

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">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 style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; text-align: center;">2024</p> <hr/> <p style="text-align: center;">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>MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</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>MANSFIELD PLUMBING PRODUCTS LLC</u></p> <p style="text-align: center;"><u>P.O. BOX 620</u> <u>150 E. 1ST STREET</u> <u>PERRYSVILLE, OH 44864-0620</u> <u>PERRYSVILLE, OH 44864-0620</u></p>	<p>1c Effective date of plan <u>01/01/1987</u></p> <p>2b Employer Identification Number (EIN) <u>31-1739929</u></p> <p>2c Plan Sponsor's telephone number <u>419-938-5211</u></p> <p>2d Business code (see instructions) <u>339900</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.	10/13/2025	CORY NICHOLSON
	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	577
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)	12
	6a(2)	7
	6b	192
	6c	269
	6d	468
	6e	37
	6f	505
	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:
11

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

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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>MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>MANSFIELD PLUMBING PRODUCTS LLC</u>	D Employer Identification Number (EIN) <u>31-1739929</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>14242323</u>
	b Actuarial value	2b	<u>15666555</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>204</u>	<u>8989392</u>
	b For terminated vested participants	<u>362</u>	<u>8586211</u>
	c For active participants	<u>12</u>	<u>399180</u>
	d Total	<u>578</u>	<u>17974783</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>5.16 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>498894</u>
	c Target normal cost	6c	<u>498894</u>

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

SIGN HERE <u>JEANNINE JODHAN</u> Signature of actuary <u>MANULIFE JOHN HANCOCK</u> Firm name <u>200 BERKELEY STREET BOSTON, MA 02116</u> Address of the firm	<u>08/19/2025</u> Date <u>23-07262</u> Most recent enrollment number <u>781-619-2000</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>7.69</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)		181
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>5.21</u> %		9
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		190
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	87.13 %
15	Adjusted funding target attainment percentage	15	89.31 %
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	87.82 %
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		
04/15/2024	202428	0					
07/08/2024	121866	0					
10/15/2024	162399	0					
01/14/2025	162399	0					
08/08/2025	101750	0					
			Totals ▶	18(b)	750842	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 722397	
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: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 64
23 Mortality table(s) (see instructions)	<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 type="checkbox"/> Yes <input checked="" 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 498894
b Excess assets, if applicable, but not greater than line 31a				31b 0
32 Amortization installments:	Outstanding Balance		Installment	
a Net shortfall amortization installment	2313312		222877	
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 721771
	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 721771
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)				37 722397
38 Present value of excess contributions for current year (see instructions)				
a Total (excess, if any, of line 37 over line 36)				38a 626
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 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 MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 MANSFIELD PLUMBING PRODUCTS LLC	D Employer Identification Number (EIN) 31-1739929	

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)

JOHN HANCOCK RETIREMENT PLAN SVCS

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 15 62 64	RETAINED BY EMPLOYER	161119	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

MORGAN STANLEY

20-8764829

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	RETAINED BY EMPLOYER	49819	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)

RYAN LABS

13-3451974

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	RETAINED BY EMPLOYER	6250	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"/>

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.	OMB No. 1210-0110 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 MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MANSFIELD PLUMBING PRODUCTS LLC	D Employer Identification Number (EIN) 31-1739929

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
a Total noninterest-bearing cash	1a	74973	78132
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	354163	264149
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	98345	96430
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	968	2592
(2) U.S. Government securities	1c(2)	2451853	1883834
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	5646559	5260912
(B) All other	1c(3)(B)	3714218	3151448
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	1095482	1082633
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(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)	715452	493448
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	102765	96782

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	14254778	12410360
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	14254778	12410360

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)	750842	
(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)		750842
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-15	
(B) U.S. Government securities.....	2b(1)(B)	27887	
(C) Corporate debt instruments.....	2b(1)(C)	375897	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	6205	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		409974
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	49349	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	17703	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		67052
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	5548288	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	5559009	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-10721
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-307983	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-307983

		(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)		5380
c Other income	2c		47138
d Total income. Add all income amounts in column (b) and enter total	2d		961682

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2344510	
(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)		2344510
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)	161119	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	56843	
(6) Bank or trust company trustee/custodial fees	2i(6)	3004	
(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)	240624	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		461590
j Total expenses. Add all expense amounts in column (b) and enter total	2j		2806100

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-1844418
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: **MOLONEY + NOVOTNY LLC**

(2) EIN: **34-0677006**

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		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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 547353.

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>MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MANSFIELD PLUMBING PRODUCTS LLC</u>	D Employer Identification Number (EIN) <u>31-1739929</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		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 80-0709115

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		55
---	--	----

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 _____.

**MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR
HOURLY EMPLOYEES**

FINANCIAL REPORT

DECEMBER 31, 2024 and 2023



MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

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+ 1111 Superior Avenue, Suite 700, Cleveland, Ohio 44114
+ p 216.363.0100 | f 216.363.0500
+ www.maloneynovotny.com

Independent Auditors' Report

Plan Administrator for the
Mansfield Plumbing Products, LLC
Retirement Plan for Hourly Employees
Perrysville, Ohio

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

We have performed audits of the financial statements of the Mansfield Plumbing Products, LLC Retirement Plan for Hourly Employees (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as 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.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the years then ended, stating that the certified investment information, as described in Note 7 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audits of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified to by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audits of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' 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 one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

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

Our audits did not extend to the certified investment information, except for obtaining and reading the 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 GAAP.

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

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the 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 the supplemental schedule of reportable transactions for the year then ended are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Meloney + Novotny LLC

Cleveland, Ohio
October 10, 2025

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2024 and 2023

<u>ASSETS</u>	<u>2024</u>	<u>2023</u>
CASH	\$ 78,132	\$ 74,973
INVESTMENTS, AT FAIR VALUE		
Interest-bearing cash	2,592	968
U.S. government securities	1,883,834	2,451,853
Corporate debt instruments	8,509,142	9,463,542
Corporate stocks	1,082,633	1,095,482
Registered investment companies	493,448	715,452
Total investments, at fair value	<u>11,971,649</u>	<u>13,727,297</u>
RECEIVABLES		
Employer contribution	264,149	354,163
Investment earnings	96,430	98,345
Total receivables	<u>360,579</u>	<u>452,508</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$12,410,360</u>	<u>\$14,254,778</u>

The accompanying notes are an integral part of these financial statements.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Investment income:		
Interest and dividends	\$ 17,703	\$ 17,023
Net appreciation in fair value of investments	<u>146,209</u>	<u>1,174,368</u>
Total investment income	163,912	1,191,391
Contributions:		
Employer contributions	750,842	854,163
Other income	<u>46,928</u>	<u>-</u>
Total additions	961,682	2,045,554
DEDUCTIONS		
Benefits paid directly to participants	2,344,510	1,194,559
Purchases of annuity contracts	-	3,679,000
Administrative expenses	<u>461,590</u>	<u>581,053</u>
Total deductions	<u>2,806,100</u>	<u>5,454,612</u>
NET DECREASE	(1,844,418)	(3,409,058)
NET ASSETS AVAILABLE FOR BENEFITS – BEGINNING	<u>14,254,778</u>	<u>17,663,836</u>
NET ASSETS AVAILABLE FOR BENEFITS – ENDING	<u>\$12,410,360</u>	<u>\$14,254,778</u>

The accompanying notes are an integral part of these financial statements.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS

Note 1. Significant Accounting Policies

Basis of Accounting

The Mansfield Plumbing Products, LLC Retirement Plan for Hourly Employees (the "Plan") uses the accrual basis of accounting. Benefit payments to participants are recorded upon distribution.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's management determines the Plan's valuation policies utilizing information provided by its investment advisers and John Hancock Trust Company (the "Trustee"). See Note 8 for a discussion of fair value measurements.

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

Administrative Expenses

Fees of the Plan are paid by Mansfield Plumbing Products, LLC (the "Company") or the Plan at the discretion of the Company. Fees may be offset with funds made available by the Trustee from fees it receives from investment fund managers.

Use of Estimates

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

Subsequent Events

The Plan has evaluated subsequent events through October 10, 2025, the date the financial statements were available to be issued.

Note 2. Description of Plan

The following brief description of the Plan is provided for general information purposes only. Participants should refer to the plan agreement for more complete information.

