

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

<p>1a Name of plan <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>002</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY</u></p> <p><u>1900 EAST JEFFERSON STREET</u> <u>WARSAW, IN 46580</u></p>	<p>1c Effective date of plan <u>01/14/1953</u></p> <p>2b Employer Identification Number (EIN) <u>35-0259770</u></p> <p>2c Plan Sponsor's telephone number <u>574-267-8111</u></p> <p>2d Business code (see instructions) <u>331110</u></p>

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.	09/08/2025	KEVIN RUMINSKI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	568
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.....	6a(1)	76
	6a(2)	56
	6b	182
	6c	137
	6d	375
	6e	45
	6f	420
	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:
1B 1E 1I 3H

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)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> 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	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

A Name of plan <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY</u>	D Employer Identification Number (EIN) <u>35-0259770</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>32103360</u>
	b Actuarial value	2b	<u>32103360</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>216</u>	<u>18719632</u>
	b For terminated vested participants	<u>276</u>	<u>8641334</u>
	c For active participants	<u>76</u>	<u>6423496</u>
	d Total	<u>568</u>	<u>33784462</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.13 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>340000</u>
	c Target normal cost	6c	<u>340000</u>

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

SIGN HERE Signature of actuary <u>DEREK SCHMITT, FSA, EA, MAAA</u> Type or print name of actuary <u>NYHART</u> Firm name <u>5750 CASTLE CREEK PARKWAY SUITE 245</u> <u>INDIANAPOLIS, IN 46250</u> Address of the firm	<u>08/18/2025</u> Date <u>23-07642</u> Most recent enrollment number <u>317-845-3568</u> Telephone number (including area code)
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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	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>8.21</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		413
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>5.26</u> %		22
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		435
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	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	94.85 %
15	Adjusted funding target attainment percentage	15	95.18 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.87 %
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		
04/12/2024	183782	0					
07/11/2024	183782	0					
01/10/2025	92988	0					
04/09/2025	127930	0					
07/09/2025	127930	0					
08/05/2025	69000	0					
			Totals ▶	18(b)	785412	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	750977	
20	Quarterly contributions and liquidity shortfalls:			
a	Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
b	If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
c	If line 20a is "Yes," see instructions and complete the following table as applicable:			
Liquidity shortfall as of end of quarter of this plan year				
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th	
0	0	0	0	

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 64
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> 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..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
26 Demographic and benefit information			
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 340000
b Excess assets, if applicable, but not greater than line 31a			31b 0
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	1740919	171721	
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 511721
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)			36 511721
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)			37 750977
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)			38a 239256
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....			38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)			39 0
40 Unpaid minimum required contributions for all years			40 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)			
41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input checked="" type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021			

SCHEDULE C (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>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 DALTON CORPORATION, WARSAW MANUFACTURING FACILITY	D Employer Identification Number (EIN) 35-0259770	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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)

CHARLES SCHWAB TRUST BANK

82-3967259

(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?
19 50	NONE	166797	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

KRUGGEL, LAWTON & COMPANY, LLC

35-1307701

(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 50	NONE	15300	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

(b) 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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (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:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 DALTON CORPORATION, WARSAW MANUFACTURING FACILITY	D Employer Identification Number (EIN) 35-0259770

Part I	Asset and Liability Statement
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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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	4209105	257022
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	802348	417848
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	5078627	0
(2) U.S. Government securities	1c(2)	5214206	2515992
(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)	26	0
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(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)	18241083	26982799
(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	33545395	30173661
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	33545395	30173661

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)	785412	
(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)		785412
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	139716	
(B) U.S. Government securities.....	2b(1)(B)	136462	
(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)	1	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		276179
(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)	1088796	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1088796
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	1960825	
(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)		
(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)		-932041
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		3179171

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6224218	
(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)		6224218
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)	15300	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	166797	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	144590	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		326687
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6550905

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-3371734
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: KRUGGEL, LAWTON & COMPANY, LLC

(2) EIN: 35-1307701

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.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		3000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
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 555313.

SCHEDULE R (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>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>DALTON CORPORATION, WARSAW MANUFACTURING FACILITY</u>	D Employer Identification Number (EIN) <u>35-0259770</u>	

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	<u>0</u>
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): <u>58-1428634</u>		
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	<u>139</u>

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

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

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Yes.

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

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

No. Other. Provide explanation: _____

Part VII IRS Compliance Questions

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

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

Design-based safe harbor method

"Prior year" ADP test

"Current year" ADP test

N/A

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

DALTON CORPORATION

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

ANNUAL REPORT
December 31, 2024

 **KRUGGEL
LAWTON**^{CPA}
Elkhart, Indiana

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

ANNUAL REPORT
December 31, 2024

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator and Participants of the
Dalton Corporation, Warsaw Manufacturing Facility Pension Plan
Warsaw, Indiana

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

We have performed audits of the financial statements of Dalton Corporation, Warsaw Manufacturing Facility Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, 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 (Financial Statements).

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

Management has obtained certifications from qualified institutions as of and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 3 to the Financial Statements, is complete and accurate.

