23 B	132	1.000	132 -*	132	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/11/23 S	132	1.000	132 *	132	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/14/23 S	219	1.000	219 *	219	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/14/23 S	300	1.000	300 *	300	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
07/20/23 B	32	1.000	32 -*	32	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
08/01/23 S	269,329	1.000	269,329 *	269,329	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
08/01/23 B	334	1.000	334 -*	334	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **			
08/02/23 S	3,921	1.000	3,921 *	3,921	0

Column (e) is not applicable

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/03/23 S	334	1.000	0	334 *	334	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/10/23 B	4	1.000	0	4 -*	4	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/11/23 S	2	1.000	0	2 *	2	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/14/23 S	75	1.000	0	75 *	75	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/17/23 S	2,047	1.000	0	2,047 *	2,047	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/25/23 B	850,000	1.000	0	850,000 -*	850,000	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
08/25/23 S	10,300	1.000	0	10,300 *	10,300	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/01/23 S	271,536	1.000	0	271,536 *	271,536	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/01/23 B	659	1.000	0	659 -*	659	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/08/23 S	9,571	1.000	0	9,571 *	9,571	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/11/23 B	2,263	1.000	0	2,263 -*	2,263	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/28/23 S	11,295	1.000	0	11,295 *	11,295	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
09/29/23 S	10,300	1.000	0	10,300 *	10,300	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/02/23 S	268,295	1.000	0	268,295 *	268,295	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/04/23 B	3,683,875	1.000	0	3,683,875 -*	3,683,875	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/13/23 S	530,332	1.000	0	530,332 *	530,332	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/16/23 S	450	1.000	0	450 *	450	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/20/23 S	5,893	1.000	0	5,893 *	5,893	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
10/30/23 S	2,060	1.000	0	2,060 *	2,060	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
11/01/23 S	256,067	1.000	0	256,067 *	256,067	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
11/10/23 S	150	1.000	0	150 *	150	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
11/14/23 B	820	1.000	0	820 -*	820	
ISSUE: VP4580008 - PRINCIPAL GOVT MM		INSTL **				
11/16/23 S	820	1.000	0	820 *	820	0

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
11/21/23 S	887	1.000	0	887 *	887	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/01/23 S	258,321	1.000	0	258,321 *	258,321	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/06/23 B	270	1.000	0	270--*	270	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/08/23 S	2,971,830	1.000	0	2,971,830 *	2,971,830	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/08/23 S	150	1.000	0	150 *	150	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/15/23 S	9,436	1.000	0	9,436 *	9,436	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/26/23 B	38,841	1.000	0	38,841--*	38,841	
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/27/23 S	38,841	1.000	0	38,841 *	38,841	0
ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL **						
12/29/23 B	35,000	1.000	0	35,000--*	35,000	
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST						
10/03/23 B	76,923	14.300	0	1,100,000--*	1,100,000	
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST						
12/28/23 R	2,081	15.870	0	33,031--*	33,031	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
06/30/23 R	687	9.190	0	6,313--*	6,313	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
07/31/23 R	863	9.230	0	7,964--*	7,964	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
08/31/23 R	906	9.170	0	8,307--*	8,307	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
09/30/23 R	851	9.050	0	7,701--*	7,701	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
10/03/23 S	11,136	8.980	0	100,000 *	112,194	-12,194
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
10/31/23 R	840	8.980	0	7,544--*	7,544	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
11/30/23 R	821	9.200	0	7,558--*	7,558	
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944						
12/31/23 R	780	9.440	0	7,364--*	7,364	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
10/03/23 B	33,184	64.790	0	2,150,000--*	2,150,000	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
12/04/23 R	300	68.120	0	20,405--*	20,405	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST						
12/28/23 S	1,693	73.840	0	125,000 *	109,730	15,270
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487						
10/03/23 B	238,327	10.280	0	2,450,000--*	2,450,000	