General

The Plan is a defined benefit pension plan, established in April 1964, for designated hourly employees of Mansfield Plumbing Products, LLC ("Mansfield") (including the Kilgore Plumbing Products ("Kilgore") and Norris Plumbing Products ("Norris") divisions) (the "Company") who meet the requirements of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 2. Description of Plan (Continued)

General (Continued)

The Kilgore Ceramics Shop Employees' Pension Plan (the "Kilgore Plan") was originally established in 1964 and via various corporate acquisitions and restructuring, effective December 31, 1994, the Kilgore Plan, the Mansfield Plumbing Products, Inc. Hourly Pension Plan, and the Norris Plumbing Products Retirement Plan for Hourly Employees were merged and renamed the Mansfield Plumbing Products, Inc. Retirement Plan for Hourly Employees.

Effective January 1, 2001, the Plan was amended to incorporate certain legislative changes and was renamed the Mansfield Plumbing Products, LLC Retirement Plan for Hourly Employees.

Effective July 31, 2008, the Plan was amended to freeze participation and benefit accruals. Participants will continue to accrue years of service solely for vesting purposes.

Effective January 1, 2014, the Plan was restated to incorporate previous amendments and certain legislative changes.

In 2023, the Plan was amended to allow for the Company to enter into a contract with an annuity provider, Western & Southern Life ("WSL"), to purchase nontransferable annuities for certain retirees of the Plan. Effective October 1, 2023, WSL assumed the benefit liability of each participant in the Plan who was in pay status as of July 11, 2023, and who was receiving a monthly benefit of \$250 or less. A single premium of \$3,679,000 was paid to the insurance company in 2023 to purchase these annuities. During the final reconciliation of the contract in 2024, premium was reduced to \$3,634,649, resulting in an overpayment of \$44,351 for which the Plan was reimbursed in 2024. The overpayment is recorded as other income for the year ended December 31, 2024. The obligation to continue benefit payments to these retirees was transferred to WSL and no longer remains with the Plan.

Benefits

Each participant is entitled to a monthly benefit for each year of credited service upon reaching age 65. The benefit level varies for each division (Mansfield, Kilgore, and Norris). See the plan document for the amount received per year of credited service for each division.

A participant may elect early retirement as permitted by the terms of the Plan. Benefits under this election would be determined in the same manner as for normal retirement but would be based on years of credited service up to the date of retirement, reduced by the appropriate early retirement factor, as defined in the plan document. The Plan also provides for the payment of benefits upon death and disability.

A participant may continue in active employment after his/her normal retirement date. In such a case, the amount of pension benefits will be determined in the same manner as for normal retirement but will be based upon credited service up to the date of retirement.

A retirement benefit will be provided for a terminated participant who meets the appropriate vesting requirements. The retirement benefit will be determined in the same manner as for normal retirement but based on credited service up to the date of termination.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 2. Description of Plan (Continued)

Vesting

Participants are vested on a five-year cliff. Once participants are 100% vested, they are eligible to receive benefits upon retirement. Prior to meeting the service requirement, a participant is not vested.

Note 3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments including lump-sum distributions that are attributable under the Plan's provisions to the service which 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 the credited service as of the date the benefit information is presented (the valuation date). Benefits payable under all circumstances - retirement, death, disability, and termination of employment - are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits was determined by an independent actuary from John Hancock Retirement Plan Services, LLC 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 for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuations as of January 1, 2024 and 2023 were (a) life expectancy of participants based on the Pri-2012 Blue-Collar Mortality Table with Generational Projection Scale MP 2021; (b) retirement age of 65; and (c) a discount rate used to value plan benefits of 6.00%. The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

The accumulated plan benefit information as of January 1, 2024 is as follows:

Actuarial present value of accumulated plan benefits:

Vested benefits:

Participants currently receiving payments	\$15,901,149
Other participants	355,988
	<u>16,257,137</u>

Nonvested benefits	<u>7,325</u>
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Total accumulated plan benefits	<u><u>\$16,264,462</u></u>
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MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 3. Actuarial Present Value of Accumulated Plan Benefits (Continued)

The change in accumulated plan benefits from January 1, 2023 to January 1, 2024 is as follows:

Actuarial present value of accumulated plan benefits – January 1, 2023		\$19,863,092
Increase (decrease) during the period attributable to:		
Additional benefits earned, including experience gains and losses	\$ 210,570	
Decrease in discount period	1,064,359	
Benefits paid	<u>(4,873,559)</u>	
Net decrease		<u>(3,598,630)</u>
Actuarial present value of accumulated plan benefits – January 1, 2024		<u>\$16,264,462</u>

As part of the amendment referenced in Note 2, the Plan entered into a group annuity contract with WSL in 2023 to transfer certain benefit liabilities from the Plan to WSL, which is reflected in the above table.

Note 4. Funding Policy

The Company contributes such amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to Plan participants. For the plan year ended December 31, 2024, the Company contributions totaled \$750,842 of which \$486,693 was paid in 2024 and \$264,149 was paid in 2025. For the plan year ended December 31, 2023, the Company contributions totaled \$854,163 of which \$500,000 was paid in 2023 and \$354,163 was paid in 2024. The Plan has met the minimum funding requirements of ERISA for 2024 and 2023. Earnings or losses on the Plan's investments are used to reduce or increase the Company's contributions to the Plan. Participant contributions are not permitted under the Plan.

Note 5. Plan Termination

Although the Company has not expressed any intent to terminate the pension plan agreement, it may do so at any time. In the event of a complete termination of the Plan, the assets then remaining in the pension fund, after providing for expenses of administration, shall be allocated, to the extent that they shall be sufficient, for the purpose of funding the accrued benefits to the date of termination of the Plan of all pensioners, participants, vested former participants, and beneficiaries in the manner and order of precedence required under the terms of Section 4044 of ERISA, and any funds remaining in the pension fund after funding in full all of said accrued benefits shall revert to the Company. In the event of a partial termination of the Plan, the portion of the assets of the pension fund relating to the terminated portion of the Plan shall be allocated as aforesaid for the purpose of funding the accrued benefits of pensioners, participants, vested former participants, and beneficiaries whose benefit rights are affected by such partial termination.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 5. Plan Termination (Continued)

Whether a particular participant's accumulated plan benefits will be paid depends on the priority of those benefits, the sufficiency of Plan assets at that time to provide for accumulated benefit obligations, the level of benefits guaranteed by the Pension Benefit Guaranty Corporation ("PBGC") at that time, and may also depend on the financial condition of the Plan sponsor or the PBGC at that time. Certain benefits under the Plan are insured by the PBGC if the Plan terminates. The PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection is subject to certain limitations.

Note 6. Income Tax Status

The Plan has adopted an approved volume submitter plan document. This document has obtained an opinion letter dated February 19, 2016 from the Internal Revenue Service ("IRS") in which the IRS stated that the document, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since adopting this approved volume submitter document. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

The plan administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require such recognition or disclosure in the financial statements.

Note 7. Unaudited Information

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the plan administrator received certifications from John Hancock Trust Company acknowledging the completeness and accuracy of all investments reflected in the statements of net assets available for benefits at December 31, 2024 and 2023, the supplemental schedules at December 31, 2024 and for the year then ended, the related investment activity reflected in the statements of changes in net assets available for benefits for the years ended December 31, 2024 and 2023, and investment related information in the accompanying notes to the financial statements. This information is unaudited by independent accountants.