Opinion on the Financial Statements

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.
- 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 on the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- 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 audits 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 certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Supplemental Schedules Required by ERISA

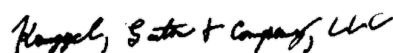
The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2024 and Schedule of Reportable Transactions for the year ended December 31, 2024 are presented for purposes of additional analysis and are not a required part of the Financial Statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the Financial Statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the Financial Statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the Financial Statements or to the Financial Statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Respectfully submitted,



Certified Public Accountants

Elkhart, Indiana
September 5, 2025

**DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN**

Warsaw, Indiana

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at fair value	28,024,878	27,120,298
Receivables		
Employer contributions	417,848	802,348
Cash	257,022	4,209,105
Net assets held in 401(h) account	1,473,913	1,413,644
Total assets	30,173,661	33,545,395
LIABILITIES		
Amounts related to obligations of 401(h) account	1,473,913	1,413,644
NET ASSETS AVAILABLE FOR BENEFITS	28,699,748	32,131,751

The Notes to Financial Statements are an integral part of this statement.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

For the Years Ended December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS TO NET ASSETS:		
Investment income		
Net appreciation in fair value of investments	929,547	1,562,250
Dividend and interest income	1,364,975	983,399
Total investment income	2,294,522	2,545,649
Contributions		
Employer contributions	785,412	802,348
Total additions	3,079,934	3,347,997
DEDUCTIONS FROM NET ASSETS:		
Benefits paid to participants	6,185,250	1,784,187
Administrative expenses	326,687	434,085
Total deductions	6,511,937	2,218,272
NET INCREASE (DECREASE)	(3,432,003)	1,129,725
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year	32,131,751	31,002,026
End of year	28,699,748	32,131,751

The Notes to Financial Statements are an integral part of this statement.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE 1 - DESCRIPTION OF PLAN

The following brief description of the Dalton Corporation, Warsaw Manufacturing Facility Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

GENERAL

The Plan is a defined benefit pension plan covering certain employees of Dalton Corporation's (the "Company") Warsaw Manufacturing Facility who are represented by the United Steel Workers of America AFL-CIO hired before April 12, 2008. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

DEATH AND DISABILITY BENEFITS

If a married participant dies after completing five years of credited service, a qualified pre-retirement annuity will be paid to the surviving spouse. Active employees, who become disabled after completing 10 years of credited service, receive annual disability benefits that are equal to the normal retirement benefits they have accumulated as of the time they become disabled.

FUNDING POLICY

The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. During 2024 and 2023, the Company made contributions of \$785,412 and \$802,348, respectively, and met the minimum funding requirements of ERISA for 2024 and 2023.

PENSION BENEFITS

Participants with 5 or more years of service are entitled to monthly pension benefits as follows where the benefit is the sum of (a) plus (b)

- (a) Ten Dollars (\$10.00) multiplied by Periods of Service prior to January 1, 1987, plus
- (b) An amount based on the date of termination (\$33.50 from January 1, 2013 and after) multiplied by the participant's years of credited service after December 31, 1986

The Plan was amended to allow no further credited service to be earned after September 8, 2016.

A participant who has attained age 70 or the later of age 65 or completion of 5 years of credited service qualifies for normal retirement. The Plan permits early retirement at age 60 with 15 years of credited service. Employees may elect to receive their pension benefits in the form of a joint and survivor annuity or a life annuity payable monthly from retirement. All married participants will receive their benefits in the form of a qualified joint and survivor annuity, unless another form of payment is elected.

Participants terminated prior to August 1, 2024 were allowed to elect a lump sum distribution during the period September 15, 2024 and ending on October 31, 2024.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY

PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

VESTING

Participant vesting is based on years of continuous service. A participant is 100% vested after receiving five years of credited service.

NOTE 2 - SUMMARY OF ACCOUNTING POLICIES

BASIS OF ACCOUNTING

The financial statements of the Plan are prepared under the accrual method of accounting.

ESTIMATES

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

INVESTMENT VALUATION AND INCOME RECOGNITION

The investments of the Plan are reported at fair value. The fair value of a financial instrument is the amount 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 (the exit price). See Note 10 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

ADMINISTRATIVE EXPENSES

The Plan's expenses are paid either by the Plan or Company, as provided by the plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying Statement of Changes in Net Assets Available for Benefits. In addition, certain investment related expenses are included in the net appreciation of fair value of investments presented in the accompanying Statement of Changes in Net Assets Available for Benefits.

PAYMENT OF BENEFITS

Benefits are recorded when paid.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY

PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE 3 - CERTIFIED INVESTMENT INFORMATION

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedules, including investments held, and investment income, was obtained by management and agreed to or derived from information certified as complete and accurate by Reliance Trust Company ("Reliance") as of and for the year ended December 31, 2023 and Charles Schwab Trust Bank ("Schwab") as of and for the years ended December 31, 2024 and 2023, qualified institutions. The Plan's independent auditors did not perform auditing procedures with respect to this certified information, except for comparing such certified information to the related information included in the financial statements and ERISA-required supplemental schedules.

NOTE 4 - TRANSACTIONS WITH PARTIES-IN-INTEREST

Parties-in-interest are defined under DOL regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. The Plan is not charged for administrative services performed on its behalf by employees of the Company. Some fees paid by the Plan for the investment management services are included in net appreciation in fair value of investments. The Plan paid administration fees and investment management fees to Charles Schwab and audit fees to Kruggel, Lawton & Company, LLC which also qualify as a party-in-interest transaction.

