

<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; font-weight: bold; text-align: center;">2024</p> <hr/> <p style="text-align: center; font-weight: bold;">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>COX MEDIA GROUP 401(K) PLAN</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>CMG MEDIA CORPORATION</u></p> <p><u>1601 WEST PEACHTREE ST., NE</u> <u>ATLANTA, GA 30309</u></p>	<p>1c Effective date of plan <u>01/01/2020</u></p> <p>2b Employer Identification Number (EIN) <u>83-3721978</u></p> <p>2c Plan Sponsor's telephone number <u>678-645-2292</u></p> <p>2d Business code (see instructions) <u>515100</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.	10/14/2025	LEE MATAYA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	LEE MATAYA
	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 type="checkbox"/> Same as Plan Sponsor COX MEDIA GROUP 401(K) FIDUCIARY COMMITTEE 1601 WEST PEACHTREE ST., NE ATLANTA, GA 30309	3b Administrator's EIN 83-3721978 3c Administrator's telephone number 678-645-2292
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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
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5 Total number of participants at the beginning of the plan year	5	3012
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6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year	6a(1)	2035
a(2) Total number of active participants at the end of the plan year	6a(2)	1616
b Retired or separated participants receiving benefits.....	6b	10
c Other retired or separated participants entitled to future benefits	6c	1058
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	2684
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	11
f Total. Add lines 6d and 6e	6f	2695
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	2986
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	2664
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2E 2J 2S 2K 2G 2F 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<p>a Pension Schedules</p> <p>(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> <p>(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____</p> <p>(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____</p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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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 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 COX MEDIA GROUP 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CMG MEDIA CORPORATION	D Employer Identification Number (EIN) 83-3721978	

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

THE VANGUARD GROUP, INC.

23-1945930

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

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

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

THE VANGUARD GROUP, INC.

23-1945930

(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?
15 16 25 37 52 99	NONE	207472	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)

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
THE VANGUARD GROUP, INC.	99	0
(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.	
DODGE & COX 94-1441976	8 BPS	
(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
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan COX MEDIA GROUP 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 CMG MEDIA CORPORATION	D Employer Identification Number (EIN) 83-3721978

Part I	Asset and Liability Statement
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1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	2899864
(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)	182795538
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	2764003
(15) Other.....	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	185695402	208550926
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	185695402	208550926

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)	6922352	
(B) Participants.....	2a(1)(B)	16421717	
(C) Others (including rollovers).....	2a(1)(C)	1443460	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		24787529
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	205086	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		205086
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	7131451	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		7131451
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		17179402
c Other income	2c		76598
d Total income. Add all income amounts in column (b) and enter total	2d		49380066

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	26267129	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	56141	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		26323270
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(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)	201272	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		201272
j Total expenses. Add all expense amounts in column (b) and enter total	2j		26524542

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		22855524
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: **DELOITTE & TOUCHE LLP**

(2) EIN: **13-3891517**

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		500000
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.)		X	
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 _____.

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.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
--	---	--

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

A Name of plan COX MEDIA GROUP 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 CMG MEDIA CORPORATION	D Employer Identification Number (EIN) 83-3721978	

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>23-2186884</u>		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q703218A.



Deloitte & Touche LLP
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Atlanta, GA 30309
USA

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October 14, 2025

Plan Management of Cox Media Group 401(k) Plan
1601 West Peachtree Street, NE
Atlanta, GA, 30309

Dear Members of Plan Management:

We have performed an ERISA Section 103(a)(3)(C) audit of the financial statements of Cox Media Group 401(k) Plan (the "Plan") as of and for the year ended December 31, 2024, (the "financial statements") in accordance with auditing standards generally accepted in the United States of America ("generally accepted auditing standards") and the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, as amended (ERISA), ("ERISA Section 103(a)(3)(C) Election"). We have issued our report thereon dated October 14, 2025.

We have prepared the following comments to assist you in fulfilling your obligation to oversee the financial reporting and disclosure process for which management of the Plan is responsible.

This report is intended solely for the information and use of Plan management, and others within the organization and is not intended to be and should not be used by anyone other than these specified parties.