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487						
12/19/23 R	4,494	11.210	0	50,382-*	50,382	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
10/03/23 B	184,867	11.630	0	2,150,000-*	2,150,000	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
12/07/23 R	17,083	11.540	0	197,135-*	197,135	
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131						
12/28/23 S	14,613	12.660	0	185,000 *	169,837	15,163
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361						
08/17/23 R	140	15.660	0	2,198-*	2,198	
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361						
10/03/23 S	170,954	15.010	0	2,566,018 *	3,170,810	-604,792
ISSUE: 524686318 - BRANDYWINEGLB-GLB OPP BD-IS #2266						
12/19/23 R	193	9.260	0	1,790-*	1,790	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
06/29/23 R	2,103	10.180	0	21,409-*	21,409	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
07/28/23 R	2,430	10.130	0	24,611-*	24,611	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
08/30/23 R	2,651	10.030	0	26,586-*	26,586	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
09/28/23 R	2,492	9.780	0	24,369-*	24,369	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
10/03/23 S	72,464	9.660	0	700,000 *	902,220	-202,220
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
10/30/23 R	2,829	9.610	0	27,189-*	27,189	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
11/29/23 R	2,319	10.050	0	23,310-*	23,310	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
12/15/23 R	2,965	10.320	0	30,598-*	30,598	
ISSUE: 543495105 - LOOMIS INVEST GR FIXED INC-I #1181						
12/28/23 B	19,212	10.410	0	200,000-*	200,000	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
06/30/23 R	2,410	8.500	0	20,486-*	20,486	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
07/31/23 R	3,065	8.480	0	25,988-*	25,988	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
08/31/23 R	3,275	8.390	0	27,477-*	27,477	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
09/30/23 R	2,873	8.110	0	23,299-*	23,299	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
10/03/23 S	50,188	7.970	0	400,000 *	513,468	-113,468
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
10/31/23 R	3,100	7.920	0	24,555-*	24,555	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
11/30/23 R	3,064	8.290	0	25,401-*	25,401	

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712						
12/31/23 R	2,974	8.620	0	25,634*	25,634	
ISSUE: 641220531 - NEUBERGER BERMAN GENES-R6 #3616						
10/03/23 S	88,676	56.410	0	5,002,221 *	5,016,183	-13,962
ISSUE: 722021645 - PIMCO RAE EMERG MKT-INST #2143						
10/03/23 B	116,773	9.420	0	1,100,000*	1,100,000	
ISSUE: 722021645 - PIMCO RAE EMERG MKT-INST #2143						
12/26/23 R	4,828	9.830	0	47,458*	47,458	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
06/16/23 R	493	122.380	0	60,310*	60,310	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
09/15/23 R	244	118.910	0	29,038*	29,038	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
10/03/23 B	16,053	112.130	0	1,800,000*	1,800,000	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
12/15/23 R	934	121.250	0	113,236*	113,236	
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869						
12/28/23 B	604	124.270	0	75,000*	75,000	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
06/28/23 R	226	365.250	0	82,588*	82,588	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
08/24/23 S	2,322	366.060	0	850,000 *	439,586	410,414
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
09/27/23 R	208	356.720	0	74,260*	74,260	
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
10/03/23 S	8,781	353.040	0	3,100,000 *	1,667,855	1,432,145
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94						
12/27/23 R	737	394.390	0	290,743*	290,743	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
06/16/23 R	558	26.340	0	14,692*	14,692	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
09/15/23 R	840	25.460	0	21,379*	21,379	
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239						
10/03/23 S	104,720	24.500	0	2,565,637 *	2,902,538	-336,901
GRAND TOTAL			0	39,845,525	39,256,070	589,454

(i) REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
-----	-----	-----	-----	-----	-----	-----

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION
** = A party-in-interest as defined by ERISA

(ii) REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD -----	SERIES / BY BROKER			PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----			