NOTE 5 - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, the net assets of the Plan will be allocated for payment of plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations there under and the plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (the "PBGC") if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's benefits. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty, while other benefits may not be provided for at all.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE 6 - TAX STATUS

The Plan has received a determination letter from the Internal Revenue Service dated October 10, 2012 stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (Code). Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualification. The Plan has been amended since receiving the determination letter. However, the plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code and therefore, believes that the Plan is qualified and the related trust is tax exempt.

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

NOTE 7 - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. The accumulated plan benefits for active employees are based on their accrued benefits as of the date of which the benefit information is presented (the valuation date). Benefits payable under all circumstances, such as retirement, death, and termination of employment, are included to the extent they are deemed attributable to employee service rendered to the valuation date.

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

The effect of plan amendments on accumulated plan benefits is recognized during the year in which such amendments become effective.

The following presents the accumulated plan benefits as of December 31, 2023:

Actuarial present value of accumulated plan benefits:

Vested benefits	
Participants currently receiving payments	16,845,731
Other Participants	12,843,000
	<hr/>
	29,688,731
Nonvested benefits	70,987
	<hr/>
Total	29,759,718
	<hr/>

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

The change in accumulated plan benefit information for the year ended December 31, 2023 is as follows:

Beginning actuarial present value of accumulated plan benefits	28,743,038
Interest adjustment	1,856,002
Benefits accumulated and other plan experience	(435,791)
Benefits paid	(1,784,187)
Change due to plan amendments*	133,757
Change in assumptions**	1,246,899
<hr/>	
Ending actuarial present value of accumulated plan benefits	29,759,718

*The change in plan amendments is a result of an amendment to extend the unreduced early retirement benefit window offered at the age of 62 through June 22, 2027.

**The change in assumptions is the reduction of the interest rate from 6.66% to 6.22%.

The significant actuarial assumptions used in determining the actuarial present value of accumulated plan benefits at December 31, 2023.

A. Assumed interest rate on investments: 6.22%

B. Rates of retirement were assumed to be as follows:

<u>Age</u>	<u>Rate</u>
60	3 %
61	1.25 %
62-64	30 %
65	100 %

C. Mortality: Pri-2012 Blue Collar table projected with generational improvement scale based on SOA Improvement Scale MP-2021.

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

NOTE 8 - RISKS AND UNCERTAINTIES

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

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

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE 9 - 401(H) ACCOUNT

The Plan includes a medical-benefit component in addition to the normal retirement benefits to fund a portion of the postretirement obligations for retirees and their beneficiaries in accordance with Section 401(h) of the IRC. A separate account has been established and maintained in the Plan for the net assets related to the medical-benefit component (401(h) account). In accordance with IRC Section 401(h), the Plan's investments in the 401(h) account may not be used for, or diverted to, any purpose other than providing health benefits for retirees and their beneficiaries. The related obligations for health benefits are not included in this Plan's obligations in Note 7 but are reflected as obligations of the Company's welfare benefit plan. Plan participants do not contribute to the 401(h) account. Employer contributions to the 401(h) account are determined annually based on \$.05 per hour worked. Participants must retire from the Company to receive benefits. For those employees who terminate for reasons other than retirement, amounts in their individual participant accounts are forfeited and are used to reduce future Employer contributions. Earnings are allocated to participants based on the relationship of each participant's account to the total balance. As of December 31, 2024 and 2023, a proportionate share of investments in Note 10 of \$1,473,913 and \$1,413,644, respectively, were allocated to the 401(h) account.

NOTE 10 - FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3).

The three levels of the fair value hierarchy under FASB ASC 820-10 are described as follows:

Level 1 inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 inputs to the valuation methodology include the following:

- Quoted prices for similar assets or liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in inactive markets
- Inputs other than quoted prices that are observable for the asset or liability
- Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means

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

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

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

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

- *Mutual Funds*. Valued at the published daily net asset value (NAV) of shares held by the Plan. The mutual funds held by the Plan are deemed to be actively traded.
- *U.S. Government Securities*: Valued using pricing models maximizing the use of observable inputs for similar securities.
- *Money Market Mutual Funds*. Valued at the published daily NAV of shares held by the Plan. The funds are managed to maintain a \$1 per share NAV.
- *Exchange Traded Funds (ETFs)*. Valued based on the closing price reported on the active market on which the individual investments are traded.
- *Publicly Traded Partnership*. Valued based on the closing price reported on the active market on which the individual investments are traded.

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

The following tables set forth by level within the fair value hierarchy the Plan's assets at fair value as of December 31, 2024 and 2023.

Investment Assets at Fair Value as of December 31, 2024

	Level 1	Level 2	Level 3	Total
Mutual funds	3,582,119	0	0	3,582,119
U.S. Government Securities	0	2,515,992	0	2,515,992
ETFs	23,400,680	0	0	23,400,680
Total investment assets at fair value	26,982,799	2,515,992	0	29,498,791

Investment Assets at Fair Value as of December 31, 2023

	Level 1	Level 2	Level 3	Total
U.S. Government Securities	0	10,292,833	0	10,292,833
Mutual funds	7,050,679	0	0	7,050,679
ETFs	11,190,404	0	0	11,190,404
Publicly Traded Partnership	26	0	0	26
Total investment assets at fair value	18,241,109	10,292,833	0	28,533,942

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

NOTES TO FINANCIAL STATEMENTS

December 31, 2024 and 2023

NOTE 11 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for plan benefits per the financial statements to Form 5500 at December 31:

	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	28,699,748	32,131,751
Investments held in 401(h) account included as investments in form 5500	1,473,913	1,413,644
Net assets available for benefits per Form 5500	30,173,661	33,545,395

The following is a reconciliation of the change in net assets per the financial statements to Form 5500 for the year ended December 31, 2024:

Change in net assets per the financial statements	(3,432,003)
Change in 401(h) account	60,269
Change in net assets per the Form 5500	(3,371,734)

NOTE 12 - SUBSEQUENT EVENTS

The Company has evaluated subsequent events through the date the financial statements were available to be issued. No events or transactions occurred through September 5, 2025 requiring recognition or disclosure in the financial statements.

**DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN**

Warsaw, Indiana

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2024

EIN : 35-0259770 PLAN NUMBER: 002

Information in support of Form 5500, Schedule H, Part IV, item 4(i)

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment - Including Maturity Date, Rate of Interest, Par or Maturity Value	(d) Cost	(e) Current Market Value
		<u>U.S. Government Securities:</u>		
	US Treasury	Treasury Note 4.375%	2,000,247	1,995,978
	US Treasury	Treasury Note 0.625%	500,364	520,014
		<u>Mutual Funds:</u>		
	AMG	Pantheon Credit Solutions	3,349,781	3,582,119
		<u>Exchange Traded Funds:</u>		
	ISHS	25 Yr Treasury	5,542,883	5,243,533
	JP Morgan	Income ETF	3,370,152	3,403,115
	SPDR	Portfolio Dvlpd Wrld ETF	3,115,178	3,038,048
	Vanguard	Growth ETF	2,568,058	3,139,866
	Vanguard	Small Cap Growth ETF	776,116	882,469
	Vanguard	Small Cap Value ETF	501,854	598,107
	Vanguard	Total Bond Market ETF	2,107,387	2,132,851
	Vanguard	Value ETF	4,645,509	4,962,691
	Total		28,477,529	29,498,791

* Denotes party-in-interest

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

SCHEDULE OF REPORTABLE TRANSACTIONS

Year ended December 31, 2024

EIN : 35-0259770 PLAN NUMBER: 002

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Included w/ Transactions	(g) Cost of Asset	(h) Current Value on Transaction Date	(i) Net Gain (Loss)
<u>Category (i): Single transactions in excess of 5% of the current value of Plan Assets:</u>								
Schwab	Govt Money FU Ultra	4,000,000	-	-	-	4,000,000	4,000,000	-
Schwab	Govt Money FU Ultra	9,999,999	-	-	-	9,999,999	9,999,999	-
US Treasury	US Treasury NT 4.375%	2,000,247	-	-	-	2,000,247	2,000,247	-
US Treasury	US Treasury NT 4.25%	2,000,393	-	-	-	2,000,393	2,000,393	-
AMG	Pantheon Credit Solutions	3,250,000	-	-	-	3,250,000	3,250,000	-
Schwab	Govt Money FU Ultra	-	10,694,833	-	-	10,694,833	10,694,833	-
Invesco	KBW High Div Yield FIN	-	1,694,788	-	-	1,711,638	1,694,788	(16,850)
Invesco	KBW Premium	-	2,262,932	-	-	2,346,821	2,262,932	(83,889)
Vanguard	Total Bond Market ETF	2,288,208	-	-	-	2,288,208	2,288,208	-
Vanguard	Dividend Appreciation	-	2,411,659	-	-	2,186,155	2,411,659	225,504
Vanguard	Growth ETF	2,675,166	-	-	-	2,675,166	2,675,166	-

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

(a) Identity of Party <u>Involved</u>	(b) <u>Description of Asset</u>	(c) <u>Purchase Price</u>	(d) <u>Selling Price</u>	(e) <u>Lease Rental</u>	(f) <u>Expense Included w/ Transactions</u>	(g) <u>Cost of Asset</u>	(h) <u>Current Value on Transaction Date</u>	(i) <u>Net Gain (Loss)</u>
SPDR	Portfolio Dvlpd Wrld Ex ETF	2,940,250	-	-	-	2,940,250	2,940,250	-
Vanguard	FTSE Emerging Markets ETF	-	3,120,705	-	-	2,908,891	3,120,705	211,814
JP Morgan	Income ETF	3,517,486	-	-	-	3,517,486	3,517,486	-
Vanguard	Value ETF	4,573,815	-	-	-	4,573,815	4,573,815	-
ISHS	25 Yr Treasury	6,073,800	-	-	-	6,073,800	6,073,800	-
Schwab	Govt Money FU Ultra	-	8,055,000	-	-	8,055,000	8,055,000	-
US Treasury	US Treasury 4.25%	-	2,027,936	-	-	2,000,393	2,027,936	27,543
US Treasury	US Treasury 0.125%	-	5,247,000	-	-	5,000,863	5,247,000	246,137
US Treasury	US Treasury BI March 14, 2024	-	4,999,275	-	-	4,999,275	4,999,275	-

Category (iii): A series of transactions in excess of 5% of the current value of Plan Assets:

Charles Schwab	Family FD Government Market Ultra	14,224,984	-	-	-	14,224,984	14,224,984	-
		-	20,127,229	-	-	20,127,229	20,127,229	-
AMG	Pantheon Credit Solutions	3,349,781	-	-	-	3,349,781	3,349,781	-
ISHS	25 Yr. Treasury	6,641,179	-	-	-	6,641,179	6,641,179	-
		-	1,197,028	-	-	1,098,296	1,197,028	98,732
JP Morgan	Income ETF	3,666,611	-	-	-	3,666,611	3,666,611	-

