

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <h1 style="margin: 0;">2024</h1> This Form is Open to Public Inspection
---	--	--

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

1a Name of plan <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>MARITZ HOLDINGS INC.</u> <u>TAX DEPARTMENT</u> <u>1375 NORTH HIGHWAY DRIVE</u> <u>FENTON, MO 63099</u>	1c Effective date of plan <u>03/01/1966</u> 2b Employer Identification Number (EIN) <u>43-0393480</u> 2c Plan Sponsor's telephone number <u>636-827-1493</u> 2d Business code (see instructions) <u>551112</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	HOLLY FRANCOIS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	STEVE GALLANT
	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 MARITZ HOLDINGS INC 1375 NORTH HIGHWAY DRIVE FENTON, MO 63099		3b Administrator's EIN 40-0393480
		3c Administrator's telephone number 636-827-1493
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5	1719
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).		
6a(1) Total number of active participants at the beginning of the plan year	6a(1)	401
6a(2) Total number of active participants at the end of the plan year	6a(2)	383
b Retired or separated participants receiving benefits.....	6b	474
c Other retired or separated participants entitled to future benefits	6c	683
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	1540
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	102
f Total. Add lines 6d and 6e	6f	1642
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)	
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)	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1A 1C 1I

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
---	--	--

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

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

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

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>84208130</u>
	b Actuarial value	2b	<u>85908597</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>562</u>	<u>51105270</u>
	b For terminated vested participants	<u>758</u>	<u>18766722</u>
	c For active participants	<u>401</u>	<u>15187664</u>
	d Total	<u>1721</u>	<u>85059656</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>4.94 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>232000</u>
	c Target normal cost	6c	<u>232000</u>

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

SIGN HERE		<u>09/29/2025</u>	
	Signature of actuary	Date	
	<u>JASON R. BENBOW</u>	<u>23-07392</u>	Most recent enrollment number
	Type or print name of actuary	<u>314-719-5900</u>	Telephone number (including area code)
	<u>WILLIS TOWERS WATSON US LLC</u>		
	Firm name		
	<u>WILLIS TOWERS WATSON US LLC 7733 FORSYTH BOULEVARD SUITE 1350 ST. LOUIS, MO 63105</u>		
	Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	2455339
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	1875425
9	Amount remaining (line 7 minus line 8)	0	579914
10	Interest on line 9 using prior year's actual return of <u>12.14</u> %	0	70402
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		8445883
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.04</u> %		331151
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		227677
	c Total available at beginning of current plan year to add to prefunding balance		9004711
	d Portion of (c) to be added to prefunding balance		8633351
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	9283667

Part III Funding Percentages			
14	Funding target attainment percentage	14	90.08 %
15	Adjusted funding target attainment percentage	15	100.99 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	90.38 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost				
21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years				
28 Unpaid minimum required contributions for all prior years				28 0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....				29 0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....				30 0

Part VIII Minimum Required Contribution For Current Year				
31 Target normal cost and excess assets (see instructions):				
a Target normal cost (line 6c)				31a 232000
b Excess assets, if applicable, but not greater than line 31a				31b 0
32 Amortization installments:	Outstanding Balance		Installment	
a Net shortfall amortization installment	8434726		953492	
b Waiver amortization installment.....	0		0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount				33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....				34 1185492
	Carryover balance	Prefunding balance	Total balance	
35 Balances elected for use to offset funding requirement	1185492		1185492	
36 Additional cash requirement (line 34 minus line 35)				36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)				37 0
38 Present value of excess contributions for current year (see instructions)				
a Total (excess, if any, of line 37 over line 36)				38a 0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....				38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)				39 0
40 Unpaid minimum required contributions for all years				40 0

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

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
--	--	---

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

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

Part I Service Provider Information (see instructions)

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

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

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

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

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

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

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

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

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

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

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

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

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

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

SEQUOIA FINACIAL GROUP, LLC

3500 EMBASSY PKWY
SUITE 100
AKRON, OH 44333

34-1913858

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	141668	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PARAMETRIC PORTFOLIO ASSOCIATES

20-0292745

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	85910	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

SUN LIFE INVESTMENT MANAGEMENT

68-0635051

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	NONE	78201	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

BANK OF NEW YORK MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
18 50	NONE	46851	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PENSION BENEFIT INFORMATION