*** NO TRANSACTIONS QUALIFIED ***

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE			PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED				
** ISSUE: VP4580008 - PRINCIPAL GOVT MM INSTL							
03/30/23 B	1	1.000	0	1--		1	
06/01/23 B	1,653,684	1.000	0	1,653,684--	1,653,684	1,653,684	
06/13/23 B	4,425	1.000	0	4,425--	4,425	4,425	
06/13/23 B	4,425	1.000	0	4,425--	4,425	4,425	
07/06/23 B	9,901	1.000	0	9,901--	9,901	9,901	
07/07/23 B	132	1.000	0	132--	132	132	
07/20/23 B	32	1.000	0	32--	32	32	
08/01/23 B	334	1.000	0	334--	334	334	
08/10/23 B	4	1.000	0	4--		4	
08/25/23 B	850,000	1.000	0	850,000--	850,000	850,000	
09/01/23 B	659	1.000	0	659--	659	659	
09/11/23 B	2,263	1.000	0	2,263--	2,263	2,263	
10/04/23 B	3,683,875	1.000	0	3,683,875--	3,683,875	3,683,875	
11/14/23 B	820	1.000	0	820--	820	820	
12/06/23 B	270	1.000	0	270--	270	270	
12/26/23 B	38,841	1.000	0	38,841--	38,841	38,841	
12/29/23 B	35,000	1.000	0	35,000--	35,000	35,000	
SUB-TOTAL OF BUYS		# 17	0		6,284,666	6,284,666	
03/30/23 S	1	1.000	0	1 *		1	0
06/02/23 S	273,516	1.000	0	273,516 *	273,516	273,516	0
06/15/23 S	4,425	1.000	0	4,425 *	4,425	4,425	0
06/21/23 S	12,005	1.000	0	12,005 *	12,005	12,005	0
06/23/23 S	8,500	1.000	0	8,500 *	8,500	8,500	0
07/03/23 S	268,335	1.000	0	268,335 *	268,335	268,335	0
07/11/23 S	132	1.000	0	132 *	132	132	0
07/14/23 S	219	1.000	0	219 *	219	219	0
07/14/23 S	300	1.000	0	300 *	300	300	0
08/01/23 S	269,329	1.000	0	269,329 *	269,329	269,329	0
08/02/23 S	3,921	1.000	0	3,921 *	3,921	3,921	0
08/03/23 S	334	1.000	0	334 *	334	334	0
08/11/23 S	2	1.000	0	2 *	2	2	0
08/14/23 S	75	1.000	0	75 *	75	75	0
08/17/23 S	2,047	1.000	0	2,047 *	2,047	2,047	0

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SERIES / BY ISSUE					TRANSACTION COST	REALIZED GAIN/LOSS
	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH			
08/25/23 S	10,300	1.000	0	10,300 *	10,300	0	0
09/01/23 S	271,536	1.000	0	271,536 *	271,536	0	0
09/08/23 S	9,571	1.000	0	9,571 *	9,571	0	0
09/28/23 S	11,295	1.000	0	11,295 *	11,295	0	0
09/29/23 S	10,300	1.000	0	10,300 *	10,300	0	0
10/02/23 S	268,295	1.000	0	268,295 *	268,295	0	0
10/13/23 S	530,332	1.000	0	530,332 *	530,332	0	0
10/16/23 S	450	1.000	0	450 *	450	0	0
10/20/23 S	5,893	1.000	0	5,893 *	5,893	0	0
10/30/23 S	2,060	1.000	0	2,060 *	2,060	0	0
11/01/23 S	256,067	1.000	0	256,067 *	256,067	0	0
11/10/23 S	150	1.000	0	150 *	150	0	0
11/16/23 S	820	1.000	0	820 *	820	0	0
11/21/23 S	887	1.000	0	887 *	887	0	0
12/01/23 S	258,321	1.000	0	258,321 *	258,321	0	0
12/08/23 S	2,971,830	1.000	0	2,971,830 *	2,971,830	0	0
12/08/23 S	150	1.000	0	150 *	150	0	0
12/15/23 S	9,436	1.000	0	9,436 *	9,436	0	0
12/27/23 S	38,841	1.000	0	38,841 *	38,841	0	0
SUB-TOTAL OF SALES		# 34	0	5,499,675	5,499,675	0	0
SUB-TOTAL			0	11,784,341	11,784,341	0	0
ISSUE: 00771X419 - GQG PART EMERG MKTS EQ-INST							
12/28/23 R	2,081	15.870	0	33,031--*	33,031		
SUB-TOTAL OF REINVS		# 1	0	33,031	33,031		
10/03/23 B	76,923	14.300	0	1,100,000--*	1,100,000		
SUB-TOTAL OF BUYS		# 1	0	1,100,000	1,100,000		
SUB-TOTAL			0	1,133,031	1,133,031	0	0
ISSUE: 09260B374 - BLACKROCK STRAT INC OPP-K #1944							
06/30/23 R	687	9.190	0	6,313--*	6,313		
07/31/23 R	863	9.230	0	7,964--*	7,964		
08/31/23 R	906	9.170	0	8,307--*	8,307		
09/30/23 R	851	9.050	0	7,701--*	7,701		