Attachment to Form 5500, Schedule H, Part IV, item 4(j)

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

(a) Identity of Party <u>Involved</u>	(b) <u>Description of Asset</u>	(c) Purchase <u>Price</u>	(d) Selling <u>Price</u>	(e) Lease <u>Rental</u>	(f) Expense Included w/ <u>Transactions</u>	(g) Cost <u>of Asset</u>	(h) Current Value on Transaction <u>Date</u>	(i) Net Gain <u>(Loss)</u>
		-	299,940	-	-	296,459	299,940	3,481
SPDR	Portfolio Developed World	3,214,673	-	-	-	3,214,673	3,214,673	-
		-	100,071	-	-	99,495	100,071	576
US Treasury	US Treasury 4.25%	2,000,393	-	-	-	2,000,393	2,000,393	-
		-	2,027,936	-	-	2,000,393	2,027,936	27,543
Vanguard	Growth ETF	2,775,516	-	-	-	2,775,516	2,775,516	-
		-	249,796	-	-	207,459	249,796	42,337
Vanguard	Total Bond Market	2,351,946	-	-	-	2,351,946	2,351,946	-
		-	249,787	-	-	244,559	249,787	5,228
Vanguard	Value ETF	4,778,156	-	-	-	4,778,156	4,778,156	-
		-	150,656	-	-	132,647	150,656	18,009

Active Participant Schedule

Active participant information grouped based on age and credited service.

Age Group	Years of Service									
	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
Under 25										
25 to 29										
30 to 34										
35 to 39				2						
40 to 44										
45 to 49			1	1	2	1				
50 to 54			2	1	5	7	1			
55 to 59			2	4	4	9	5			
60 to 64			1	1	4	4	6		8	
65 to 69						1			2	1
70 & up									1	

Except where otherwise indicated, the following assumptions were selected by the plan sponsor with the concurrence of the actuary. Prescribed assumptions are based on the requirements of the relevant law, the Internal Revenue Code and applicable regulation.

Valuation Date January 1, 2024

Participant and Asset Information Collected as of January 1, 2024

Retirement Rates (FE)	<u>Age</u>	<u>Rate</u>
	60	3.00%
	61	1.25%
	62-64	30.00%
	65	100.00%

For the active employees currently retirement eligible, the retirement rates produce a weighted average retirement age of 64.

Retirement rates were set by the prior actuary and there is insufficient information to evaluate.

Mortality Rates (FE)

Healthy IRS 2024 Generational Mortality - sex distinct Pri-2012 table as provided in IRC 430(h)(3). Mortality projections are based on the most recently adjusted SOA Improvement Scale MP-2021 and the projection methodology described in IRS Regulation 1.430(h)(3)-1(b).

Disabled Tables prescribed by IRS in Revenue Ruling 96-7 for disabilities occurring after 12/31/1994

The mortality tables are prescribed by the IRS.

Mortality Rates cont. (FE)

ASC 960

Pri-2012 Blue Collar sex distinct mortality with generational improvements beginning in 2012 based on SOA scale MP-2021.

As the plan is not large enough to have credible experience, mortality assumptions are set to reflect general population trends.

Disability Rates (FE)

Rates in accordance with 100% of the 1955 UAW Tables for men and women

As the plan is not large enough to have credible experience, disability rates are determined based on the results of general population studies.

Withdrawal Rates (FE)

Table T-11 of The Pension Actuary's Handbook. Sample Rates as follows:

Age	Rate
20	25.0%
30	23.2%
40	17.7%
50	9.7%

As the plan is not large enough to have credible experience, withdrawal rates are determined based on the results of broad population studies.

Annual Pay Increases (CO)

Not Applicable

Interest Rates

	1st Segment (0-5 years)	2nd Segment (5-20 years)	3rd Segment (20+ years)
Minimum Funding and Benefit Restrictions - Prescribed (CO)	4.75%	4.87%	5.59%
Maximum Funding - Prescribed (CO)	3.62%	4.46%	4.52%
ASC 960 (CO)	6.22%	6.22%	6.22%
PBGC	5.01%	5.13%	5.15%

All segment rates are based on the sponsor's election to use a 4 month lookback. The PBGC interest rates are based on the sponsor's election to use the Standard calculation method. The Standard method must be used through 2027. Interest rates are prescribed by IRS regulation.

The ASC 960 interest rate is the expected long term rate of return on assets. This assumption has been set by the plan sponsor in conjunction with their asset advisors. We believe the assumption is reasonable.

Payment Form Election (FE)

Lump Sum	0%
Annuity	100%

Expense and/or Contingency Loading (FE)

The Target Normal Cost is increased by \$340,000 to cover anticipated PBGC Premiums and administrative expenses to be paid from the trust in 2024.

Marital Status and Ages (FE)

50% of Participants assumed to be married with wives assumed to be the same age as husbands.

Market Value of Assets

Equal to the fair value of assets as of the valuation date, plus the discounted value of contributions made following the valuation date and before the date of this report for the purpose of satisfying the prior year's funding requirements.