94-2856521

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 65	NONE	14810	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 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 <u>MARITZ HOLDINGS INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>MARITZ HOLDINGS INC.</u>	D Employer Identification Number (EIN) <u>43-0393480</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: THE BANK OF NEW YORK MELLON

b Name of sponsor of entity listed in (a): BANK OF NEW YORK MELLON

c EIN-PN <u>25-6078093-023</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10087526</u>
---------------------------------------	-------------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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
--	--	--

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan MARITZ HOLDINGS INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MARITZ HOLDINGS INC.	D Employer Identification Number (EIN) 43-0393480

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	9180000	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	3133669	4093155
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	
(2) U.S. Government securities	1c(2)	3209849	9424400
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	18915386	32077031
(B) All other	1c(3)(B)		20880937
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	
(5) Partnership/joint venture interests	1c(5)		3102060
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)	0	
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	2268892	10087526
(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)	36135584	2556648
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	12540298	0

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	85383678	82221757
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	375786	86832
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	375786	86832
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	85007892	82134925

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)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-2123	
(B) U.S. Government securities.....	2b(1)(B)	163355	
(C) Corporate debt instruments.....	2b(1)(C)	1524167	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	10998	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1696397
(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)	504075	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		504075
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	40761906	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	40462812	
(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)	-741550	
(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)		283605
(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)		3399043
c Other income	2c		600
d Total income. Add all income amounts in column (b) and enter total	2d		5441264

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7773171	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		7773171
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)	305780	
(6) Bank or trust company trustee/custodial fees	2i(6)	46851	
(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)	188429	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		541060
j Total expenses. Add all expense amounts in column (b) and enter total	2j		8314231

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-2872967
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **FORVIS MAZARS, LLP**

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

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		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 543627.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
--	---	---

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

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

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....

1	
---	--

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 25-1926855 25-1871448

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3	53
---	----

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Public Equity: _____% Private Equity: 2.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 80.0 %
 High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: 17.0 % Other: 1.0 %

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

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
 Yes.
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
 No. Other. Provide explanation: _____

Part VII IRS Compliance Questions

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

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).
 Design-based safe harbor method
 "Prior year" ADP test
 "Current year" ADP test
 N/A

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

Maritz Holdings, Inc. Retirement Plan

EIN 43-0393480 PN 001

**Independent Auditor's Report, Financial Statements,
and Supplemental Schedules**

December 31, 2024 and 2023

Maritz Holdings, Inc. Retirement Plan
Contents
December 31, 2024 and 2023

Independent Auditor's Report	1
Financial Statements	
Statements of Net Assets Available for Benefits.....	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6
Supplemental Schedules	
Schedule H, Line 4i – Schedule of Assets (Held at End of Year).....	15
Schedule H, Line 4j – Schedule of Reportable Transactions.....	21

Independent Auditor's Report

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

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

We have performed audits of the financial statements of Maritz Holdings, Inc. Retirement Plan (Plan), an employee benefit plan subject to the *Employee Retirement Income Security Act of 1974* (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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 audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 4 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 audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the 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 Schedules Required by ERISA

The supplemental schedules listed in the table of contents are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Forvis Mazars, LLP

St. Louis, Missouri
October 9, 2025

Federal Employer Identification Number: 44-0160260

**Maritz Holdings, Inc. Retirement Plan
Statements of Net Assets Available for Benefits
December 31, 2024 and 2023**

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at Fair Value	\$ 78,128,602	\$ 73,070,009
Receivables		
Employer contributions receivable	-	9,180,000
Accrued interest and dividends	650,037	203,127
Pending trade receivables	2,956,323	2,439,226
	<u>3,606,360</u>	<u>11,822,353</u>
Prepaid Benefit Payments	486,795	491,316
Total Assets	<u>82,221,757</u>	<u>85,383,678</u>
LIABILITIES		
Other Liabilities	86,832	375,786
Net Assets Available for Benefits	<u>\$ 82,134,925</u>	<u>\$ 85,007,892</u>