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH			
10/31/23 R	840	8.980	0	7,544-*	7,544		
11/30/23 R	821	9.200	0	7,558-*	7,558		
12/31/23 R	780	9.440	0	7,364-*	7,364		
SUB-TOTAL OF REINVS # 7			0	52,751	52,751		
10/03/23 S	11,136	8.980	0	100,000 *	112,194	-12,194	
SUB-TOTAL OF SALES # 1			0	100,000	112,194	-12,194	
SUB-TOTAL			0	152,751	164,945	-12,194	
ISSUE: 207019704 - CONESTOGA SMALL CAP-INST							
12/04/23 R	300	68.120	0	20,405-*	20,405		
SUB-TOTAL OF REINVS # 1			0	20,405	20,405		
10/03/23 B	33,184	64.790	0	2,150,000-*	2,150,000		
SUB-TOTAL OF BUYS # 1			0	2,150,000	2,150,000		
12/28/23 S	1,693	73.840	0	125,000 *	109,730	15,270	
SUB-TOTAL OF SALES # 1			0	125,000	109,730	15,270	
SUB-TOTAL			0	2,295,405	2,280,135	15,270	
ISSUE: 25159K705 - DWS RREEF REAL ASSETS-INST #1487							
12/19/23 R	4,494	11.210	0	50,382-*	50,382		
SUB-TOTAL OF REINVS # 1			0	50,382	50,382		
10/03/23 B	238,327	10.280	0	2,450,000-*	2,450,000		
SUB-TOTAL OF BUYS # 1			0	2,450,000	2,450,000		
SUB-TOTAL			0	2,500,382	2,500,382	0	

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED					
ISSUE: 44134R651 - HOTCHKIS & WILEY S/C DIV-I #1131								
12/07/23 R	17,083	11.540	0			197,135--*	197,135	
	SUB-TOTAL OF REINVS # 1		0			197,135	197,135	
10/03/23 B	184,867	11.630	0			2,150,000--*	2,150,000	
	SUB-TOTAL OF BUYS # 1		0			2,150,000	2,150,000	
12/28/23 S	14,613	12.660	0			185,000 *	169,837	15,163
	SUB-TOTAL OF SALES # 1		0			185,000	169,837	15,163
	SUB-TOTAL		0			2,532,135	2,516,972	15,163
ISSUE: 52107V500 - LAZARD INTL EQTY PORT-R6 #2361								
08/17/23 R	140	15.660	0			2,198--*	2,198	
	SUB-TOTAL OF REINVS # 1		0			2,198	2,198	
10/03/23 S	170,954	15.010	0			2,566,018 *	3,170,810	-604,792
	SUB-TOTAL OF SALES # 1		0			2,566,018	3,170,810	-604,792
	SUB-TOTAL		0			2,568,216	3,173,008	-604,792
ISSUE: 52468G318 - BRANDYWINEGLB-GLB OPP BD-IS #2266								
12/19/23 R	193	9.260	0			1,790--*	1,790	
	SUB-TOTAL OF REINVS # 1		0			1,790	1,790	
	SUB-TOTAL		0			1,790	1,790	0
ISSUE: 54349S105 - LOOMIS INVEST GR FIXED INC-I #1181								
06/29/23 R	2,103	10.180	0			21,409--*	21,409	
07/28/23 R	2,430	10.130	0			24,611--*	24,611	
08/30/23 R	2,651	10.030	0			26,586--*	26,586	