Yours truly,

Deloitte + Touche LLP

Our Responsibility under Generally Accepted Auditing Standards

Our responsibility under generally accepted auditing standards has been described in our engagement letter dated September 15, 2025, a copy of which has been provided to you. As described in that letter, our responsibilities under generally accepted auditing standards and the ERISA Section 103(a)(3)(C) Election include forming and expressing an opinion on whether the form and content of the information included in the Plan's financial statements and supplemental schedules, other than that derived from the information certified by the trustee, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. We considered internal control over financial reporting in order to design audit procedures that were appropriate in the circumstances for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Plan's internal control over financial reporting.

Significant Accounting Policies

The Plan's significant accounting policies are set forth in Note 2 to the Plan's 2024 financial statements. We are not aware of any significant changes in previously adopted accounting policies or their application during the year ended December 31, 2024.

We have evaluated the significant qualitative aspects of the Plan's accounting practices, including accounting policies, accounting estimates, and financial statement disclosures and concluded that the policies are appropriate, adequately disclosed, and consistently applied by plan management.

Accounting Estimates

Accounting estimates are an integral part of the financial statements prepared by Plan management and are based on management's current judgments. Those judgments are ordinarily based on knowledge and experience about past and current events and on assumptions about future events.

During the year ended December 31, 2024, we are not aware of any significant changes in accounting estimates or in Plan management's judgments relating to such estimates.

Uncorrected Misstatements

Except with respect to the investment information certified by the trustee, our ERISA Section 103(a)(3)(C) audit of the financial statements was designed to obtain reasonable, rather than absolute, assurance about whether the financial statements are free of material misstatement, whether caused by error or fraud. There were no uncorrected misstatements or disclosure items passed identified during our ERISA Section 103(a)(3)(C) audit.

Material Corrected Misstatements

There were no material misstatements that were brought to the attention of Plan management as a result of our ERISA Section 103(a)(3)(C) audit procedures.

Form 5500

In accordance with generally accepted auditing standards, we obtained and read a draft of the Plan's Form 5500 that is substantially complete (the "draft Form 5500") prior to the dating of our auditor's report. We read the Plan's draft Form 5500 to identify material inconsistencies, if any, with the audited financial statements. We did not note any material inconsistencies or obtain knowledge of a material misstatement of fact in the other information.

Management's Representations

We have made specific inquiries of the Plan's management about the representations embodied in the financial statements. In addition, we have requested that Plan management provide to us the written representations the Plan is required to provide to its independent auditors under generally accepted auditing standards. We have attached to this letter, as Appendix A, a copy of the representation letter we obtained from Plan management.

* * * * *

- *Appendix A: Representations from Plan Management.*



October 14, 2025

Deloitte & Touche LLP
1230 Peachtree Street, NE Suite 3100
Atlanta, GA 30309-3574

We are providing this letter in connection with your audits of the statements of net assets available for benefits of Cox Media Group 401(k) Plan, (the “Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (“ERISA”), as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes (collectively referred to as the “financial statements”).

We 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 (“DOL”)’s Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audits). We acknowledge that the audits did not extend to any statements or information related to assets held for investment of the plan (“investment information”) by a bank or similar institution or insurance company, that is regulated, supervised and subject to periodic examination by a state or federal agency, a qualified institution, that prepared and certified the investment information in accordance with 29 CFR 2520.103-5 of the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. We have determined that an ERISA Section 103(a)(3)(C) audit is permissible under the circumstances. We have also determined that the investment information is prepared and certified by a qualified institution as described by 29 CFR 2520.103-8, that the certification meets the requirements in 29 CFR 2520.103-5, and that the certified investment information is appropriately measured, presented, and disclosed in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

The purpose of an ERISA Section 103(a)(3)(C) audit is to express an opinion as to whether the amounts and disclosures in the financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with GAAP and that the assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the certified investment information.