Note 8. Fair Value Measurements

The Plan estimates the fair value of financial instruments using available market information and other generally accepted valuation methodologies. The inputs used to measure fair value are classified into three levels:

Level 1 – Quoted market prices in active markets for identical assets and liabilities

Level 2 – Observable market-based inputs or unobservable inputs that are corroborated by market data

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 8. Fair Value Measurements (Continued)

Level 3 – Unobservable inputs in which little or no market data exists

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

- The fair values of registered investment companies and corporate stocks are determined based on their quoted closing market prices in active markets for identical investments, and are classified as Level 1.
- The fair values of corporate debt instruments and U.S. government securities are valued based on observable market information in primary markets or determined by pricing services based on market values for investments with similar credit ratings and maturity dates. These securities are classified as Level 2.
- Interest-bearing cash is valued at \$1 per share and considered to be Level 1.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future values. There have been no changes in the methodologies used from 2023 to 2024. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine 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 the Plan's assets at fair value as of December 31, 2024 and 2023:

	Assets at Fair Value as of December 31, 2024			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Interest-bearing cash	\$ 2,592	\$ -	\$ -	\$ 2,592
U.S. government securities	-	1,883,834	-	1,883,834
Corporate debt instruments	-	8,509,142	-	8,509,142
Corporate stocks	1,082,633	-	-	1,082,633
Registered investment companies	<u>493,448</u>	<u>-</u>	<u>-</u>	<u>493,448</u>
Total	<u><u>\$1,578,673</u></u>	<u><u>\$10,392,976</u></u>	<u><u>\$ -</u></u>	<u><u>\$11,971,649</u></u>

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 8. Fair Value Measurements (Continued)

	Assets at Fair Value as of December 31, 2023			
	Level 1	Level 2	Level 3	Total
Interest-bearing cash	\$ 968	\$ -	\$ -	\$ 968
U.S. government securities	-	2,451,853	-	2,451,853
Corporate debt instruments	-	9,463,542	-	9,463,542
Corporate stocks	1,095,482	-	-	1,095,482
Registered investment companies	715,452	-	-	715,452
Total	\$1,811,902	\$11,915,395	\$ -	\$13,727,297

Note 9. Party-in-Interest Transactions

Parties-in-interest are defined under Department of Labor regulations as any fiduciary of the Plan, any party rendering service to the Plan, the employer, and certain others. The Trustee represents a party-in-interest as it also provides administrative services to the Plan.

During 2024 and 2023, administrative expenses were paid by the Plan to the Trustee, as well as to John Hancock Retirement Plan Services, LLC, the Plan's actuary. These expenses constitute party-in-interest transactions.

Note 10. Risks and Uncertainties

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

Plan contributions are made and the actuarial present value of accumulated plan benefits is 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.

Attachment to 2024 Form 5500
Schedule SB, line 26: schedule of active participant data

Plan name: Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees **EIN:** 31-1739929
Plan sponsor: Mansfield Plumbing Products LLC **PN:** 001

Schedule of active participant data

	Years of credited service										
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	>40	Total
Attained Age											
<25											
25-29											
30-34											
35-39											
40-44						1					1
45-49											
50-54						1	1				2
55-59						2			2		4
60-64							1		4		5
65-69											
>70											
Total						4	2		6		12

Attachment to 2024 Form 5500

Schedule SB, Part V: statement of actuarial assumptions and methods

Plan name: Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees **EIN:** 31-1739929
Plan sponsor: Mansfield Plumbing Products LLC **PN:** 001

Actuarial cost method

Funding target and target normal cost

An actuarial cost method allocates the expected cost of a pension plan on a year-by-year basis. The primary objective is to accumulate enough assets prior to each participant's retirement to provide the promised pension benefits.

The Pension Protection Act of 2006 (PPA) requires plan sponsors to use the Traditional Unit Credit actuarial cost method in which the estimated accrued benefit is based on service and, if applicable, earnings as of the valuation date. The funding target is equal to the actuarial present value of all accrued benefits as of the valuation date. The target normal cost is the actuarial present value, as of the valuation date, of the expected increases in projected accrued benefits attributable to service expected to be completed during the plan year (i.e., if applicable, one year's salary growth is reflected in the determination of target normal cost).

For tax deduction purposes, the funding target may reflect the value of future pay increases on accrued benefits, if applicable.

PPA discounting method

The plan sponsor must choose between full yield curve spot rates or a segmented yield curve of 24-month average corporate bond rates. If the segmented yield curve is selected, the plan sponsor can use either the rates as of the month of the valuation or as of a lookback month, up to 4 months prior to the valuation date. If the full yield curve is selected, the rates as of the month of valuation must be used.

For purposes of this valuation, the following discounting method was used and is assumed to be approved by the plan sponsor:

January 2024 segment rates, adjusted so each segment rate is no less than the applicable minimum percentage* of the corresponding 25-year average segment rate for the calendar year that contains the first day of the plan year and no more than the applicable maximum percentage of that 25-year average segment rate. The 25-year average cannot be less than 5.0% prior to application of the corridor.**

Asset valuation method

Plan assets for purposes of this actuarial valuation are valued under the asset averaging method, including, if applicable, discounted receivable contributions. The value is equal to the average of the fair market value of assets on the valuation date and the adjusted fair market value (including expected earnings) for the two earlier annual determination dates. Expected earnings are calculated using a rate no greater than the third segment rate of the segmented yield-curve in effect at the beginning of each valuation year. The resulting average value must be fall between 90 and 110 percent of the fair market value of assets on the valuation date.

* Minimum is 95% through 2030, decreasing 5% per year beginning in 2031 until 70% is reached in 2035

** Maximum is 105% through 2030 and increasing 5% per year beginning in 2031 until 130% is reached in 2035

Attachment to 2024 Form 5500

Schedule SB, Part V: statement of actuarial assumptions and methods

Plan name:	Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees	EIN:	31-1739929
Plan sponsor:	Mansfield Plumbing Products LLC	PN:	001

Actuarial assumptions

Actuarial assumptions

Economic Assumptions

<u>PPA Segment Rates</u>	<u>Funding Target</u>	<u>Maximum Deductible Funding Target</u>	<u>PBGC Funding Target</u>
- Segment 1: Up to Year 5	4.75%	4.37%	5.01%
- Segment 2: Years 5-20	4.96%	4.96%	5.13%
- Segment 3: Years 20+	5.59%	4.95%	5.15%

Expected Return on Plan Assets: 6.00% (limited to PPA 3rd Segment Rate)
 ASC 960 Discount Rate: 6.00%

Annual rates of increase:

- Salaries N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation and benefits N/A

Demographic Assumptions

Mortality:

- Funding IRS 2024 Generational Mortality
- ASC 960 Pri-2012 Blue Collar Mortality Table (Total Dataset) with Generational Projection (Scale MP 2021)

Retirement:

Rates of retirement as follows:

<u>Age</u>	<u>Retirement</u>
60-61	6%
62	25%
63-64	15%
65	100%

Terminated vested participants assumed to retire at age 65.

Disability:

Illustrative rates as follows:

<u>Age</u>	<u>Rate</u>	<u>Age</u>	<u>Rate</u>
20	0.03%	45	0.08%
25	0.03%	50	0.21%
30	0.03%	55	0.45%
35	0.03%	60	1.01%
40	0.04%	62	1.44%

Actuarial assumptions

Terminations:

Illustrative annual rates of withdrawal as follows:

<u>Age</u>	<u>Rate</u>	<u>Age</u>	<u>Rate</u>
20	6.58%	45	3.22%
25	5.27%	50	1.53%
30	4.83%	55	0.33%
35	4.47%	60	0.00%
40	3.84%		

Miscellaneous Assumptions

Form of Payment:

Life Annuity

Expenses:

Equal to prior year's administrative expenses and the current year's estimated PBGC premium

Percent Married:

80%

Spouse's Age:

Wives assumed to be three years younger than their husbands

Rationale for significant assumptions

Economic assumptions

- **Expected return on plan assets:** The assumption was selected by the client with input from their investment advisor. We believe the assumption is reasonable as it falls within a reasonable range of expected returns for the plan's asset allocation based on capital market assumptions.
- **ASC 960 discount rate:** This assumption was selected by the plan sponsor and is based on the expected return on plan assets assumption.

Demographic Assumptions

- **ASC 960 mortality:** The mortality base table and projection scale is based on the most recent mortality table and improvement scale published by the Society of Actuaries and in our judgement, adequately reflects expected mortality rates as of the measurement date. The SOA elected not to release a new mortality scale for 2023 which would have included mortality data affected by the COVID-19 pandemic, but instead will continue to study emerging mortality experience and assess what mortality improvement scale options might be considered to be implemented in the future. As such, we have decided not to reflect any adjustments to the most recent mortality improvement scale. The plan's size would not support a credible mortality study.
- **Termination:** We believe that this assumption is representative of anticipated future experience. Historically, this assumption has not produced significant gains or losses for the plan. In addition, based on discussions with the plan sponsor, significant changes in termination patterns are not expected.
- **Disability:** We believe that this assumption is representative of anticipated future experience. Historically, this assumption has not produced significant gains or losses for the plan. In addition, based on discussions with the plan sponsor, significant changes in disability patterns are not expected.
- **Retirement:** We believe that this assumption is representative of anticipated future experience. Historically, this assumption has not produced significant gains or losses for the plan. In addition, based on discussions with the plan sponsor, significant changes in retirement patterns are not expected.