Maritz Holdings, Inc. Retirement Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Investment Income		
Net appreciation in fair value of investments	\$ 2,957,187	\$ 7,069,085
Interest and dividends	2,484,077	1,773,193
	<u>5,441,264</u>	<u>8,842,278</u>
Employer Contributions	<u>-</u>	<u>9,180,000</u>
Total Additions	<u>5,441,264</u>	<u>18,022,278</u>
Deductions		
Benefits paid to participants	7,773,171	7,760,344
Administrative expenses	541,060	1,150,256
	<u>8,314,231</u>	<u>8,910,600</u>
Total Deductions	<u>8,314,231</u>	<u>8,910,600</u>
Net Increase (Decrease)	(2,872,967)	9,111,678
Net Assets Available for Benefits, Beginning of Year	<u>85,007,892</u>	<u>75,896,214</u>
Net Assets Available for Benefits, End of Year	<u>\$ 82,134,925</u>	<u>\$ 85,007,892</u>

**Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023**

Note 1. Description of the Plan

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

General

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

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

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

Contributions

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

Pension Benefits

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

Effective March 1, 2016, the Plan was amended so that if a participant's retirement income has a present value that exceeds \$1,000 but does not exceed \$5,000, and the participant does not consent to a distribution after receipt of notice, the present value of such benefit shall be rolled over to an Individual Retirement Account established on behalf of the participant, and if the present value does not exceed \$1,000, the present value of such benefit shall be distributed in one lump sum payment to the participant.

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

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

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

Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023

Death Benefits

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

Vesting

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

Note 2. Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Mutual funds, exchange-traded funds, and U.S. government securities are valued at the closing price reported on the active market on which the individual securities are traded. Corporate bonds are valued on the basis of yields currently available on comparable securities of issuers with similar credit ratings.

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

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

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

Payment of Benefits

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

Administrative Expenses

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

Accumulated Plan Benefits

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

**Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023**

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

Pending Trade Receivables

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

Prepaid Benefit Payments

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

Note 3. Plan Termination

On March 17, 2025, management approved a resolution to terminate the Plan effective April 30, 2025. The net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

- a. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under plan provisions in effect at any time during the five years preceding plan termination
- b. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. government agency) up to the applicable limitations discussed below
- c. All other vested benefits (that is, vested benefits not insured by the PBGC)
- d. All nonvested benefits

Certain benefits under the Plan are insured by the PBGC upon Plan termination. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

Whether all participants receive their benefits upon Plan terminate will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

Note 4. Certification of Plan Trustee

The Plan Administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, The Bank of New York Mellon/BNY Mellon, N.A., a qualified institution, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate:

- Investments as shown in the Statements of Net Assets Available for Benefits as of December 31, 2024 and 2023.
- Investment income as shown in the Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2024 and 2023.
- Investment information included in the accompanying Schedule of Assets (Held at End of Year) as of December 31, 2024 and the accompanying Schedule of Reportable Transactions for the year ended December 31, 2024.

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

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

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. The hierarchy comprises three levels of inputs that may be used to measure fair value:

- Level 1** Quoted prices in active markets for identical assets or liabilities
- Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities
- Level 3** Unobservable inputs supported by little or no market activity and that are significant to the fair value of the assets or liabilities

Recurring Measurements

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31, 2024 and 2023:

Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023

		2024			
		Fair Value Measurements Using			
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
Government agency obligation	\$ 9,424,400	\$ 9,123,029	\$ 301,371	\$ -	-
Corporate debt instruments	52,957,968	-	52,957,968	-	-
Exchange-traded fund	2,556,648	2,556,648	-	-	-
Total assets in the fair value hierarchy	64,939,016	\$ 11,679,677	\$ 53,259,339	\$ -	-
Investments measured at net asset value ^(A)	13,189,586				
	<u>\$ 78,128,602</u>				
		2023			
		Fair Value Measurements Using			
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	
Government agency obligation	\$ 3,209,849	\$ 3,088,950	\$ 120,899	\$ -	-
Corporate debt instruments	18,915,386	-	18,915,386	-	-
Exchange-traded fund	22,357,971	22,357,971	-	-	-
Mutual funds	13,777,613	13,777,613	-	-	-
Total assets in the fair value hierarchy	58,260,819	\$ 39,224,534	\$ 19,036,285	\$ -	-
Investments measured at net asset value ^(A)	14,809,190				
	<u>\$ 73,070,009</u>				

(A) In accordance with Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended December 31, 2024 and 2023. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis.

Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023

Investments

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

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2024 and 2023. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

	2024			
	Fair Value	Unfunded Commitments	Redemption Frequency (If Currently Eligible)	Redemption Notice Period
Equity Long/Short Hedge Fund ^(A)	\$ 146,065	N/A	Semi-Annually	105 Days 7 Days
Common Collective Trust Funds ^(B)	10,087,526	N/A	Daily	
Multi-Strategy Hedge Funds ^(C)	1,546,703	N/A	Quarterly	45 Days
Private Equity Fund ^(D)	1,409,292	N/A	N/A	N/A
	<u>\$ 13,189,586</u>			
	2023			
	Fair Value	Unfunded Commitments	Redemption Frequency (If Currently Eligible)	Redemption Notice Period
Equity Long/Short Hedge Fund ^(A)	\$ 912,561	N/A	Semi-Annually	105 Days 7 Days
Common Collective Trust Funds ^(B)	2,268,892	N/A	Daily	
Multi-Strategy Hedge Funds ^(C)	10,218,445	N/A	Quarterly	90 Days
Private Equity Fund ^(D)	1,409,292	N/A	N/A	N/A
	<u>\$ 14,809,190</u>			

(A) This category includes investments in hedge funds that take both long and short positions, primarily in U.S. common stocks. Management of the funds has the ability to shift investments among differing investment strategies. The funds aim to provide investors with immediate exposure to long and short positions to further diversify the portfolio of investments.

(B) This category includes collective trust funds that invest in investments that pursue multiple strategies to exceed the performance of certain industrial averages or to provide targeted returns.

Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023

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

Note 6. Accumulated Plan Benefits

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

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

Actuarial Present Value of Accumulated Plan Benefits

Vested benefits	
Retired participants receiving payments	\$ 50,201,384
Other participants	<u>32,736,972</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 82,938,356</u>

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

Actuarial present value of accumulated plan benefits, beginning of year	<u>\$ 87,307,294</u>
Increase (decrease) during the year attributable to	
Change in actuarial assumptions	(905,530)
Increase for interest due to the decrease in the discount period	4,238,330
Actuarial loss	58,606
Benefits paid	<u>(7,760,344)</u>
Net decrease	<u>(4,368,938)</u>
Actuarial present value of accumulated plan benefits, end of year	<u>\$ 82,938,356</u>

Significant assumptions underlying the actuarial computations are:

- Assumed rate of return on investments: 3.55%
- Discount rate for benefit plans: 5.29%
- Mortality basis: Pri-2012 with MP 2019 scale adjustments

**Maritz Holdings, Inc. Retirement Plan
Notes to Financial Statements
December 31, 2024 and 2023**

- Retirement: Rates varying by age, average age 62
- Asset valuation: Market

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Effective April 30, 2025, the Benefits Committee and Plan management elected to terminate the Plan. As a result, different actuarial assumptions and other factors will be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2024. Had the valuations been performed as of December 31, there would be no material differences.

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

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

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

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

Note 8. Tax Status

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

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

Note 9. Risks and Uncertainties

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

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

Note 10. Subsequent Events

Subsequent events have been evaluated through October 9, 2025, which is the date the financial statements were available to be issued.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

- The Interest crediting rate was updated from 4.50% to 5.00%.
- The assumed retirement rates and form of payment were updated to reflect plan experience.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

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

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

Definitions

Vesting service	Years and months of service from date of participation.
Pension service	Years and months of service from date of participation and no service accruing after December 31, 2009.
Average earnings	The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on the earlier of the participant's termination date or retirement date
Covered compensation	The average of the Social Security taxable wage bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the Participant attains Social Security Retirement Age (as defined in Section 415(b)(8) of the Internal Revenue Code).
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of pension service.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Monthly Pension Benefit

Monthly pension benefit under prior plan

As of any date, one-twelfth of the sum of:

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

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

Minimum pension benefit under prior plan

The greater of:

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

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

Opening balance credit

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Cash balance benefit

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

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

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

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

Monthly preretirement death benefit

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

Eligibility for Benefits

Normal retirement

Retirement on NRD

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Early retirement	For grandfathered participants, Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service. For non-grandfathered participants, Retirement may occur anytime after separation from service and completion of three years of vesting service.
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing three years of vesting service
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a ten-year certain and life annuity, or (for married participants) a life annuity. Actuarial equivalence is based on the 417(e) applicable mortality table and an 8.00% interest rate.
Pension Increases	None
Plan participants' contributions	None
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.
2021 Retiree Annuity Purchase	In December 2021, retirees and in-payment beneficiaries with monthly benefits less than or equal to \$300 per month and in payment as of January 1, 2021 were settled through the purchase of an annuity contract. Assets and liabilities for the affected participants and beneficiaries were transferred to Western-Southern Life Assurance Agency for payments commencing January 1, 2022. Participants and beneficiaries were excluded if their benefit was impacted by a QDRO, they resided outside of the US or in the state of New York, or if they had other administrative complexities.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Future Plan Changes