We confirm that we are responsible for the following:

- a. The preparation and fair presentation in the Plan’s financial statements of net assets and changes in net assets in conformity with GAAP.
- b. The fair presentation of the applicable supplemental schedules in conformity with the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA.
- c. Administering the Plan and determining that the Plan’s transactions that are presented and disclosed in the ERISA plan 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.
- d. The design, implementation and maintenance of internal control:

Deloitte & Touche LLP

October 14, 2025

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- Relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error
- To prevent and detect fraud

Certain representations in this letter are described as being limited to matters that are material. Items are considered material, regardless of size, if they involve an omission or misstatement of accounting information that, in light of surrounding circumstances, makes it probable that the judgment of a reasonable person relying on the information would be changed or influenced by the omission or misstatement.

We confirm, to the best of our knowledge and belief, the following representations made to you during your ERISA Section 103(a)(3)(C) audits:

1. The financial statements referred to above are fairly presented in conformity with GAAP and the notes include all disclosures required by laws and regulations to which the Plan is subject. The accompanying supplemental schedule is fairly presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
2. Plan management has provided to you all relevant information and access as agreed in the terms of the audit engagement letter.
3. Plan management has made available to you:
 - a. All financial records and related data, including the names of all related parties and parties-in-interest and all relationships and transactions with related parties and parties-in-interest.
 - b. All minutes of the meetings of CMG Media Corporation's (the "Plan Sponsor") stockholders, directors, and committees of directors pertinent to the operation of the Plan or summaries of actions of recent meetings for which minutes have not yet been prepared. All significant board and committee actions are included in the summaries.
 - c. The most current plan document for the audit period, including amendments made to the plan document, the trust agreement or insurance contracts (if applicable) during the year, including amendments to comply with applicable laws.
 - d. A draft of Form 5500, *Annual Return/Report of Employee Benefit Plan*, that is substantially complete.
4. There have been no communications with regulatory agencies concerning noncompliance with or deficiencies in financial reporting practices or administrative practices.
5. Plan management has not performed a formal risk assessment, including the assessment of the risk that the financial statements may be materially misstated as a result of fraud; however, Plan management is knowledgeable, competent and is involved in performing risk assessments related to the Plan Sponsor and therefore are considered to be aware of and responsive to the risks relating to employee benefit plans.
6. We have no knowledge of any fraud or suspected fraud affecting the Plan involving:

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- a. Management
 - b. Employees who have significant roles in the Plan's internal control
 - c. Others, where the fraud could have a material effect on the financial statements
7. We have no knowledge of any allegations of fraud or suspected fraud affecting the Plan's financial statements communicated by employees, former employees, plan participants, regulators, beneficiaries, service providers, third-party administrators or others.
 8. The methods, significant assumptions and the data used by us in making the accounting estimates and the related disclosures are appropriate to achieve recognition, measurement or disclosure that is in conformity with GAAP.
 9. We have filed the current versions of the Plan and trust documents with the appropriate agencies, as necessary.
 10. The Plan, as written and applied, meets the requirements of the applicable sections of the Internal Revenue Code (the "IRC"), and the trust established under the Plan qualifies for exemption under the applicable sections of the IRC. The Plan Sponsor has operated the Plan and trust in a manner that did not jeopardize this tax status.
 11. We have performed the relevant IRC compliance tests, including, but not limited to, nondiscrimination testing.
 12. The Plan has adopted the provisions of a volume submitter plan sponsored by an affiliate of Vanguard. A volume submitter plan is one that has been prepared by a third-party administrator who submits a large number of plans on behalf of employers to the Internal Revenue Service ("IRS"). As such, the basic language in a volume submitter plan document has been preapproved, as to form, for compliance with applicable sections of the IRC.
 13. The Plan has complied with the fidelity bonding requirements of ERISA.
 14. There are no matters (e.g., breach of fiduciary responsibilities, nonexempt party-in-interest transactions, loans or leases in default, or events that may jeopardize the Plan's tax qualification status) that must be disclosed in accordance with the DOL's Rules and Regulations for Reporting and Disclosure, the IRC or ERISA, and we have not consulted a lawyer regarding such matters.
 15. There were no reviews or inquiries by the DOL, the IRS or other regulatory agency of the Plan's activities or filings since our last audit.
 16. We are not aware of any intention on the part of the Plan Sponsor to terminate the Plan or take any other action that could result in an effective termination for the Plan. We are not aware of any occurrences that could result in the termination of the Plan.
 17. There have been no unusual or infrequent events or transactions, including Plan amendments, occurring after the latest benefit information date but before issuance of the Plan's financial statements that might affect the usefulness of the Plan's financial statements when assessing the Plan's present and future ability to pay benefits.