Plan Asset Valuation Method

Market Value of Assets

Expected Rate of Return on Assets (CO)

For determination of the Plan Asset value, the expected return on assets is equal to 6.75% for 2022 and 6.66% for 2023. The expected return on assets is capped at the 3rd Segment Rate for Minimum Funding purposes.

Cost Method

PPA requires the use of the Unit Credit cost method for determining the minimum required contribution and PBGC premiums. The maximum tax deductible contribution calculation includes limited Projected Unit Credit calculations as required under IRC 404(o).

ASC 960 requires the use of the Unit Credit cost method.

FE indicates an assumption representing an estimate of future experience

MD indicates an assumption representing observations of estimates inherent in market data

CO indicates an assumption representing a combination of an estimate of future experience and observations of market data

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

SCHEDULE OF REPORTABLE TRANSACTIONS

Year ended December 31, 2024

EIN : 35-0259770 PLAN NUMBER: 002

(a) Identity of Party <u>Involved</u>	(b) <u>Description of Asset</u>	(c) <u>Purchase Price</u>	(d) <u>Selling Price</u>	(e) <u>Lease Rental</u>	(f) <u>Expense Included w/ Transactions</u>	(g) <u>Cost of Asset</u>	(h) <u>Current Value on Transaction Date</u>	(i) <u>Net Gain (Loss)</u>
<u>Category (i): Single transactions in excess of 5% of the current value of Plan Assets:</u>								
Schwab	Govt Money FU Ultra	4,000,000	-	-	-	4,000,000	4,000,000	-
Schwab	Govt Money FU Ultra	9,999,999	-	-	-	9,999,999	9,999,999	-
US Treasury	US Treasury NT 4.375%	2,000,247	-	-	-	2,000,247	2,000,247	-
US Treasury	US Treasury NT 4.25%	2,000,393	-	-	-	2,000,393	2,000,393	-
AMG	Pantheon Credit Solutions	3,250,000	-	-	-	3,250,000	3,250,000	-
Schwab	Govt Money FU Ultra	-	10,694,833	-	-	10,694,833	10,694,833	-
Invesco	KBW High Div Yield FIN	-	1,694,788	-	-	1,711,638	1,694,788	(16,850)
Invesco	KBW Premium	-	2,262,932	-	-	2,346,821	2,262,932	(83,889)
Vanguard	Total Bond Market ETF	2,288,208	-	-	-	2,288,208	2,288,208	-
Vanguard	Dividend Appreciation	-	2,411,659	-	-	2,186,155	2,411,659	225,504
Vanguard	Growth ETF	2,675,166	-	-	-	2,675,166	2,675,166	-

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

(a) Identity of Party <u>Involved</u>	(b) <u>Description of Asset</u>	(c) <u>Purchase Price</u>	(d) <u>Selling Price</u>	(e) <u>Lease Rental</u>	(f) <u>Expense Included w/ Transactions</u>	(g) <u>Cost of Asset</u>	(h) Current Value on Transaction <u>Date</u>	(i) Net Gain <u>(Loss)</u>
SPDR	Portfolio Dvlpd Wrld Ex ETF	2,940,250	-	-	-	2,940,250	2,940,250	-
Vanguard	FTSE Emerging Markets ETF	-	3,120,705	-	-	2,908,891	3,120,705	211,814
JP Morgan	Income ETF	3,517,486	-	-	-	3,517,486	3,517,486	-
Vanguard	Value ETF	4,573,815	-	-	-	4,573,815	4,573,815	-
ISHS	25 Yr Treasury	6,073,800	-	-	-	6,073,800	6,073,800	-
Schwab	Govt Money FU Ultra	-	8,055,000	-	-	8,055,000	8,055,000	-
US Treasury	US Treasury 4.25%	-	2,027,936	-	-	2,000,393	2,027,936	27,543
US Treasury	US Treasury 0.125%	-	5,247,000	-	-	5,000,863	5,247,000	246,137
US Treasury	US Treasury BI March 14, 2024	-	4,999,275	-	-	4,999,275	4,999,275	-

Category (iii): A series of transactions in excess of 5% of the current value of Plan Assets:

Charles Schwab	Family FD Government Market Ultra	14,224,984	-	-	-	14,224,984	14,224,984	-
		-	20,127,229	-	-	20,127,229	20,127,229	-
AMG	Pantheon Credit Solutions	3,349,781	-	-	-	3,349,781	3,349,781	-
ISHS	25 Yr. Treasury	6,641,179	-	-	-	6,641,179	6,641,179	-
		-	1,197,028	-	-	1,098,296	1,197,028	98,732
JP Morgan	Income ETF	3,666,611	-	-	-	3,666,611	3,666,611	-

Attachment to Form 5500, Schedule H, Part IV, item 4(j)

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY PENSION PLAN

Warsaw, Indiana

(a) Identity of Party <u>Involved</u>	(b) <u>Description of Asset</u>	(c) Purchase <u>Price</u>	(d) Selling <u>Price</u>	(e) Lease <u>Rental</u>	(f) Expense Included w/ <u>Transactions</u>	(g) Cost <u>of Asset</u>	(h) Current Value on Transaction <u>Date</u>	(i) Net Gain <u>(Loss)</u>
		-	299,940	-	-	296,459	299,940	3,481
SPDR	Portfolio Developed World	3,214,673	-	-	-	3,214,673	3,214,673	-
		-	100,071	-	-	99,495	100,071	576
US Treasury	US Treasury 4.25%	2,000,393	-	-	-	2,000,393	2,000,393	-
		-	2,027,936	-	-	2,000,393	2,027,936	27,543
Vanguard	Growth ETF	2,775,516	-	-	-	2,775,516	2,775,516	-
		-	249,796	-	-	207,459	249,796	42,337
Vanguard	Total Bond Market	2,351,946	-	-	-	2,351,946	2,351,946	-
		-	249,787	-	-	244,559	249,787	5,228
Vanguard	Value ETF	4,778,156	-	-	-	4,778,156	4,778,156	-
		-	150,656	-	-	132,647	150,656	18,009