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

Changes in Benefits Valued Since Prior Year

None.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	2,340,711	4,107,502	5,783,422	12,231,635
2025	1,666,476	1,448,429	5,557,128	8,672,033
2026	1,551,099	1,948,251	5,323,307	8,822,657
2027	1,350,735	1,527,327	5,172,031	8,050,093
2028	1,333,535	1,410,275	4,833,538	7,577,348
2029	1,197,952	1,394,295	4,577,744	7,169,991
2030	1,149,932	1,352,281	4,315,823	6,818,036
2031	1,070,673	1,249,158	4,048,913	6,368,744
2032	943,392	1,598,179	3,778,905	6,320,476
2033	902,779	1,135,310	3,507,142	5,545,231
2034	853,303	1,275,619	3,235,791	5,364,713
2035	740,606	1,085,125	2,967,266	4,792,997
2036	690,564	1,006,680	2,703,969	4,401,213
2037	598,201	546,653	2,448,370	3,593,224
2038	589,116	758,966	2,202,777	3,550,859
2039	528,285	576,722	1,969,255	3,074,262
2040	485,028	486,826	1,749,564	2,721,418
2041	475,612	630,043	1,545,059	2,650,714
2042	448,676	381,458	1,356,628	2,186,762
2043	413,919	374,608	1,184,692	1,973,219
2044	387,538	356,551	1,029,238	1,773,327
2045	364,063	397,726	889,880	1,651,669
2046	343,406	277,295	765,937	1,386,638
2047	324,700	279,849	656,505	1,261,054
2048	301,287	212,906	560,547	1,074,740
2049	286,408	194,968	476,938	958,314
2050	267,421	182,225	404,506	854,152
2051	250,983	166,728	342,088	759,799
2052	234,454	157,640	288,552	680,646

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	217,268	138,892	242,835	598,995
2054	201,015	125,138	203,949	530,102
2055	184,274	111,721	170,996	466,991
2056	168,176	98,810	143,169	410,155
2057	152,261	86,563	119,754	358,578
2058	136,875	75,108	100,124	312,107
2059	122,120	64,545	83,726	270,391
2060	108,090	54,943	70,076	233,109
2061	94,895	46,334	58,750	199,979
2062	82,622	38,723	49,378	170,723
2063	71,335	32,083	41,640	145,058
2064	61,070	26,363	35,262	122,695
2065	51,836	21,494	30,013	103,343
2066	43,621	17,398	25,697	86,716
2067	36,388	13,987	22,147	72,522
2068	30,085	11,173	19,224	60,482
2069	24,651	8,873	16,812	50,336
2070	20,014	7,005	14,813	41,832
2071	16,097	5,500	13,148	34,745
2072	12,823	4,294	11,749	28,866
2073	10,115	3,333	10,562	24,010

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Credited Service ¹										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	4	3	0	0	0	0	0	0	0	0	7
40-44	0	8	13	2	0	0	0	0	0	0	0	23
45-49	0	6	16	23	1	0	0	0	0	0	0	46
50-54	0	7	18	24	25	7	0	0	0	0	0	81
55-59	0	7	31	18	32	29	1	0	0	0	0	118
60-64	0	3	19	10	26	26	6	2	0	0	0	92
65-69	0	0	9	2	7	3	3	3	1	0	0	28
70 & over	0	1	1	2	1	0	0	1	0	0	0	6
Total	0	36	110	81	92	65	10	6	1	0	0	401

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

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

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
-----------------	--------------------------	------------------------------

- | | | |
|---------------------------|-------|-------|
| • First segment rate | 4.75% | 3.62% |
| • Second segment rate | 4.87% | 4.46% |
| • Third segment rate | 5.59% | 4.52% |
| • Effective interest rate | 4.94% | 4.33% |

Annual rates of increase:

- Compensation N/A
- Interest crediting rate 5.00%

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Demographic and Other Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality

- **Healthy** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).
- **Disabled** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Termination

Rates varying by age and service.