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH			
09/28/23 R	2,492	9.780	0	24,369-*	24,369		
10/30/23 R	2,829	9.610	0	27,189-*	27,189		
11/29/23 R	2,319	10.050	0	23,310-*	23,310		
12/15/23 R	2,965	10.320	0	30,598-*	30,598		
SUB-TOTAL OF REINVS # 7			0	178,072	178,072		
12/28/23 B	19,212	10.410	0	200,000-*	200,000		
SUB-TOTAL OF BUYS # 1			0	200,000	200,000		
10/03/23 S	72,464	9.660	0	700,000 *	902,220	-202,220	
SUB-TOTAL OF SALES # 1			0	700,000	902,220	-202,220	
SUB-TOTAL			0	1,078,072	1,280,292	-202,220	
ISSUE: 592905764 - METROPOLITAN WEST T/R BD-PLN #712							
06/30/23 R	2,410	8.500	0	20,486-*	20,486		
07/31/23 R	3,065	8.480	0	25,988-*	25,988		
08/31/23 R	3,275	8.390	0	27,477-*	27,477		
09/30/23 R	2,873	8.110	0	23,299-*	23,299		
10/31/23 R	3,100	7.920	0	24,555-*	24,555		
11/30/23 R	3,064	8.290	0	25,401-*	25,401		
12/31/23 R	2,974	8.620	0	25,634-*	25,634		
SUB-TOTAL OF REINVS # 7			0	172,840	172,840		
10/03/23 S	50,188	7.970	0	400,000 *	513,468	-113,468	
SUB-TOTAL OF SALES # 1			0	400,000	513,468	-113,468	
SUB-TOTAL			0	572,840	686,308	-113,468	
ISSUE: 64122Q531 - NEUBERGER BERMAN GENES-R6 #3616							
10/03/23 S	88,676	56.410	0	5,002,221 *	5,016,183	-13,962	
SUB-TOTAL OF SALES # 1			0	5,002,221	5,016,183	-13,962	

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED					
ISSUE: 722021L645 - PIMCO RAE EMERG MRKT-INST #2143								
12/26/23 R	4,828	9.830	0			47,458-*	47,458	
SUB-TOTAL								
			0			5,002,221	5,016,183	-13,962
SUB-TOTAL OF REINVS # 1								
			0			47,458	47,458	
10/03/23 B	116,773	9.420	0			1,100,000-*	1,100,000	
SUB-TOTAL OF BUYS # 1								
			0			1,100,000	1,100,000	
SUB-TOTAL								
			0			1,147,458	1,147,458	0
ISSUE: 921909784 - VANGUARD TOTAL INT ST IDX-IS #1869								
06/16/23 R	493	122.380	0			60,310-*	60,310	
09/15/23 R	244	118.910	0			29,038-*	29,038	
12/15/23 R	934	121.250	0			113,236-*	113,236	
SUB-TOTAL OF REINVS # 3								
			0			202,584	202,584	
10/03/23 B	16,053	112.130	0			1,800,000-*	1,800,000	
12/28/23 B	604	124.270	0			75,000-*	75,000	
SUB-TOTAL OF BUYS # 2								
			0			1,875,000	1,875,000	
SUB-TOTAL								
			0			2,077,584	2,077,584	0
ISSUE: 922040100 - VANGUARD INSTL INDEX FD #94								
06/28/23 R	226	365.250	0			82,588-*	82,588	
09/27/23 R	208	356.720	0			74,260-*	74,260	
12/27/23 R	737	394.390	0			290,743-*	290,743	
SUB-TOTAL OF REINVS # 3								
			0			447,591	447,591	
08/24/23 S	2,322	366.060	0			850,000 *	439,586	410,414
10/03/23 S	8,781	353.040	0			3,100,000 *	1,667,855	1,432,145