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18. The Plan has complied with the DOL's regulations concerning the timely remittance of contributions to trust containing assets for the Plan.
19. Plan management has taken the necessary steps to perform an appropriate fair value measurement analysis to determine that the fair value of the certified plan assets does not vary from the carrying value that is certified by Vanguard Fiduciary Trust Company.
20. Form 5500 instructions indicate that the report of an Independent Qualified Public Accountant consists of an Accountant's Opinion, Financial Statements, Notes to the Financial Statements and Supplemental Schedules. We will attach the audited financial statements and your auditor's report thereon in its entirety to Form 5500.
21. We have complied with all applicable provisions of the Foreign Corrupt Practices Act.
22. There were no significant cyber security incidents and/or breaches in which an actual or potentially adverse effect on an information system, network, or the information residing therein occurred or there was a loss of assets. We considered the cyber incident or breach to be significant if such incident or breach merited the attention of those charged with governance.
23. Plan management has provided to you a corporate entity tree that identifies the legal names of the Plan's affiliates as defined in AICPA Code of Professional Conduct Interpretation (e.g., parents, subsidiaries, investors or investees), together with the ownership relationship among such entities.

Except where otherwise stated below, immaterial matters less than \$1,250,000 collectively are not considered to be exceptions that require disclosure for the purpose of the following representations. This amount is not necessarily indicative of amounts that would require adjustment to, or disclosure in, the financial statements.

24. There are no transactions that have not been properly recorded and reflected in the financial statements.
25. The Plan has no plans or intentions that may affect the carrying value or classification of the Plan's assets and liabilities, nor are we aware of any such plans or intentions on the part of the Plan Sponsor.
26. The following, to the extent applicable, have been appropriately identified, properly accounted for, and disclosed in the financial statements, or if applicable, the supplemental schedules:
 - a. Transactions with parties-in-interest, as defined in ERISA Section 3(14) and regulations thereunder, including those transactions set forth in Sections 406 and 407(a) of ERISA and Section 4975(c) of the IRC.
 - b. Other related parties and all the related-party relationships and transactions of which Plan management is aware, including sales, purchases, loans, transfers, leasing arrangements and guarantees (written or oral).
 - c. Reportable transactions as defined under ERISA Section 103(b)(3)(H) and regulations thereunder.
 - d. Amendments to the plan document, including any amendments impacting the usefulness of the financial statements through the date the financial statements were available to be issued.

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- e. All derivative financial instruments (e.g., futures, options or swaps), including outstanding commitments to purchase or sell securities under forward placement and standby commitments.
 - f. Securities lending, including securities on loan, collateral held under securities lending agreements and the liability to return collateral held under securities lending agreements.
27. In preparing the financial statements in conformity with GAAP, Plan management uses estimates. All estimates have been disclosed in the financial statements for which known information available prior to the issuance of the financial statements indicates that both of the following criteria are met:
- a. It is reasonably possible that the estimate of the effect on the financial statements of a condition, situation or set of circumstances that existed at the date of the financial statements will change in the near term due to one or more future confirming events.
 - b. The effect of the change would be material to the financial statements.
28. There are no:
- a. Instances of identified or suspected noncompliance with laws and regulations whose effects should be considered when preparing the financial statements.
 - b. Known actual or possible litigation and claims whose effects should be considered when preparing the financial statements that have not been disclosed to you and accounted for and disclosed in accordance with GAAP.
29. The Plan has satisfactory title to all owned assets, and there are no liens or encumbrances on such assets, nor has any asset been pledged as collateral.
30. The Plan has complied with all aspects of contractual agreements that may affect the financial statements.
31. Regarding supplemental information:
- a. We are responsible for the preparation and fair presentation of the supplemental information and the form and content of that supplemental information in conformity with DOL Rules and Regulations for Reporting and Disclosure under ERISA.
 - b. We believe the supplemental information, including its form and content, is fairly stated in all material respects.
 - c. The methods of measurement and presentation of the supplemental information have not changed from those used in the prior period.
 - d. The supplemental information complies, in all material respects, with regulatory requirements or other applicable criteria and DOL Rules and Regulations for Reporting and Disclosure under ERISA.
32. No events have occurred after December 31, 2024, but before October 14, 2025, the date the financial statements were available to be issued, that require consideration as adjustments to, or disclosures in, the Plan's financial statements.