**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

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

▶ **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 Dalton Corporation, Warsaw Manufacturing Facility Pension Plan		B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Dalton Corporation, Warsaw Manufacturing Facility		D Employer Identification Number (EIN) 35-0259770	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
2 Assets:			
a Market value	2a	32,103,360	
b Actuarial value	2b	32,103,360	
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	216	18,719,632	18,719,632
b For terminated vested participants	276	8,641,334	8,641,334
c For active participants	76	6,423,496	6,483,313
d Total	568	33,784,462	33,844,279
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
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	5.13%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	340,000	
c Target normal cost	6c	340,000	

Statement by Enrolled Actuary

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

SIGN HERE		8/18/2025
	Signature of actuary	Date
Derek Schmitt, FSA, EA, MAAA		2307642
Type or print name of actuary		Most recent enrollment number
Nyhart		317-845-3568
Firm name		Telephone number (including area code)
5750 Castle Creek Parkway Suite 245		
Indianapolis IN 46250		
Address of the firm		

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

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

**Schedule SB (Form 5500) 2024
v. 240311**

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....			21b 4
22 Weighted average retirement age			22 64
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> 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..... <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
26 Demographic and benefit information			
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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	340,000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	1,740,919	171,721	
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	511,721	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35).....	36	511,721	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	750,977	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	239,256	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)			
41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input checked="" type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021			

Summary of Contributions

Below is a summary of historical contributions.

Effective Rate: 5.13%

Contributions for Plan Year Beginning in 2024

Contribution Date	Amount	Discounted Value
April 12, 2024	\$183,782	\$181,237
July 11, 2024	\$183,782	\$179,022
January 10, 2025	\$92,988	\$88,342
April 09, 2025	\$127,930	\$120,068
July 09, 2025	\$127,930	\$118,584
August 05, 2025	\$69,000	\$63,724
Totals	785,412.00	750,977.00

Age	Expected Actives at Age	Retirement Rate	Expected Retirements	Weighted Age
60.00	35.6770	3.00%	1.0703	64.2186
61.00	36.1536	12.50%	4.5192	275.6714
62.00	43.0689	30.00%	12.9207	801.0821
63.00	34.3276	30.00%	10.2983	648.7921
64.00	26.2346	30.00%	7.8704	503.7049
65.00	19.6385	100.00%	19.6385	1,276.5049
66.00	0.0000	100.00%	0.0000	0.0000
67.00	1.0000	100.00%	1.0000	67.0000
68.00	0.0000	100.00%	0.0000	0.0000
69.00	2.0000	100.00%	2.0000	138.0000
70.00	0.0000	100.00%	0.0000	0.0000
71.00	0.0000	100.00%	0.0000	0.0000
72.00	0.0000	100.00%	0.0000	0.0000
73.00	1.0000	100.00%	1.0000	73.0000
Total			60.3174	3,847.9741

Weighted Average Retirement Age = Weighted Age/Expected Retirements : **63.80**

* Please note that the retirement rates are a weighted average of the rates shown in Part V for active participants eligible to retire at the age and zero for all other active participants.

Plan Status

Benefit accruals were frozen as of September 8, 2016. Participation is closed to new entrants and rehires as of April 13, 2008. The plan was last amended effective August 1, 2024.

Eligibility for Participation

An Employee shall become a participant on the first day of the month following his date of hire. No employees will enter the plan on or after April 13, 2008.

Accrual of Benefits

A participant shall accrue, or accumulate, a benefit payable at Normal Retirement Age based on benefit service earned to the date of termination.

Benefits

Normal Retirement

A participant who has attained the age of 65 and has completed at least 5 years of vesting service is eligible for a retirement pension payable for life or, if married, the actuarial equivalent of such lifetime pension payable as a qualified joint and survivor annuity and determined as:

- \$10 multiplied by years of credited service granted before January 1, 1987 plus
- The amount listed in the table below multiplied by years of credited service granted after December 31, 1986

<u>Date of Termination of Employment</u>	<u>Amount</u>
Prior to September 30, 1987	\$ 11.00
September 30, 1987 - March 31, 1994	\$ 22.00
April 1, 1994 - March 31, 1995	\$ 23.00
April 1, 1995 - March 31, 1996	\$ 24.00
April 1, 1996 - March 31, 1997	\$ 25.00
April 1, 1997 - April 5, 1998	\$ 26.00
April 6, 1998 - April 8, 2003	\$ 28.00
April 9, 2003 - December 31, 2005	\$ 30.00
January 1, 2006 - December 31, 2011	\$ 31.50
January 1, 2012 - December 31, 2012	\$ 32.50
January 1, 2013 and thereafter	\$ 33.50

Early Retirement

After reaching either (1) age 60 and completing 15 years of vesting service, or (2) the earliest Social Security eligibility age (age 62), a participant may retire and receive an immediate monthly benefit equal to the participant's accrued benefit reduced 0.6% for each month by which the participant's early retirement date precedes his normal retirement date.