(iii) REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED					
	SUB-TOTAL OF SALES # 2		0			3,950,000	2,107,441	1,842,559
	SUB-TOTAL		0			4,397,591	2,555,032	1,842,559
ISSUE: 922042601 - VANGUARD EMRG MK STK INDEX-IS #239								
06/16/23 R	558	26.340	0			14,692-*	14,692	
09/15/23 R	840	25.460	0			21,379-*	21,379	
	SUB-TOTAL OF REINVS # 2		0			36,071	36,071	
10/03/23 S	104,720	24.500	0			2,565,637 *	2,902,538	-336,901
	SUB-TOTAL OF SALES # 1		0			2,565,637	2,902,538	-336,901
	SUB-TOTAL		0			2,601,708	2,938,609	-336,901
	GRAND TOTAL		0			39,845,525	39,256,070	589,454

FOOTNOTES

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION
** = A party-in-interest as defined by ERISA

(iv) REPORTABLE TRANSACTIONS - SINGLE / BY BROKER

FOR THE PERIOD JANUARY 1, 2023 THROUGH DECEMBER 31, 2023

ELBIT SYSTEMS KOLLSMAN

DATE BOUGHT/SOLD -----	SINGLE / BY BROKER		SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----

*** NO TRANSACTIONS QUALIFIED ***

◆ 5% Report - Part A
Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236
Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(i) Single Transaction in Excess of 5%

(a)	(b)		(c)	(d)	(e)	(f)	(g)	(h)	(i)
Security Description / Asset ID	Asset ID	Shares/Par Value	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
			Purchase Price	Selling Price		Expenses incurred with transaction	Cost of asset	Current value of asset on transaction date	

THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

(a) Identity of party involved

(b) Description of asset (including interest rate and maturity in case of loan)

◆ 5% Report - Part B

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(ii) Series of Non-Security Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
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THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

◆ 5% Report - Part C Summary

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iii) Series of Transactions by Issue in Excess of 5%

Security Description / Asset ID	Number of Transactions	Transaction Aggregate Acquisition Price	Lease Rental	Expenses Incurred	Cost of Asset	Current Value of Asset on Transaction
NT COLLECTIVE SHORT TERM INVT FD CUSIP: 66586U452	11	2,380,103.40		0.00	2,380,103.40	2,380,103.40
Total acquisitions						
Total dispositions	18	3,029,378.11		0.00	3,029,378.11	3,029,378.11

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

◆ 5% Report - Part D

Kollsman, Inc. Defined Benefit Retirement Plan 002 - EIN 51-0345236

Form 5500, Schedule H, Line 4j - Schedule of Reportable Transactions

(iv)Series of Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
---------------------------------	------------------	------	-------------------	-------------------	--------------	-------------------	------	-----------------------------------	---------------

THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2022-12-31 VALUE (INCLUDING ACCRUALS) OF 53,511,985.61

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 2023 This Form is Open to Public Inspection
--	--	---

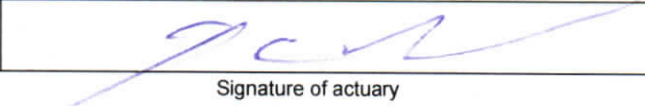
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

▶ **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 KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF ELBITAMERICA, INC.	D Employer Identification Number (EIN) 51-0345236
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 01 Day 01 Year 2023			
2 Assets:			
a Market value.....	2a	53,511,986	
b Actuarial value.....	2b	53,511,986	
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.....	416	35,813,074	35,813,074
b For terminated vested participants.....	188	14,924,173	14,924,173
c For active participants.....	110	12,483,651	12,483,651
d Total.....	714	63,220,898	63,220,898
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions.....	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....	4b		
5 Effective interest rate.....	5	5.22%	
6 Target normal cost			
a Present value of current plan year accruals.....	6a	0	
b Expected plan-related expenses.....	6b	598,274	
c Target normal cost.....	6c	598,274	

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		October 9, 2024
JEFFREY C. LITER		Date
Type or print name of actuary		2306544
THE ANGELL PENSION GROUP, INC.		Most recent enrollment number
Firm name		401-438-9250
88 BOYD AVENUE		Telephone number (including area code)
EAST PROVIDENCE RI 02914		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year).....	0	351,701
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year).....	0	0
9 Amount remaining (line 7 minus line 8).....	0	351,701
10 Interest on line 9 using prior year's actual return of <u>-16.09</u> %.....	0	-56,589
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>5.40</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	295,112