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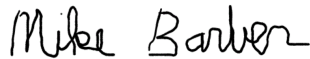
October 14, 2025

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33. With regard to the fair value measurements and disclosures of certain assets and liabilities, such as mutual funds and money market funds:
 - a. The measurement methods, including the related assumptions, used in determining fair value were appropriate, consistent with market participant assumptions where available without undue cost and effort, and were consistently applied in accordance with GAAP.
 - b. The completeness and adequacy of the disclosures related to fair values are in accordance with GAAP.
 - c. No events have occurred after December 31, 2024, but before October 14, 2025, the date the financial statements were available to be issued that require adjustment to the fair value measurements and disclosures included in the financial statements.
34. Investments, loans or leases that are in default or that are considered to be uncollectible have been properly recorded and disclosed in the financial statements.
35. Financial instruments with significant individual or group concentration of credit risk have been appropriately identified, properly recorded and disclosed in the financial statements.
36. In accordance with the provisions of the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act") and The Setting Every Community Up for Retirement Enhancement Act (the "SECURE Act"), the Plan made changes in its operations related to certain provisions in these two acts. These changes were made immediately without formally amending the Plan document. Plan management will formally amend the Plan document as prescribed by federal regulations.



Brad Smith,
Senior Vice President and Chief Financial Officer



Mike Barber,
Committee Member

Cox Media Group 401(k) Plan

Employer ID No.: 83-3721978

Plan Number: 001

Financial Statements as of December 31, 2024 and
2023 and for the Year Ended December 31, 2024,
Supplemental Schedule as of December 31, 2024
and Independent Auditor's Report

COX MEDIA GROUP 401(k) PLAN

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Cox Media Group 401(k) Plan

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

We have performed audits of the financial statements of Cox Media Group 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, 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 Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, 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 Auditor's Responsibilities for the Audit of the Financial Statements section

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter — Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule 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 schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

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

Deloitte + Touche LLP

October 14, 2025

COX MEDIA GROUP 401(k) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2024 AND 2023

	2024	2023
PARTICIPANT-DIRECTED INVESTMENTS—At fair value	\$ 205,786,923	\$ 182,795,538
NOTES RECEIVABLE FROM PARTICIPANTS	<u>2,764,003</u>	<u>2,899,864</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 208,550,926</u>	<u>\$ 185,695,402</u>

See notes to financial statements.

COX MEDIA GROUP 401(k) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2024

CONTRIBUTIONS:	
Participant contributions	\$ 16,421,717
Rollovers	1,443,460
Employer contributions	<u>6,922,352</u>
Total contributions	<u>24,787,529</u>
INVESTMENT INCOME:	
Net appreciation in fair value of investments	17,256,000
Dividend income	<u>7,131,451</u>
Net investment income	24,387,451
Interest income on notes receivable from participants	<u>205,086</u>
Total additions	<u>49,380,066</u>
DEDUCTIONS:	
Benefits paid to participants	26,267,129
Administrative expenses and other deductions	<u>257,413</u>
Total deductions	<u>26,524,542</u>
INCREASE IN NET ASSETS	22,855,524
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	<u>185,695,402</u>
End of year	<u><u>\$ 208,550,926</u></u>

See notes to financial statements.

COX MEDIA GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2024 AND 2023 AND FOR THE YEAR ENDED DECEMBER 31, 2024

1. DESCRIPTION OF THE PLAN

The following description of the Cox Media Group 401(k) Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Cox Media Group 401(k) Plan Document and the related Summary Plan Description (collectively, the “Plan Documents”) for a more complete description of the Plan’s provisions.