Representative Termination Rates

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

Disability

None.

Retirement

Rates varying by age, average age 62.

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

From Terminated Vested Status Percentage retiring during the year		
Age	GF Rate	NGF Rate
55	5%	5%
56	5%	5%
57	5%	5%
58	5%	5%
59	5%	5%
60	5%	10%
61	5%	10%
62	5%	10%
63	5%	10%
64	5%	10%
65	60%	25%
66	25%	25%
67	25%	25%
68	25%	25%
69	25%	25%
70	100%	100%

Benefit commencement date:

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

Form of payment

Actives electing payment: Calculation of Lump Sum: 70% of participants are assumed to elect a lump sum form of payment under the plan when eligible. 50% of those electing an annuity are assumed to elect a 50% Joint and Survivor annuity.

Terminated vested electing payment: 90% of participants with access to a lump sum are assumed to elect a lump sum form of payment; the remaining 10% are assumed to elect a single life annuity. For participants with no lump sum option, 75% of participants are assumed to elect a single life annuity and 25% of participants are assumed to elect a 100% Joint and Survivor annuity

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Percent married	100% of males; 100% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.
Spouse age	Wife three years younger than husband.
Plan-related expenses	\$232,000. Plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year.
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date	First day of plan year.
Funding target	Present value of accrued benefits.
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. Willis Towers Watson has reviewed the plan provisions with Maritz Holdings, Inc. and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

The plan sponsor furnished participant data as of January 1, 2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, the following assumptions were made for missing or apparently inconsistent data elements:

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

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

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Cash Balance Interest crediting rate	The plan credits interest to cash balance accounts using the average yield on 1-year treasuries for the month of October preceding the first day of the plan year, but with a minimum interest credit rate of 4.00% and a maximum interest credit rate of 8.00%. Maritz Holdings, Inc. has selected an expected future rate of 5.00%. After examining historical variability in this rate, and considering the increase (reduction) in interest crediting expected to be caused by the minimum (maximum) interest credit, we believe the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.
Annuity conversion rate for hybrid plans	As required by IRC 430, annuity benefits are valued by converting accounts to annuities using the current IRC 430 interest rates, so that the interest rates assumed are effectively the same as described above for the discount rate.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Assumed termination rates differ by age and service because of expected differences in termination rates by service.
Retirement	Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was changed to reflect the latest mortality improvement scale and from using a static projection of mortality improvement to a generational projection as required by guidance issued by IRS under IRC §430.
- The assumed plan related expenses added to the normal cost were changed from \$956,000 in 2023 to \$232,000 in 2024.
- The Interest crediting rate was updated from 4.50% to 5.00%.
- The assumed retirement rates and form of payment were updated to reflect plan experience.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Maritz Holdings, Inc.
EIN/PN	43-0393480/001
Plan Name	Maritz Holdings, Inc. Retirement Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Jason R. Benbow
Enrollment Number	23-07392

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	374,445	15.00000	374,445	34,067
2. Shortfall	01/01/2023	3,277,506	14.00000	3,144,878	300,156
3. Shortfall	01/01/2022	(4,407,698)	13.00000	(4,048,190)	(407,322)
4. Shortfall	01/01/2021	(914,950)	12.00000	(799,652)	(85,311)
5. Shortfall	01/01/2020	11,843,028	11.00000	9,763,245	1,111,902
Total				8,434,726	953,492

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

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

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


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

Part I Basic Information

1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
2 Assets:			
a Market value	2a	84,208,130	
b Actuarial value	2b	85,908,597	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	562	51,105,270	51,105,270
b For terminated vested participants	758	18,766,722	18,766,722
c For active participants	401	15,187,664	15,187,664
d Total	1,721	85,059,656	85,059,656
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)	<input type="checkbox"/>		
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	4.94%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	232,000	
c Target normal cost	6c	232,000	

Statement by Enrolled Actuary

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

SIGN HERE	JASON R. BENBOW 	9-29-2025
	Signature of actuary	Date
JASON R. BENBOW		2307392
	Type or print name of actuary	Most recent enrollment number
WILLIS TOWERS WATSON US LLC		314-719-5900
	Firm name	Telephone number (including area code)
7733 FORSYTH BOULEVARD SUITE 1350 ST. LOUIS MO 63105		
	Address of the firm	