Miscellaneous assumptions

- **Expenses:** The assumption is based on the expectation of expenses to be paid out during the plan year, based on actual PBGC expenses projected for the year, and assuming non-PBGC related expenses will be similar to the prior year.
- **Form of payment:** All optional forms are actuarially equivalent, and the assumption is based on the normal form of payment.
- **Spouse's age and percent married:** The employer does not have enough credible data to analyze spousal demographics. These assumptions are based on the actuary's experience with similar plans.

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

EMPLOYER NO. 31-1739929
PLAN NO. 001

SCHEDULE H, LINE 4(j) - SCHEDULE OF REPORTABLE TRANSACTIONS

Year Ended December 31, 2024

INDIVIDUAL SECURITY TRANSACTIONS IN EXCESS OF 5%
OF THE CURRENT VALUE OF PLAN ASSETS
AT THE BEGINNING OF THE YEAR

Total Current Value of Plan	
Assets - January 1, 2024.....	\$14,254,778
5% of Total Current Value of	
Plan Assets	\$712,739

Identity of (a) <u>Party</u>	(b) <u>Description of Asset</u>	Purchase (c) <u>Price</u>	Selling (d) <u>Price</u>	Lease (e) <u>Rental</u>	Expenses Incurred With (f) <u>Transaction</u>	Cost of (g) <u>Asset</u>	Current Value of Assets on Transaction (h) <u>Date</u>	Net Gain or (i) <u>Loss</u>
John Hancock	SLC Management SLC LDI Sep Acct	N/A	\$ 850,000	N/A	\$ -	\$ 676,084	\$ 850,000	\$ 173,916
John Hancock	Federated Hermes Federated Hermes Govt Oblgn Pm	N/A	1,066,556	N/A	-	1,066,556	1,066,556	-
John Hancock	Federated Hermes Federated Hermes Govt Oblgn Pm	\$1,101,009	N/A	N/A	-	N/A	1,101,009	N/A

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

EMPLOYER NO. 31-1739929
PLAN NO. 001

SCHEDULE H, LINE 4(j) - SCHEDULE OF REPORTABLE TRANSACTIONS

Year Ended December 31, 2024

SERIES OF SECURITY TRANSACTIONS IN EXCESS OF 5%
OF THE CURRENT VALUE OF PLAN ASSETS
AT THE BEGINNING OF THE YEAR

Total Current Value of Plan	
Assets - January 1, 2024.....	\$14,254,778
5% of Total Current Value of	
Plan Assets	\$712,739

Identity of (a) <u>Party</u>	(b) <u>Description of Asset</u>	Purchase (c) <u>Price</u>	Selling (d) <u>Price</u>	Lease (e) <u>Rental</u>	Expenses Incurred With (f) <u>Transaction</u>	Cost of (g) <u>Asset</u>	Current Value of Assets on Transaction (h) <u>Date</u>	Net Gain or (i) <u>Loss</u>
John Hancock	SLC Management SLC LDI Sep Acct	N/A	\$1,525,000	N/A	\$ -	\$ 1,217,975	\$ 1,525,000	\$ 307,025
John Hancock	Federated Hermes Federated Hermes Govt Oblgn Pm	\$2,735,832	N/A	N/A	-	N/A	2,735,832	N/A
John Hancock	Federated Hermes Federated Hermes Govt Oblgn Pm	N/A	2,758,410	N/A	-	2,758,410	2,758,410	-

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 MANSFIELD PLUMBING PRODUCTS LLC RETIREMENT PLAN FOR HOURLY EMPLOYEES	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF MANSFIELD PLUMBING PRODUCTS LLC	D Employer Identification Number (EIN) 31-1739929	
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	14,242,323	
b Actuarial value	2b	15,666,555	
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	204	8,989,392	8,989,392
b For terminated vested participants	362	8,586,211	8,586,211
c For active participants	12	399,180	404,264
d Total	578	17,974,783	17,979,867
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	5.16%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	498,894	
c Target normal cost	6c	498,894	

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>8/19/2025</u> Date
	<u>JEANNINE JODHAN</u> Type or print name of actuary	<u>2307262</u> Most recent enrollment number
	<u>MANULIFE JOHN HANCOCK</u> Firm name	<u>781-619-2000</u> Telephone number (including area code)
	<u>200 BERKELEY STREET</u> <u>BOSTON MA 02116</u> Address of the firm	

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

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

21 Discount rate:

a Segment rates:	1st segment: 4.75 %	2nd segment: 4.96 %	3rd segment: 5.59%	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code)..... **21b** 0

22 Weighted average retirement age **22** 64

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

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

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c).....	31a	498,894
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2,313,312	222,877
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	721,771
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement	0	0

36 Additional cash requirement (line 34 minus line 35).....	36	721,771
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	722,397

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

a Total (excess, if any, of line 37 over line 36)	38a	626
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

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

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

Attachment to 2024 Form 5500

Schedule SB, line 22: description of weighted average retirement age

Plan name: Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees **EIN:** 31-1739929
Plan sponsor: Mansfield Plumbing Products LLC **PN:** 001

Description of weighted average retirement age

Age	Expected Active Headcount	Retirement Rate	Expected Retirements	Weighted Age
60	6.4443	0.0600	0.3867	23.1995
61	6.9689	0.0600	0.4181	25.5061
62	7.4376	0.2500	1.8594	115.2835
63	6.4383	0.1500	0.9657	60.8421
64	7.3309	0.1500	1.0996	70.3769
65	6.0486	1.0000	6.0486	393.1581
Total			10.7782	688.3663
Average				63.87

Attachment to 2024 Form 5500
Schedule SB, Part V: summary of plan provisions

Plan name:	Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees	EIN:	31-1739929
Plan sponsor:	Mansfield Plumbing Products LLC	PN:	001

Summary of plan provisions

Summary of plan provisions

Employee:	Perrysville Employees compensated on an hourly basis at the Company's plants in Perrysville or Big Prairie, Ohio. Walnut and Kilgore operations ceased in 2000 and 2002 respectively. There are no new participants from these locations. Employees who were vested participants at the time operations ceased and have not been paid their benefits in full are still participants of the plan.	
Eligibility Requirements:	Perrysville:	One Year of Service
Plan Entry Date:	An eligible employee will enter the plan on the first day of the month following completion of the eligibility requirements. Plan entry was frozen effective July 31, 2008.	
Year of Service:	12-consecutive month computation period in which an employee is credited with 1,000 or more hours of service. The computation period is measured on the employee's anniversary date for all active employees. No further benefit service will accrue after July 31, 2008.	
Normal Retirement Date:	First of month coincident with or following attainment of age 65. Former Kilgore Employees are also required to have five years of vesting service.	
Normal Form of Benefit:	Life Annuity (single), 50% Joint & Survivor	
Optional Forms of Benefit:	Life Annuity, 50% Joint & Survivor, 75% Joint & Survivor 100% Joint & Survivor	

Normal Retirement Benefit:	<u>Perrysville</u>	
	<u>Retirement Date</u>	<u>Amount Per Year of Credited Service</u>
	1/1/97 – 12/31/98	\$16.00
	1/1/1998	\$17.00
	1/1/1999	\$18.00
	1/1/2000	\$19.00
	1/1/2001	\$20.00
	1/1/2002	\$20.50
	1/1/2003 and later	\$21.00

Summary of plan provisions

Kilgore

<u>Retirement Date</u>	<u>Amount Per Year of Credited Service</u>
1/1/97 – 12/31/98	\$16.50
1/1/1999	\$17.00
1/1/2000	\$17.50
1/1/2001	\$18.00
1/1/2002 and later	\$18.50

Walnut

<u>Retirement Date</u>	<u>Amount Per Year of Credited Service</u>
5/1/95 – 12/1/96	\$16.50
1/1/97 – 12/31/98	\$17.00
1/1/99 – 12/31/99	\$17.50
1/1/00 and later	\$18.00

Accrued benefits were frozen effective April 6, 2000 for Walnut Employees, May 31, 2002 for Kilgore Employees and July 31, 2008 for Mansfield (Perrysville) Employees.