Effective for retirements until June 22, 2027, a participant's monthly early retirement benefit shall not be reduced for early commencement if the participant terminates after reaching age 62 and 15 years of vesting service.

Late Retirement

If a participant works beyond his Normal Retirement Date, benefits continue to accrue up through the accrual freeze date of September 8, 2016.

A participant's monthly late retirement benefit will equal the greater of his accrued retirement benefit commencing as of his Late Retirement Date or his accrued benefit as of his Normal Retirement Date actuarially increased for delayed commencement.

Disability

A participant who has completed 10 years of vesting service and who becomes disabled and eligible for Social Security disability payments while actively accruing benefits shall receive a monthly retirement benefit equal to his accrued benefit.

Death before Retirement

If a participant with an eligible spouse dies after completing 5 years of vesting service and before retirement benefits begin, his/her spouse shall receive a Qualified Preretirement Survivor Annuity.

If a participant with an eligible spouse dies while actively employed and after completing 10 years of vesting service and before retirement benefits begin, his/her spouse shall receive an additional supplemental Survivor Annuity of 50% of his/her accrued benefit (but not less than \$200) payable immediately as long as such spouse lives and does not remarry.

Termination

A participant who terminates employment after completing 5 years of vesting service will be entitled to a monthly pension at his Normal Retirement Date equal to his vested accrued benefit at date of termination. A participant who terminates with 15 or more years of vesting service may elect to receive benefits reduced for early payment beginning on or after attaining his earliest retirement age 60. A participant who terminates with less than 15 years of vesting service may elect to receive benefits reduced for early payment beginning on or after the earliest Social Security eligibility age (age 62).

Year of Service

Service for all purposes is granted on the basis of completed years and months of employment.

Employee Contributions

Participants shall not be required or permitted to make contributions under the Plan.

Payment Forms

Normal Form

Qualified Joint and Survivor Annuity (50% Joint and Survivor) for married participants (reduced actuarially) and a Single Life Annuity for single participants

Optional Forms

100%, 75%, and 25% Joint and Survivor Annuities

Actuarial Equivalence

Actuarial Equivalence will be computed using a fixed blend of 50% of the unloaded male and 50% of the unloaded female mortality rates underlying the 1994 GAR Mortality Table projected to 2002 and 6.0%.

Plan Provisions Not Included

We are not aware of any plan provisions not included in the valuation.

DALTON CORPORATION, WARSAW MANUFACTURING FACILITY
PENSION PLAN

Warsaw, Indiana

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2024

EIN : 35-0259770 PLAN NUMBER: 002

Information in support of Form 5500, Schedule H, Part IV, item 4(i)

(a) <u>Identity of Issue, Borrower, Lessor, or Similar Party</u>	(b) <u>Description of Investment - Including Maturity Date, Rate of Interest, Par or Maturity Value</u>	(c) <u>Date, Rate of Interest, Par or Maturity Value</u>	(d) <u>Cost</u>	(e) <u>Current Market Value</u>
US Treasury	<u>U.S. Government Securities:</u> Treasury Note 4.375%		2,000,247	1,995,978
US Treasury	Treasury Note 0.625%		500,364	520,014
AMG	<u>Mutual Funds:</u> Panthleon Credit Solutions		3,349,781	3,582,119
ISHS	<u>Exchange Traded Funds:</u> 25 Yr Treasury		5,542,883	5,243,533
JP Morgan	Income ETF		3,370,152	3,403,115
SPDR	Portfolio Dvlpd Wrld ETF		3,115,178	3,038,048
Vanguard	Growth ETF		2,568,058	3,139,866
Vanguard	Small Cap Growth ETF		776,116	882,469
Vanguard	Small Cap Value ETF		501,854	598,107
Vanguard	Total Bond Market ETF		2,107,387	2,132,851
Vanguard	Value ETF		4,645,509	4,962,691
Total			28,477,529	29,498,791

* Denotes party-in-interest

Development of Shortfall Amortization Charge

Type of Base	Present Value of Remaining Installments	Valuation Date Established	Years Remaining	Amortization Installment
Shortfall	\$(1,246,494)	1/1/2024	15	\$(113,406)
Shortfall	\$ 2,987,413	1/1/2023	14	\$ 285,127
	<u>\$ 1,740,919</u>			<u>\$ 171,721</u>

* The shortfall amortization charge cannot be less than zero.

Changes since Prior Valuation and Key Notes

The plan provides for an unreduced early retirement for any individuals retiring directly from active status after reaching the age of 62. The sunset date of this provision was extended from June 22, 2024 to June 22, 2027. This resulted in an increase in the Funding Target.

The interest rates and mortality assumptions have been updated as required under the Pension Protection Act, all subsequent legislation, and associated IRS Regulations, including the changes presented by the American Rescue Plan Act of 2021. These changes resulted in an increase in the Funding Target.

The load applied to the Target Normal Cost decreased from \$450,000 to \$340,000 to reflect anticipated PBGC Premiums and administrative expenses to be paid from the trust.

The interest rate used to determine liabilities under ASC 960 was decreased from 6.66% to 6.22%. This change resulted in an increase in the Present Value of Accrued Benefits.