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

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

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....		21b	4
22 Weighted average retirement age		22	62
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years			
28 Unpaid minimum required contributions for all prior years		28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....		29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)		30	0

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....		31a	232,000
b Excess assets, if applicable, but not greater than line 31a		31b	0
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	8,434,726	953,492	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount		33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....		34	1,185,492
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	1,185,492	1,185,492
36 Additional cash requirement (line 34 minus line 35).....		36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37	0
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....		39	0
40 Unpaid minimum required contributions for all years		40	0

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

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Maritz Holdings, Inc.
EIN/PN	43-0393480/001
Plan Name	Maritz Holdings, Inc. Retirement Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Jason R. Benbow
Enrollment Number	23-07392

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

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

Interest rates:	Reflecting Stabilization	Not Reflecting Stabilization
------------------------	---------------------------------	-------------------------------------

Annual rates of increase:

- Compensation N/A
- Interest crediting rate 5.00%

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Demographic and Other Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality

- **Healthy** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).
- **Disabled** Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Termination

Rates varying by age and service.

Representative Termination Rates

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

Disability

None.

Retirement

Rates varying by age, average age 62.

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

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

From Terminated Vested Status Percentage retiring during the year		
Age	GF Rate	NGF Rate
55	5%	5%
56	5%	5%
57	5%	5%
58	5%	5%
59	5%	5%
60	5%	10%
61	5%	10%
62	5%	10%
63	5%	10%
64	5%	10%
65	60%	25%
66	25%	25%
67	25%	25%
68	25%	25%
69	25%	25%
70	100%	100%

Benefit commencement date:

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

Form of payment

Actives electing payment: Calculation of Lump Sum: 70% of participants are assumed to elect a lump sum form of payment under the plan when eligible. 50% of those electing an annuity are assumed to elect a 50% Joint and Survivor annuity.

Terminated vested electing payment: 90% of participants with access to a lump sum are assumed to elect a lump sum form of payment; the remaining 10% are assumed to elect a single life annuity. For participants with no lump sum option, 75% of participants are assumed to elect a single life annuity and 25% of participants are assumed to elect a 100% Joint and Survivor annuity

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Percent married	100% of males; 100% of females. Used to value pre-retirement surviving spouse benefits and in determining the optional forms expected to be elected at commencement.
Spouse age	Wife three years younger than husband.
Plan-related expenses	\$232,000. Plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year.
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date	First day of plan year.
Funding target	Present value of accrued benefits.
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. Willis Towers Watson has reviewed the plan provisions with Maritz Holdings, Inc. and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

The plan sponsor furnished participant data as of January 1, 2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. In consultation with the plan sponsor, the following assumptions were made for missing or apparently inconsistent data elements:

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

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

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Cash Balance Interest crediting rate

The plan credits interest to cash balance accounts using the average yield on 1-year treasuries for the month of October preceding the first day of the plan year, but with a minimum interest credit rate of 4.00% and a maximum interest credit rate of 8.00%. Maritz Holdings, Inc. has selected an expected future rate of 5.00%. After examining historical variability in this rate, and considering the increase (reduction) in interest crediting expected to be caused by the minimum (maximum) interest credit, we believe the selected assumption does not significantly conflict with what would be reasonable based on a combination of market conditions at the measurement date and future expectations consistent with other economic assumptions used, other than the discount rate.

Annuity conversion rate for hybrid plans

As required by IRC 430, annuity benefits are valued by converting accounts to annuities using the current IRC 430 interest rates, so that the interest rates assumed are effectively the same as described above for the discount rate.

Plan-related expenses

As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

Disabled Mortality

Assumptions used for funding purposes are as prescribed by IRC §430(h).

Termination

Assumed termination rates differ by age and service because of expected differences in termination rates by service.