Part III Funding Percentages

14 Funding target attainment percentage.....	14	84.17 %
15 Adjusted funding target attainment percentage.....	15	84.17 %
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	111.00 %
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
09/13/2024	1,329,972	0			
Totals ▶			18(b)	1,329,972	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	1,219,678

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☐ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 5.00 %	3rd segment: 5.74 %	☐ N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions)	☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute			

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.	☐ Yes ☒ No
26 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	598,274	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:			
a Net shortfall amortization installment	Outstanding Balance	Installment	
	10,004,024	916,176	
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	1,514,450	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement.....	0	295,112	295,112
36 Additional cash requirement (line 34 minus line 35)	36	1,219,338	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	1,219,678	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	340	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	340	
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

Kollsman, Inc. Defined Benefit Retirement Plan

EIN: 51-0345236; Plan Number: 002

2023 Schedule SB, line 22 - Description of Weighted Average Retirement Age

(1)	(2)	(3)	(4)	(5)	
Age	Absolute Retirement Rate	Cumulative Probability of Not Having Retired	Probability of Employee Age 55 Retiring at Age(x)	(1) x (4)	
55	5%	95.00%	5.00%	2.75	
56	3%	92.15%	2.85%	1.60	
57	3%	89.39%	2.76%	1.58	
58	3%	86.70%	2.68%	1.56	
59	3%	84.10%	2.60%	1.53	
60	3%	81.58%	2.52%	1.51	
61	3%	79.13%	2.45%	1.49	
62	25%	59.35%	19.78%	12.27	
63	10%	53.41%	5.93%	3.74	
64	10%	48.07%	5.34%	3.42	
65	60%	19.23%	28.84%	18.75	
66	40%	11.54%	7.69%	5.08	
67	20%	9.23%	2.31%	1.55	
68	20%	7.38%	1.85%	1.26	
69	20%	5.91%	1.48%	1.02	
70	100%	0.00%	5.91%	4.14	
TOTALS:			100.00%	63.22	*

* Average Assumed Retirement Age

Appendix A

Summary of Plan Provisions

Plan Effective Date: January 1, 1996

Eligibility Requirements: Age: 21
Service: 1 year

Year of Service: For Part-time Employees: A Year of Service shall mean a 12-consecutive-month computation period in which an employee is credited with 1,000 or more hours of service.

For all other Employees: Year of Service shall mean the sum of all service calculated in full years and completed months.

Eligibility: Computation period commences on employee's date of hire.

Vesting: Computation period commences on employee's date of hire.

Credit for vesting and eligibility purposes shall be given for service performed prior to the original Effective Date of the Plan.

Benefit Service: Computation period commences on employee's date of hire. Credit for service shall not be given prior to the original Effective Date of the Plan.

Plan Entry Date: An employee will enter the plan on the exact day following completion of the eligibility requirements. Effective January 1, 2010, Employees hired on or after January 1, 2010 are not permitted to enter the plan.

Normal Retirement Date: First day of the month coincident with or next following the participant's 65th birthday and 5 Years of Service.

Compensation: The total compensation for the plan year, including deferred compensation, bonuses, commissions, overtime, short term disability benefits, or other special compensation as provided for on participant's W-2. Compensation shall exclude severance payments and relocation expenses.

Effective January 1, 2002, no more than \$200,000 of compensation will be considered for plan purposes. This limit of \$200,000 is subject to the cost of living indexes. Effective January 1, 2018, the limit is \$275,000.

Average Compensation: Compensation averaged over the later of:

- (i) January 1, 1996
- (ii) Date of hire
- (iii) attainment of age 21, or
- (iv) the date the Employer becomes an Affiliated Employer

Normal Retirement Benefit: The greater of:

- (1) The sum of:
 - (a) 0.90% of Average Compensation multiplied by Years of Benefit Service, plus
 - (b) 0.60% of Average Compensation in excess of Covered Compensation multiplied by Years of Benefit Service.
- (2) 1.10% of Average Compensation multiplied by Years Benefit Service.
- (3) \$70.00 per month (applies to certain groups only).