Early Retirement Benefit:

Perrysville

Age 55 or later and 15 years of service. Benefit determined under the same formula as for normal retirement but based on credited service to early retirement date, reduced for earlier commencement by $1 / 180^{\text{th}}$ for each of the first 60 months by which commencement date precedes normal retirement date and by $1 / 360^{\text{th}}$ for the each of the next 60 months.

Kilgore

Age 60 or later and 10 years of vesting service. Benefit determined under same formula as for normal retirement but based on benefit service to early retirement date, reduced for earlier commencement by .6% for each month commencement date precedes normal retirement date. No reduction if age 60 or older with 30 or more years of credited service.

Summary of plan provisions

Early Retirement Benefit (cont.):	<p><u>Walnut</u> Age 60 or later and 5 years of service. Benefit determined under the same formula as for normal retirement but based on credited service to early retirement date, reduced for earlier commencement by .4% for each month commencement date precedes normal retirement date, if employee has less than 30 years of credited service. If employee has 30 or more years of credited service, the reduction is from age 62.</p>
Late Retirement Benefit:	<p>Benefit determined under same formula as for normal retirement, but deferred to actual retirement date, based on credited service to actual retirement date.</p>
Disability Retirement Benefit:	<p>Benefit determined under same formula as for normal retirement based on credited service to disability retirement date. No reduction for early commencement.</p>
	<p><u>Perrysville</u> Age 50 or later, 10 years of service and qualify for a Social Security disability benefit.</p>
	<p><u>Kilgore</u> 10 years of vesting service, 5 years of benefit service and qualify for a Social Security disability benefit.</p>
	<p><u>Walnut</u> Age 50 or later, 10 years of service and qualify for a Social Security disability benefit.</p>
Termination of Employment:	<p>Accrued benefit determined under same formula as for normal retirement based on credited service to termination date. 100% vesting after 5 years of service.</p>
	<p><u>Perrysville</u> Early commencement of benefit at age 44 if had 15 years of service at termination and reduced for early commencement in the same manner as early retirement.</p>
	<p><u>Walnut</u> At age 60, early commencement of benefit reduced to .4% for each month commencement date precedes normal retirement date.</p>

Summary of plan provisions

Spouse's Benefit Eligibility:	Death after becoming eligible for a vested benefit. Benefits commence no earlier than earliest retirement date which could have been elected by deceased participant.
Spouse's Monthly Benefit:	Accrued benefit at time of death, adjusted as if participant had retired on date payments to spouse commence under the 50% joint and survivor annuity option, and then dies. For a terminated vested participant, the benefit shall be payable for the life of the survivor beginning with the first day of the month the participant could have elected immediate benefits had he survived equal to 50% of the joint & survivor benefit.

John Hancock Retirement Plan Services LLC provides administrative and/or recordkeeping services to sponsors or administrators of retirement plans as well as a platform of investment alternatives that is made available without regard to the individualized needs of any plan through an open-architecture platform. John Hancock Trust Company LLC provides trust and custodial services to such plans. Unless otherwise specifically stated in writing, John Hancock Retirement Plan Services LLC does not, and is not undertaking to, provide impartial investment advice or give advice in a fiduciary capacity.

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MS-PS 34391 01/22 46453

SUPPLEMENTAL SCHEDULES

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

EMPLOYER NO. 31-1739929
PLAN NO. 001

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

December 31, 2024

(a) Identity of (b) Party	(c) Description of Investment	No. of Units/Shares	(d) Cost	Current (e) Value
	Cash and cash equivalents:			
Morgan Stanley	Morgan Stanley Private Bank NA	2,591.93	\$ 2,592	\$ 2,592
	U.S. government securities:			
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2043 DD 08/15/13	450,000.00	206,883	175,567
BNY Mellon	U S TREASURY BD PRIN STRIP 0.000% 11/15/2053 DD 11/15/23	615,000.00	175,300	162,481
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2044 DD 08/15/14	430,000.00	185,210	159,846
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2045 DD 08/17/15	445,000.00	186,968	157,597
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 05/15/2054 DD 05/15/24	590,000.00	170,988	149,831
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2046 DD 08/15/16	360,000.00	145,900	121,383
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2048 DD 08/15/18	380,000.00	158,000	116,246
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2047 DD 08/15/17	355,000.00	144,508	114,232
BNY Mellon	U S TREASURY BOND 4.125% 08/15/2044 DD 08/15/24	100,000.00	96,393	90,594
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 02/15/2051 DD 02/16/21	330,000.00	135,633	90,333
BNY Mellon	U S TREASURY NOTE 4.125% 11/30/2029 DD 11/30/24	79,000.00	78,437	78,093
BNY Mellon	U S TREASURY NOTE 3.875% 08/15/2034 DD 08/15/24	75,000.00	75,957	70,934
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2052 DD 08/15/22	265,000.00	96,235	69,702
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2049 DD 08/15/19	210,000.00	95,325	61,381
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2050 DD 08/17/20	195,000.00	57,862	54,598
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 05/15/2044 DD 05/15/14	110,000.00	44,385	41,459
BNY Mellon	U S TREASURY BD PRIN STRIP 0.000% 08/15/2053 DD 08/15/23	150,000.00	42,981	39,575
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 02/15/2045 DD 02/17/15	90,000.00	30,585	32,699
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 05/15/2049 DD 05/15/19	100,000.00	32,575	29,571
BNY Mellon	PRIVATE EXPORT FUNDING CORP 4.600% 02/15/2034 DD 01/30/24	25,000.00	25,010	24,527
BNY Mellon	U S TREASURY BOND 4.625% 05/15/2054 DD 05/15/24	25,000.00	27,816	24,332
BNY Mellon	U S TREASURY BD CPN STRIP 0.000% 08/15/2051 DD 08/16/21	70,000.00	21,677	18,853
				1,883,834
	Corporate debt instruments:			
BNY Mellon	SANTANDER DRIVE AUTO RECEI 3 C 4.490% 08/15/2029 DD 05/18/22	170,000.00	169,968	169,633
BNY Mellon	GOLDMAN SACHS GROUP INC/THE VAR RT 01/27/2032 DD 01/27/21	170,000.00	164,797	140,387
BNY Mellon	BANK OF AMERICA CORP VAR RT 06/14/2029 DD 06/14/21	150,000.00	143,784	136,107
BNY Mellon	JPMORGAN CHASE & CO VAR RT 07/24/2038 DD 07/24/17	150,000.00	152,360	128,078
BNY Mellon	SLG OFFICE TRUST 20 OVA A 144A 2.585% 07/15/2041 DD 06/01/21	150,000.00	155,416	125,962
BNY Mellon	ANHEUSER-BUSCH INBEV WORLDWIDE 5.450% 01/23/2039 DD 01/23/19	125,000.00	124,957	125,330
BNY Mellon	UNITEDHEALTH GROUP INC 4.625% 07/15/2035 DD 07/23/15	130,000.00	136,287	122,781
BNY Mellon	MICROSOFT CORP 2.921% 03/17/2052 DD 03/17/21	185,000.00	186,754	122,636
BNY Mellon	ENERGY TRANSFER LP 3.900% 07/15/2026 DD 07/12/16	120,000.00	131,156	118,438
BNY Mellon	WELLS FARGO & CO 4.300% 07/22/2027 DD 07/22/15	120,000.00	136,250	118,310
BNY Mellon	COMCAST CORP 4.250% 01/15/2033 DD 01/14/13	125,000.00	127,887	116,712
BNY Mellon	APPLE INC 4.375% 05/13/2045 DD 05/13/15	120,000.00	126,567	106,083
BNY Mellon	MANUFACTURERS & TRADERS TRUST 3.400% 08/17/2027 DD 08/17/17	110,000.00	103,342	105,849
BNY Mellon	PFIZER INVESTMENT ENTERPRISES 5.300% 05/19/2053 DD 05/19/23	110,000.00	113,768	103,158
BNY Mellon	CALIFORNIA ST 7.300% 10/01/2039 DD 08/15/19	85,000.00	135,736	96,782
BNY Mellon	PNC BANK NA 4.050% 07/26/2028 DD 07/26/18	100,000.00	100,368	96,622
BNY Mellon	FINANCE OF AMERICA S6 A1 144A 3.000% 07/25/2061 DD 12/16/22	98,533.03	89,758	96,228
BNY Mellon	FREMF 2017-K71 MORT K71 C 144A VAR RT 11/25/2050 DD 12/01/17	100,000.00	102,160	95,676
BNY Mellon	BOSTON GAS CO 144A 3.001% 08/01/2029 DD 07/29/19	105,000.00	107,437	95,272
BNY Mellon	DTE ELECTRIC CO 2.950% 03/01/2050 DD 02/26/20	145,000.00	133,085	94,352
BNY Mellon	BP CAPITAL MARKETS AMERICA INC 2.721% 01/12/2032 DD 01/12/22	110,000.00	102,486	94,132
BNY Mellon	TELEFONICA EMISIONES SA 4.103% 03/08/2027 DD 03/08/17	95,000.00	109,543	93,503
BNY Mellon	AT&T INC 4.350% 03/01/2029 DD 2/19/2019	95,000.00	103,421	92,991
BNY Mellon	BREAN ASSET BACKED RM6 A1 144A VAR RT 01/25/2063 DD 02/17/23	91,186.55	86,809	89,327

**MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES**

**EMPLOYER NO. 31-1739929
PLAN NO. 001**

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

December 31, 2024

(a) Identity of (b) Party	(c) Description of Investment	No. of Units/Shares	(d) Cost	Current (e) Value
BNY Mellon	BNP PARIBAS SA 144A VAR RT 01/13/2031 DD 01/13/20	100,000.00	104,137	89,203
BNY Mellon	MANULIFE FINANCIAL CORP VAR RT 02/24/2032 DD 02/24/17	90,000.00	95,453	87,782
BNY Mellon	GENERAL MOTORS FINANCIAL CO IN 4.300% 04/06/2029 DD 04/07/22	90,000.00	81,309	86,924
BNY Mellon	TRUIST BANK VAR RT 09/17/2029 DD 09/16/19	90,000.00	89,697	86,892
BNY Mellon	SANTANDER DRIVE AUTO RECEI 4 C 5.000% 11/15/2029 DD 07/20/22	85,000.00	84,963	85,401
BNY Mellon	CITIGROUP COMMERCIAL MOR P7 AS 3.915% 04/14/2050 DD 04/01/17	90,000.00	85,609	85,019
BNY Mellon	VERIZON COMMUNICATIONS INC 4.400% 11/01/2034 DD 10/29/14	90,000.00	113,855	83,406
BNY Mellon	ARES CAPITAL CORP 7.000% 01/15/2027 DD 08/03/23	80,000.00	81,146	82,904
BNY Mellon	KIMCO REALTY OP LLC 2.800% 10/01/2026 DD 08/18/16	85,000.00	84,028	82,213
BNY Mellon	HALEON US CAPITAL LLC 3.625% 03/24/2032 DD 09/24/22	90,000.00	81,176	81,506
BNY Mellon	SUMITOMO MITSUI FINANCIAL GROUP 5.520% 01/13/2028 DD 01/13/23	80,000.00	80,412	81,263
BNY Mellon	HOME DEPOT INC/THE 4.500% 12/06/2048 DD 12/06/18	95,000.00	108,096	81,248
BNY Mellon	BMO 2022-C2 MORTGAGE TRU C2 AS VAR RT 07/15/2054 DD 07/01/22	85,000.00	83,476	81,154
BNY Mellon	SANTANDER HOLDINGS USA INC 3.244% 10/05/2026 DD 10/04/19	80,000.00	76,458	77,612
BNY Mellon	SIMON PROPERTY GROUP LP 3.800% 07/15/2050 DD 07/09/20	105,000.00	71,803	77,407
BNY Mellon	DUKE ENERGY INDIANA LLC 3.750% 09/01/2046 DD 08/12/16	105,000.00	76,142	77,391
BNY Mellon	NATIONAL RURAL UTILITIES COOPE 3.050% 04/25/2027 DD 04/25/17	80,000.00	77,693	77,246
BNY Mellon	FREMF 2018-K80 MORT K80 C 144A VAR RT 08/25/2050 DD 09/01/18	80,000.00	82,222	76,129
BNY Mellon	CISCO SYSTEMS INC 5.500% 01/15/2040 DD 11/17/09	75,000.00	107,000	75,675
BNY Mellon	JOHNSON & JOHNSON 3.550% 03/01/2036 DD 03/01/16	85,000.00	83,664	74,249
BNY Mellon	BMO 2023-C7 A5 6.160% 12/15/2056 DD 12/01/23	70,000.00	72,100	74,123
BNY Mellon	ONCOR ELECTRIC DELIVERY CO LLC 3.800% 06/01/2049 DD 05/23/19	95,000.00	98,377	71,788
BNY Mellon	CONSOLIDATED EDISON CO OF NEW 4.450% 03/15/2044 DD 03/06/14	83,000.00	71,060	70,960
BNY Mellon	OMNICOM GROUP INC 2.600% 08/01/2031 DD 05/03/21	80,000.00	75,681	68,403
BNY Mellon	CONAGRA BRANDS INC 1.375% 11/01/2027 DD 10/16/20	75,000.00	74,640	68,097
BNY Mellon	AMEREN ILLINOIS CO 3.700% 12/01/2047 DD 11/28/17	90,000.00	89,550	67,857
BNY Mellon	BURLINGTON NORTHERN SANTA FE L DD 5.150% 09/01/2043 08/22/13	70,000.00	83,735	67,062
BNY Mellon	BANK OF NOVA SCOTIA/THE 2.450% 02/02/2032 DD 01/10/22	80,000.00	79,441	66,788
BNY Mellon	BLACKSTONE PRIVATE CREDIT FUND 2.625% 12/15/2026 DD 06/15/22	70,000.00	63,946	66,696
BNY Mellon	ENEL FINANCE INTERNATIONA 144A 3.500% 04/06/2028 DD 10/06/17	70,000.00	74,012	66,694
BNY Mellon	US BANCORP VAR RT 07/22/2028 DD 07/22/22	65,000.00	61,918	64,461
BNY Mellon	MASTERCARD INC 3.650% 06/01/2049 DD 05/31/19	85,000.00	91,251	64,224
BNY Mellon	FLORIDA POWER & LIGHT CO 5.250% 02/01/2041 DD 12/09/10	65,000.00	76,846	63,094
BNY Mellon	BENCHMARK 2020-IG2 IG2 B 144A VAR RT 09/15/2048 DD 05/01/20	110,000.00	116,145	62,283
BNY Mellon	NEVADA POWER CO 3.700% 05/01/2029 DD 01/30/19	65,000.00	67,326	62,013
BNY Mellon	CITIGROUP INC VAR RT 01/29/2031 DD 01/29/20	70,000.00	71,088	61,928
BNY Mellon	COPT DEFENSE PROPERTIES LP 2.000% 01/15/2029 DD 08/11/21	70,000.00	66,258	61,609
BNY Mellon	HONEYWELL INTERNATIONAL INC 5.250% 03/01/2054 DD 03/01/24	65,000.00	65,253	60,978
BNY Mellon	AMERICAN EXPRESS CO 5.850% 11/05/2027 DD 11/07/22	60,000.00	60,721	60,669
BNY Mellon	UNITED PARCEL SERVICE INC 3.750% 11/15/2047 DD 11/14/17	80,000.00	78,435	60,599
BNY Mellon	CONOCOPHILLIPS CO 5.300% 05/15/2053 DD 05/23/23	65,000.00	64,700	60,200
BNY Mellon	HCA INC 5.200% 06/01/2028 DD 05/04/23	60,000.00	61,203	60,134
BNY Mellon	BORGWARNER INC 4.950% 08/15/2029 DD 08/16/24	60,000.00	60,659	59,691
BNY Mellon	STATE STREET CORP VAR RT 05/18/2034 DD 05/18/23	60,000.00	59,799	59,591
BNY Mellon	BHP BILLITON FINANCE USA LTD 4.900% 02/28/2033 DD 02/28/23	60,000.00	60,923	58,974
BNY Mellon	PHILIP MORRIS INTERNATIONAL IN 4.750% 11/01/2031 DD 11/01/24	60,000.00	59,022	58,658
BNY Mellon	CVS HEALTH CORP 1.750% 08/21/2030 DD 08/21/20	70,000.00	58,108	56,919
BNY Mellon	CAMERON LNG LLC 144A 2.902% 07/15/2031 DD 12/13/19	65,000.00	65,261	56,611
BNY Mellon	CANADIAN NATIONAL RAILWAY CO 3.650% 02/03/2048 DD 02/06/18	75,000.00	58,015	56,515
BNY Mellon	AERCAP IRELAND CAPITAL DAC/A 1.650% 10/29/2024 DD 10/29/21	60,000.00	55,824	55,544
BNY Mellon	BBCMS MORTGAGE TRUST 20 C22 AS VAR RT 11/15/2056 DD 11/01/23	50,000.00	51,575	55,048

**MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES**

**EMPLOYER NO. 31-1739929
PLAN NO. 001**

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

December 31, 2024

(a) Identity of (b) Party	(c) Description of Investment	No. of Units/Shares	(d) Cost	Current (e) Value
BNY Mellon	NEW YORK LIFE INSURANCE C 144A 3.750% 05/15/2050 DD 04/14/20	75,000.00	82,817	54,610
BNY Mellon	PROLOGIS LP 5.000% 03/15/2034 DD 01/25/24	55,000.00	55,477	53,763
BNY Mellon	AMERICAN TOWER CORP 2.750% 01/15/2027 DD 10/03/19	55,000.00	54,340	52,825
BNY Mellon	INTEL CORP 3.734% 12/08/2047 DD 06/08/18	80,000.00	77,873	52,817
BNY Mellon	NATWEST GROUP PLC VAR RT 06/14/2027 DD 06/14/21	55,000.00	55,074	52,479
BNY Mellon	MIDAMERICAN ENERGY CO 4.800% 09/15/2043 DD 09/19/13	57,000.00	65,713	51,278
BNY Mellon	OGE ENERGY CORP 5.450% 05/15/2029 DD 05/09/24	50,000.00	51,672	50,830
BNY Mellon	MILL CITY MORTGAGE L 2 M3 144A VAR RT 07/25/2059 DD 06/01/17	55,000.00	55,550	50,827
BNY Mellon	SCOTT TRUST 2023-SF SFS A 144A 5.910% 03/15/2040 DD 03/01/23	50,000.00	50,000	50,761
BNY Mellon	HYUNDAI CAPITAL AMERICA 144A 5.680% 06/26/2028 DD 06/26/23	50,000.00	49,871	50,728
BNY Mellon	KINDER MORGAN ENERGY PARTNERS 4.250% 09/01/2024 DD 09/11/14	50,000.00	51,235	50,038
BNY Mellon	COMMONWEALTH EDISON CO 3.700% 03/01/2045 DD 03/02/15	65,000.00	50,791	49,654
BNY Mellon	COMCAST CORP 3.400% 07/15/2046 DD 07/19/16	70,000.00	68,896	49,208
BNY Mellon	EQUINOR ASA 3.950% 05/15/2043 DD 05/15/13	60,000.00	59,274	49,195
BNY Mellon	DRIVE AUTO RECEIVABLES TRU 2 D 4.940% 05/17/2032 DD 09/25/24	50,000.00	49,991	49,071
BNY Mellon	FLORIDA POWER & LIGHT CO 4.050% 10/01/2044 DD 09/10/14	60,000.00	74,948	48,958
BNY Mellon	PRUDENTIAL FINANCIAL INC 3.000% 03/10/2040 DD 03/10/20	65,000.00	68,932	48,021
BNY Mellon	NORTHROP GRUMMAN CORP 3.250% 01/15/2028 DD 10/13/17	50,000.00	50,313	47,785
BNY Mellon	PENSKE TRUCK LEASING CO L 144A 1.700% 06/15/2026 DD 04/13/21	50,000.00	49,990	47,732
BNY Mellon	TORONTO-DOMINION BANK/THE 4.456% 06/08/2032 DD 06/08/22	50,000.00	46,318	47,365
BNY Mellon	BRISTOL-MYERS SQUIBB CO 5.900% 11/15/2033 DD 11/13/23	45,000.00	45,494	47,246
BNY Mellon	COREBRIDGE FINANCIAL INC VAR RT 12/15/2052 DD 12/15/22	45,000.00	45,956	46,175
BNY Mellon	WALMART INC 4.050% 06/29/2048 DD 06/27/18	55,000.00	54,284	45,246
BNY Mellon	O'REILLY AUTOMOTIVE INC 1.750% 03/15/2031 DD 09/23/20	55,000.00	45,724	45,047
BNY Mellon	FREMF 2019-K103 MO K103 C 144A VAR RT 12/25/2051 DD 12/01/19	50,000.00	48,766	44,440
BNY Mellon	GENERAL DYNAMICS CORP 4.250% 04/01/2040 DD 03/25/20	50,000.00	63,190	43,681
BNY Mellon	ELEVANCE HEALTH INC 4.100 05/15/2032 DD 04/29/22	45,000.00	42,725	41,618
BNY Mellon	METROPOLITAN LIFE GLOBAL 144A 3.050% 06/17/2029 DD 06/17/19	45,000.00	45,066	41,602
BNY Mellon	GEORGIA POWER CO 2.650% 09/15/2029 DD 09/10/19	45,000.00	44,945	40,810
BNY Mellon	BRIGHTHOUSE FINANCIAL INC 3.700% 06/22/2027 DD 12/22/17	40,000.00	38,846	38,811
BNY Mellon	CENTERPOINT ENERGY RESOURCES C 1.750% 10/01/2030 DD 10/01/20	45,000.00	42,034	37,718
BNY Mellon	ABBVIE INC 5.050% 03/15/2034 DD 06/26/24	35,000.00	35,120	34,613
BNY Mellon	AMERICAN HONDA FINANCE CORP 4.400% 09/05/2029 DD 09/05/24	35,000.00	34,958	34,029
BNY Mellon	EXXON MOBIL CORP 3.095% 08/16/2049 DD 08/16/19	5,000.00	36,619	33,365
BNY Mellon	ENERGY TRANSFER LP 6.400% 12/01/2030 DD 10/13/23	30,000.00	32,214	31,701
BNY Mellon	RTX CORP 6.000% 03/15/2031 DD 11/08/23	30,000.00	29,980	31,492
BNY Mellon	GILEAD SCIENCES INC 4.000% 09/01/2036 DD 09/20/16	35,000.00	42,607	30,901
BNY Mellon	WALMART INC 4.500% 09/09/2052 DD 09/09/22	35,000.00	31,329	30,591
BNY Mellon	DUKE ENERGY INDIANA LLC 3.750% 05/15/2046 DD 05/12/16	40,000.00	43,560	29,852
BNY Mellon	VIRGINIA ELECTRIC AND POWER CO 5.300% 08/15/2033 DD 08/10/23	30,000.00	29,291	29,833
BNY Mellon	PAYPAL HOLDINGS INC	30,000.00	30,218	29,814
BNY Mellon	CHUBB INA HOLDINGS LLC 5.000% 03/15/2034 DD 03/07/24	30,000.00	30,873	29,653
BNY Mellon	ARTHUR J GALLAGHER & CO 5.150% 02/15/2035 DD 12/19/24	30,000.00	29,665	29,291
BNY Mellon	CIGNA GROUP/THE 2.400% 03/15/2030 DD 03/16/20	33,000.00	35,032	28,876
BNY Mellon	TOTALENERGIES CAPITAL INTERNAT 2.829% 01/10/2030 DD 07/10/19	30,000.00	29,812	28,860
BNY Mellon	MIDAMERICAN ENERGY CO 4.250% 07/15/2049 DD 01/09/19	35,000.00	28,610	28,421
BNY Mellon	PACIFIC GAS AND ELECTRIC CO 3.000% 06/15/2028 DD 06/03/21	30,000.00	27,293	28,105
BNY Mellon	MOTOROLA SOLUTIONS INC	25,000.00	24,954	25,007
BNY Mellon	TRINITY HEALTH CORP 2.632% 12/01/2040 DD 01/20/21	35,000.00	25,379	24,422
BNY Mellon	ORACLE CORP 4.700% 09/27/2034 DD 09/27/24	25,000.00	24,927	23,701
BNY Mellon	KIMBERLY-CLARK CORP 3.900% 05/04/2047 DD 05/04/17	30,000.00	23,678	23,438
BNY Mellon	PEPSICO INC 2.875% 10/15/2049 DD 10/09/19	35,000.00	22,755	22,884