General—The Plan is a defined contribution plan covering eligible employees of CMG Media Corporation (d/b/a Cox Media Group) (“CMG”) and its wholly-owned subsidiaries (individually, the “Companies” and collectively, the “Company”). The Plan is administered by the Cox Media Group 401(k) Fiduciary Committee (the “Plan Administrator”) appointed under the authority delegated by the board of directors of the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

The Plan’s trustee is Vanguard Fiduciary Trust Company (“Vanguard” or the “Trustee”). The Plan has adopted the provisions of a volume submitter plan sponsored by an affiliate of Vanguard. A volume submitter plan is one that has been prepared by a third-party administrator who submits a large number of plans on behalf of employers to the Internal Revenue Service (“IRS”). As such, the basic language in a volume submitter plan document has been preapproved, as to form, for compliance with applicable sections of the Internal Revenue Code (the “Code”).

Eligibility—The Plan permits all Company employees to contribute to the Plan after 90 days of full-time employment or after one year of part-time employment when at least 1,000 hours are worked. Employees are eligible to receive Company matching contributions on the same date they become eligible to contribute to the Plan.

Contributions and Vesting—The Plan allows employees to save a percentage of their compensation on a pretax and/or after-tax basis in participant-selected investment funds. The Plan provides for a match formula of 100% of the first 4% of an employee’s contributions. All employee and Company match contributions are immediately 100% vested.

Employee contributions are made through payroll deductions in 1% increments up to a maximum of 75%, on either a pre-tax or Roth basis, not to exceed a combined total of 75% of the employee’s eligible compensation, as authorized by the employee, subject to certain limitations set forth in the Code. The maximum annual pretax contribution limit for 2024 was \$23,000. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. The maximum amount of catch-up contributions permitted in 2024 was \$7,500.

Employer contributions, which are generally made to the Plan each pay period, are invested in 1% increments among the same investment funds as elected by the participant.

Rollover contributions represent amounts attributable to rollovers or transfers from other qualified plans that have been subsequently invested in the Plan’s investment funds as elected by the participant.

Participant Accounts—A separate account is established and maintained for each Plan participant. Contributions are invested in one or more of the Plan’s investment funds as designated by the participant. The value of each investment fund is based on the closing market price of the fund at the end of each trading day on the exchange upon which it is traded. Each participant’s account is credited with the participant’s contribution and related matching and Company contributions and Plan earnings. Participant accounts are also charged with withdrawals and an allocation of Plan losses and administrative expenses that are paid by the Plan. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Investments—Participants may direct the investment of their contributions and/or account balances into various investment options offered by the Plan and may change investments and transfer amounts between funds daily. Investment options currently include target date funds, a money market fund, a bond fund, a balanced fund, and multiple domestic and international equity funds that are either market index funds or actively managed funds.

In September 2024, the Vanguard Small-Cap Index Fund Admiral Shares was added as an investment option offered by the Plan, and the AMG TimesSquare Small Cap Growth Fund Class Z was removed as an investment. In connection with this change, all money previously invested in the AMG TimesSquare Small Cap Growth Fund Class Z, was moved to the Vanguard Small-Cap Index Fund Admiral Shares.

Notes Receivable from Participants—Upon written request of the participant and at the discretion of the Plan Administrator, loans may be made to a participant from the Plan’s assets. A participant may have no more than two loans outstanding at any time. The principal amount of any new loan must be for a minimum of \$1,000, and the maximum principal amount is limited to the lesser of one-half of a participant’s vested account balance or \$50,000, reduced by the highest outstanding loan balance in the participant’s account during the prior twelve-month period. The term of a loan may not be for more than five years, except that the maximum term for loans used for the purchase of a participant’s primary residence is 30 years. At the discretion of the Plan Administrator, loans that were issued under another 401(k) plan that are transferred into the Plan at the time of a merger may continue under their original loan terms, even if such terms differ from those of the Plan.

The interest rate for Plan loans is the *Reuters* prime rate in effect on the first day of the month in which the participant’s loan request is received. Interest rates on outstanding loans ranged from 3.25% to 9.50% as of December 31, 2024 and 2023. Principal and interest are paid through payroll deductions over the life of the loan.