Normal Form of Benefit: Life Annuity

Accrued Benefit: The amount a participant would be entitled under the benefit formula based upon the Average Monthly Compensation, Years of Credited Service, and the Plan provisions in effect as of the determination.

Accrued benefits were frozen effective 12/31/2018.

Top-Heavy Minimum Accrued Benefit: A participant will receive a minimum benefit equal to 2% Average Compensation for each Year of Service in which the plan is top-heavy

Early Retirement: A participant who has attained age 55 and 5 Years of Benefit Service may retire and receive an Early Retirement benefit. The amount of the Early Retirement Benefit equals the Accrued Benefit, reduced by 1/15th for each of the first 5 years and 1/30th for each of the next 5 years by which commencement precedes the Normal Retirement Date.

Late Retirement: Participants who continue employment after their Normal Retirement Date are eligible for a Late Retirement Benefit equal the monthly benefit determined under the benefit formula based on Average Compensation and Years of Benefit Service determined as of date of termination.

Death Benefit: The spouse of a participant who has been married for at least one year is entitled to a Qualified Preretirement Survivor Annuity. The spousal death benefit is based upon the survivor portion of a Joint & 50% Survivor Annuity.

No pre-retirement death benefits are payable on behalf of unmarried participants.

Vesting: Based on Years of Service, subject to the following schedule:

<u>Years of Service</u>	<u>Vested Percentage</u>
Less than 5 years	0%
5 years or more	100%

Notwithstanding the above vesting schedule, a participant will become 100% vested upon reaching the Normal Retirement Date.

KOLLSMAN, INC. DEFINED BENEFIT RETIREMENT PLAN

**FORM 5500, SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)**

December 31, 2023

EIN: 51-0345236
Plan #: 002

(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Vanguard Institutional Index Fund	Equity mutual fund	\$ 9,129,295	\$ 18,599,858
	Vanguard Total International Stock Index Fund	Equity mutual fund	7,037,816	7,944,345
	Loomis Investment Grade Fixed Income Fund	Fixed-income mutual fund	8,153,767	6,860,220
	Metropolitan West Total Return Bond Fund	Fixed-income mutual fund	8,025,132	6,776,657
	DWS RREEF Real Assets Fund Class	Equity mutual fund	2,500,382	2,734,167
	Hotchkis & Wiley Small Cap Diversified Value Fund	Equity mutual fund	2,177,297	2,343,580
	Conestoga Small Cap Fund	Equity mutual fund	2,060,675	2,319,459
	Brandywineglobal Global Opportunities Bond Fund	Fixed-income mutual fund	2,419,300	2,076,098
	Blackrock Strategic Income Opportunities Portfolio	Fixed-income mutual fund	2,124,318	1,992,424
	GQG Partners Emerging Markets Equity Fund	Equity mutual fund	1,133,031	1,251,430
	Pimco RAE Emerging Markets Fund	Equity mutual fund	1,147,458	1,222,087
*	Principal Government Money Market Fund	Money market fund	784,922	784,992
	Total investments		\$ 46,693,393	\$ 54,905,317

* Represents a party in interest to the Plan as defined by ERISA.

SECTION V
AMORTIZATION BASES UNDER SECTION 430 OF THE IRS CODE

Shortfall Amortization Bases

<u>Description</u>	<u>Date Base Established</u>	<u>Initial Base</u>	<u>Initial Years</u>	<u>Remaining Years</u>	<u>Present Value of Remaining Payments</u>	<u>Amortization Amount</u>
Shortfall	01/01/2023	\$ 10,004,024	15	15	\$ 10,004,024	\$ 916,176

Subtotal - Shortfall Bases

Waiver Amortization Bases

<u>Description</u>	<u>Date Base Established</u>	<u>Initial Base</u>	<u>Initial Years</u>	<u>Remaining Years</u>	<u>Present Value of Remaining Payments</u>	<u>Amortization Amount</u>
Total Amortization Bases					\$ 10,004,024	\$ 916,176