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

EMPLOYER NO. 31-1739929
PLAN NO. 001

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

December 31, 2024

(a)	(b) Identity of Party	(c) Description of Investment	(d) No. of Units/Shares	(e) Cost	Current Value
	BNY Mellon	AMERICAN HONDA FINANCE CORP 5.850% 10/04/2030 DD 10/4/23	20,000.00	20,778	20,828
	BNY Mellon	AVALONBAY COMMUNITIES INC 5.350% 06/01/2034 DD 05/14/24	20,000.00	19,933	20,094
	BNY Mellon	CNO GLOBAL FUNDING 144A 1.650% 01/06/2025 DD 01/06/22	20,000.00	18,829	19,993
	BNY Mellon	JOHN DEERE CAPITAL CORP 5.050% 06/12/2034 DD 06/11/24	20,000.00	19,909	19,927
	BNY Mellon	ASTRAZENECA PLC 3.000% 05/28/2051 DD 05/28/21	30,000.00	21,253	19,651
	BNY Mellon	VICI PROPERTIES LP 5.125% 11/15/2031 DD 12/19/24	20,000.00	19,932	19,557
	BNY Mellon	ENTERPRISE PRODUCTS OPERATING 2.800% 01/31/2030 DD 01/15/20	15,000.00	13,536	13,564
	BNY Mellon	CISCO SYSTEMS INC 5.050% 02/26/2034 DD 02/26/24	10,000.00	9,990	9,975
	BNY Mellon	PROLOGIS LP 1.250% 10/15/2030 DD 08/20/20	10,000.00	9,874	8,195
	BNY Mellon	VULCAN MATERIALS CO 5.350% 12/01/2034 DD 11/20/24	5,000.00	4,995	4,986
					8,509,142
		Corporate stocks:			
	Morgan Stanley	Vanguard S&P 500 Eft	672.00	242,049	362,082
	Morgan Stanley	Vanguard Intl Equity Index Fd	6,127.00	328,166	351,751
	Morgan Stanley	iShares S&P MidCap 400 Index	1,211.00	43,887	75,457
	Morgan Stanley	iShares Core S&P Small CAP E	633.00	60,028	72,934
	Morgan Stanley	Vanguard FTSE Emerging Markets	1,512.00	58,455	66,588
	Morgan Stanley	Alphabet Inc Cl A	29.64	5,031	5,611
	Morgan Stanley	Citigroup Inc New	74.35	4,643	5,234
	Morgan Stanley	General Mtrs Co	95.01	4,301	5,061
	Morgan Stanley	Deere & Co	11.50	4,646	4,871
	Morgan Stanley	Charles Schwab New	63.18	4,720	4,676
	Morgan Stanley	Amer Intl GP Inc New	61.30	4,827	4,462
	Morgan Stanley	Fiserve Inc	20.30	3,089	4,169
	Morgan Stanley	Intercontinental Exchange Inc	27.93	3,730	4,162
	Morgan Stanley	Kroger Co	65.48	3,610	4,004
	Morgan Stanley	Conocophillips	39.45	4,751	3,913
	Morgan Stanley	Bank of New York Mellon Corp	50.75	2,947	3,899
	Morgan Stanley	Capital One Financial Corp	21.69	3,093	3,868
	Morgan Stanley	EOG Resources Inc	30.51	3,977	3,740
	Morgan Stanley	Phillips 66 Com Reinsurance Group of America	32.50	4,555	3,702
	Morgan Stanley	IQVIA Holdings Inc	18.66	4,220	3,666
	Morgan Stanley	Wells Fargo & Co New	51.79	3,132	3,638
	Morgan Stanley	Corteva Inc	63.26	3,620	3,603
	Morgan Stanley	State Street Corp	36.70	2,779	3,602
	Morgan Stanley	CBRE Group Inc - A	27.36	2,356	3,592
	Morgan Stanley	Centene Corporation	59.07	4,342	3,579
	Morgan Stanley	Willis Towers Watson Plc Ltd	11.27	2,885	3,531
	Morgan Stanley	Charter Communications Inc	10.07	2,825	3,450
	Morgan Stanley	First Citiz Bancshares A	1.60	2,784	3,387
	Morgan Stanley	Bank of America Corp	77.00	2,901	3,384
	Morgan Stanley	Global Payment Inc	28.75	3,013	3,221
	Morgan Stanley	NASDAQ Inc Com	41.56	2,512	3,213
	Morgan Stanley	Ally Financial Inc	87.57	3,440	3,153
	Morgan Stanley	Kenvue Inc	145.00	2,889	3,096
	Morgan Stanley	Comcast Corp (new) Class A	82.27	3,242	3,088
	Morgan Stanley	Merck & Co Inc New Com	30.16	3,225	3,000
	Morgan Stanley	Equifax Inc	10.56	2,532	2,690
	Morgan Stanley	Delta Air Lines Inc New	43.74	2,256	2,646
	Morgan Stanley	Keurig Dr Pepper Inc Com	76.17	2,504	2,447
	Morgan Stanley	Warner Bros Discovery Inc Ser	224.00	1,761	2,368

MANSFIELD PLUMBING PRODUCTS, LLC
RETIREMENT PLAN FOR HOURLY EMPLOYEES

EMPLOYER NO. 31-1739929
PLAN NO. 001

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

December 31, 2024

(a)	(b) Identity of Party	(c) Description of Investment	(d) No. of Units/Shares	(e) Cost	Current Value
	Morgan Stanley	Fortune Brands Innovations Inc	33.37	2,380	2,280
	Morgan Stanley	APA Corporation	95.52	2,895	2,206
	Morgan Stanley	Masco Corp	26.65	1,881	1,934
	Morgan Stanley	Elevance Health Inc	5.21	2,169	1,920
	Morgan Stanley	TE Connectivity Plc	13.02	1,920	1,862
	Morgan Stanley	Reinsurance Group of America	7.86	1,621	1,678
	Morgan Stanley	Carlyle Group Inc	32.25	1,659	1,628
	Morgan Stanley	Airbnb Inc Cl A	12.26	1,658	1,611
	Morgan Stanley	GE Healthcare Technologies Inc	20.44	1,634	1,598
	Morgan Stanley	Magna International Inc	38.03	1,762	1,589
	Morgan Stanley	Corebridge Finl Inc	5.96	1,546	1,585
	Morgan Stanley	Borg Warner Inc	47.06	1,736	1,496
	Morgan Stanley	Genuine Parts Co	12.46	1,779	1,455
	Morgan Stanley	Baxter Intl Inc	43.97	1,576	1,282
	Morgan Stanley	CVS Health Corp Com	27.09	1,494	1,216
	Morgan Stanley	Liberty Broadband Corp S-C	13.70	731	1,024
	Morgan Stanley	Blackrock Inc	0.86	670	886
	Morgan Stanley	Celanese Corp Series A Com Stk	12.21	1,891	845
		Total corporate stocks			<u>1,082,633</u>
		Registered investment companies:			
	Federated Hermes	Federated Hermes Govt Oblgn Pm	267,638.00	267,638	267,638
	BNY Mellon	Fidelity Inv Mmkt Treas 680	63,789.00	63,789	63,789
	Morgan Stanley	Edgewood Growth Instl	3,655.71	127,661	<u>162,021</u>
		Total registered investment companies			<u>493,448</u>
					<u>\$11,971,649</u>

Attachment to 2024 Form 5500
Schedule SB, line 32: schedule of amortization bases

Plan name: Mansfield Plumbing Products LLC Retirement Plan for Hourly Employees
Plan sponsor: Mansfield Plumbing Products LLC

EIN: 31-1739929
PN: 001

Schedule of amortization bases

Type of base	Present value of remaining installments	Valuation date	Years remaining	Amortization installment
Shortfall	(260,925)	1/1/2024	15	(23,848)
Shortfall	2,574,237	1/1/2023	14	246,725
Shortfall	0	1/1/2022	13	0
Shortfall	0	1/1/2021	12	0
Shortfall	0	1/1/2020	11	0
Shortfall	0	1/1/2019	10	0
Shortfall	0	1/1/2018	9	0
	Total 2,313,312			222,877