Payment of Benefits—Upon termination of employment, each participant is entitled to receive the value of their account attributable to their contributions and earnings thereon and the vested portion of the account attributable to employer contributions and earnings thereon.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting—The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

Use of Estimates—The preparation of financial statements in conformity with GAAP requires the Plan Administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties—The Plan utilizes various investment instruments, including mutual funds and a money market fund. Investment securities, in general, are exposed to various risks, such as interest rate, credit and overall market volatility. Overall market volatility includes global events, which could impact the value of investment securities, such as a pandemic or an international conflict event. Included in the Plan’s investments at December 31, 2024 and 2023 are shares of the Vanguard Institutional Target Retirement funds aggregating \$161,051,251 and \$143,777,255, respectively. These investments represent 77.2% and 77.4% of total Plan assets at December 31, 2024 and 2023, respectively. Due to the level of risk associated with investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

Investment Valuations and Income Recognition—The Plan’s investments are stated at fair value, which is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for a discussion of fair value measurements. Interest income is recorded on the accrual basis, and dividend income is recorded on the ex-dividend date. Net appreciation or depreciation in fair value of investments includes the Plan’s gains and losses on investments bought and sold as well as held during the year.

Purchases and sales of securities are recorded on a trade-date basis.

Notes Receivable from Participants—Notes receivable from participants are measured at their unpaid principal balance, plus any accrued but unpaid interest. Delinquent participant loans are recorded as distributions based on the terms of the Plan Documents.

Administrative Expenses—Plan participants each pay an annual fee for recordkeeping and fees for certain transactions (e.g., loan fees and hardship withdrawals), while the Company pays all other administrative expenses of the Plan as provided in the Plan Documents.

Payment of Benefits—Payment of benefits to participants is recorded upon distribution. There were no amounts allocated to accounts of persons who had elected to withdraw from the Plan, but had not yet been paid, as of December 31, 2024 and 2023.

Excess Contributions Payable—The Plan is required to return contributions received during the Plan year in excess of the limits established by the Code. There were no excess contributions payable as of December 31, 2024 and 2023.

3. FAIR VALUE MEASUREMENTS

GAAP provides the framework for measuring fair value and establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value based on three levels. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described as follows:

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

Level 2—Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets
- Quoted prices for identical or similar assets or liabilities in inactive markets

- Inputs other than quoted prices that are observable for the asset or liability and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means

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

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

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

The Plan’s policy is to recognize significant transfers between levels at the actual date of the event or change in circumstances that caused the transfer.

All investments are valued at fair market value as determined by quoted market prices at year-end (Level 1 investments). The Plan’s mutual funds and money market fund are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These mutual funds and money market fund are required to publish their daily net asset value and to transact at that price. The funds held by the Plan are deemed to be actively traded.

The following table sets forth a summary of the Plan’s investments at fair value as of December 31, 2024 and 2023:

	2024	2023
Money market fund	\$ 4,223,907	\$ 4,284,668
Mutual funds	<u>201,563,016</u>	<u>178,510,870</u>
Total investments—at fair value	<u>\$ 205,786,923</u>	<u>\$ 182,795,538</u>

4. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Facilities of the Company and the services of its personnel have been used by the Plan at no charge.

Certain Plan investments are shares of mutual funds managed by Vanguard, which qualify as party-in-interest transactions. Fees paid by the Plan for investment management services are included as a reduction of the return earned on each of the Plan’s fund investments. The Plan also issues loans to participants, which are secured by the vested balances in the participants’ accounts.

5. PLAN TERMINATION

Although the Company has not expressed any intent to do so, it may, at any time, terminate or amend the Plan or suspend the operation of any provision of the Plan, including a discontinuance of contributions to the Plan, subject to the penalties set forth in ERISA. In the event of termination of the Plan, participants will become 100% vested in their account, and the assets of the Plan will be allocated among the participants of the Plan as provided for in ERISA.

6. FEDERAL INCOME TAX STATUS

As discussed in Note 1, the Plan has adopted the provisions of a volume submitter plan sponsored by an affiliate of Vanguard. The Plan itself has not received a determination letter from the IRS; however, the IRS informed the sponsor of the volume submitter plan by a letter dated June 30, 2020, that the volume submitter plan complied with Section 401 of the Code. Consequently, the Plan Administrator and the Company believe that the Plan is currently designed and operated in compliance with the applicable requirements of the Code, and no provision for income taxes has been included in the Plan's financial statements.

7. INFORMATION CERTIFIED BY THE TRUSTEE

The following is a summary of the information regarding the Plan as of December 31, 2024 and 2023 and for the year ended December 31, 2024, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from information prepared by the Trustee of the Plan and furnished to the Plan Administrator. The Plan Administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2024	2023
Statement of assets available for benefits:		
Participant-directed investments—at fair value	\$ 205,786,923	\$ 182,795,538
Notes receivable from participants	2,764,003	
Statement of changes in assets available for benefits—investment income (loss):		
Dividend income	7,131,451	
Net appreciation in fair value of investments	17,256,000	

The investments information as of December 31, 2024 and 2023, included in Note 3—Fair Value Measurements (excluding the level within the fair value hierarchy).

Supplemental schedule: All balances and information included in the supplemental schedule of assets (held at end of year) (excluding notes receivable from participants).

8. SUBSEQUENT EVENTS

The Plan Administrator has evaluated subsequent events through October 14, 2025, the date the Plan's financial statements were available to be issued. No events occurred that require additional disclosure or adjustments to the Plan's financial statements.

* * * * *

SUPPLEMENTAL SCHEDULE

COX MEDIA GROUP 401(k) PLAN

EMPLOYER ID NO.: 83-3721978

PLAN NUMBER: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2024

(a) (b) Identity of Issuer, Borrower, Lessor, or Similar Party	c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
* Vanguard Small Cap Index Fund Admiral Shares	Registered Investment Company	**	\$ 2,278,345
* Dodge & Cox Income Fund	Registered Investment Company	**	2,603,946
* Vanguard Balanced Index Fund Admiral Shares	Registered Investment Company	**	3,856,931
* Vanguard Cash Reserves Federal MM Fund Admiral Shares	Registered Investment Company	**	4,223,907
* Vanguard Institutional Target Retirement (Income-2065)	Registered Investment Company	**	161,051,251
* Vanguard International Growth Fund Admiral Shares	Registered Investment Company	**	3,588,977
* Vanguard International Value Fund	Registered Investment Company	**	1,191,459
* Vanguard Short-Term Investment-Grade Fund Admiral Shares	Registered Investment Company	**	1,098,272
* Vanguard Total Stock Market Index Fund Admiral Shares	Registered Investment Company	**	9,756,138
* Vanguard U.S. Growth Fund Admiral Shares	Registered Investment Company	**	10,129,439
* Vanguard Value Index Fund Admiral Shares	Registered Investment Company	**	<u>6,008,258</u>
Total investments			205,786,923
* Various participants	Notes receivable from participants (maturing through 2054 at interest rates of 3.25%–9.50%)		<u>2,764,003</u>
Total assets available for benefits			<u>\$ 208,550,926</u>

* Party-in-interest.

** Cost information is not required for participant-directed investments and, therefore, is not included.

See accompanying independent auditor's report.

COX MEDIA GROUP 401(k) PLAN

EMPLOYER ID NO.: 83-3721978

PLAN NUMBER: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2024

(a) (b) Identity of Issuer, Borrower, Lessor, or Similar Party	c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	(d) Cost	(e) Current Value
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* Vanguard International Growth Fund Admiral Shares	Registered Investment Company	**	3,588,977
* Vanguard International Value Fund	Registered Investment Company	**	1,191,459
* Vanguard Short-Term Investment-Grade Fund Admiral Shares	Registered Investment Company	**	1,098,272
* Vanguard Total Stock Market Index Fund Admiral Shares	Registered Investment Company	**	9,756,138
* Vanguard U.S. Growth Fund Admiral Shares	Registered Investment Company	**	10,129,439
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See accompanying independent auditor's report.