Retirement

Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The mortality table used to calculate the funding target and target normal cost was changed to reflect the latest mortality improvement scale and from using a static projection of mortality improvement to a generational projection as required by guidance issued by IRS under IRC §430.
- The assumed plan related expenses added to the normal cost were changed from \$956,000 in 2023 to \$232,000 in 2024.
- The Interest crediting rate was updated from 4.50% to 5.00%.
- The assumed retirement rates and form of payment were updated to reflect plan experience.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

- The Interest crediting rate was updated from 4.50% to 5.00%.
- The assumed retirement rates and form of payment were updated to reflect plan experience.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

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

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

Definitions

Vesting service	Years and months of service from date of participation.
Pension service	Years and months of service from date of participation and no service accruing after December 31, 2009.
Average earnings	The average of the highest five consecutive calendar years of pensionable pay during the ten-year period ending on the earlier of the participant's termination date or retirement date
Covered compensation	The average of the Social Security taxable wage bases in effect for each calendar year during the 35-year period ending with the last day of the calendar year in which the Participant attains Social Security Retirement Age (as defined in Section 415(b)(8) of the Internal Revenue Code).
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of pension service.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Monthly Pension Benefit

Monthly pension benefit under prior plan

As of any date, one-twelfth of the sum of:

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

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

Minimum pension benefit under prior plan

The greater of:

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

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

Opening balance credit

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Cash balance benefit

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

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

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

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

Monthly preretirement death benefit

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

Eligibility for Benefits

Normal retirement

Retirement on NRD

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Early retirement	For grandfathered participants, Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service. For non-grandfathered participants, Retirement may occur anytime after separation from service and completion of three years of vesting service.
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing three years of vesting service
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

Benefits Paid Upon the Following Events

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a 100% joint and survivor annuity, a ten-year certain and life annuity, or (for married participants) a life annuity. Actuarial equivalence is based on the 417(e) applicable mortality table and an 8.00% interest rate.
Pension Increases	None
Plan participants' contributions	None
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective. Increases in the dollar limits are assumed for determining pension cost but not for determining contributions.
2021 Retiree Annuity Purchase	In December 2021, retirees and in-payment beneficiaries with monthly benefits less than or equal to \$300 per month and in payment as of January 1, 2021 were settled through the purchase of an annuity contract. Assets and liabilities for the affected participants and beneficiaries were transferred to Western-Southern Life Assurance Agency for payments commencing January 1, 2022. Participants and beneficiaries were excluded if their benefit was impacted by a QDRO, they resided outside of the US or in the state of New York, or if they had other administrative complexities.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Future Plan Changes

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

Changes in Benefits Valued Since Prior Year

None.

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Credited Service ¹										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	4	3	0	0	0	0	0	0	0	0	7
40-44	0	8	13	2	0	0	0	0	0	0	0	23
45-49	0	6	16	23	1	0	0	0	0	0	0	46
50-54	0	7	18	24	25	7	0	0	0	0	0	81
55-59	0	7	31	18	32	29	1	0	0	0	0	118
60-64	0	3	19	10	26	26	6	2	0	0	0	92
65-69	0	0	9	2	7	3	3	3	1	0	0	28
70 & over	0	1	1	2	1	0	0	1	0	0	0	6
Total	0	36	110	81	92	65	10	6	1	0	0	401

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

Plan Name: Maritz Holdings, Inc. Retirement Plan
 EIN / PN: 43-0393480/001
 Plan Sponsor: Maritz Holdings, Inc.
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	2,340,711	4,107,502	5,783,422	12,231,635
2025	1,666,476	1,448,429	5,557,128	8,672,033
2026	1,551,099	1,948,251	5,323,307	8,822,657
2027	1,350,735	1,527,327	5,172,031	8,050,093
2028	1,333,535	1,410,275	4,833,538	7,577,348
2029	1,197,952	1,394,295	4,577,744	7,169,991
2030	1,149,932	1,352,281	4,315,823	6,818,036
2031	1,070,673	1,249,158	4,048,913	6,368,744
2032	943,392	1,598,179	3,778,905	6,320,476
2033	902,779	1,135,310	3,507,142	5,545,231
2034	853,303	1,275,619	3,235,791	5,364,713
2035	740,606	1,085,125	2,967,266	4,792,997
2036	690,564	1,006,680	2,703,969	4,401,213
2037	598,201	546,653	2,448,370	3,593,224
2038	589,116	758,966	2,202,777	3,550,859
2039	528,285	576,722	1,969,255	3,074,262
2040	485,028	486,826	1,749,564	2,721,418
2041	475,612	630,043	1,545,059	2,650,714
2042	448,676	381,458	1,356,628	2,186,762
2043	413,919	374,608	1,184,692	1,973,219
2044	387,538	356,551	1,029,238	1,773,327
2045	364,063	397,726	889,880	1,651,669
2046	343,406	277,295	765,937	1,386,638
2047	324,700	279,849	656,505	1,261,054
2048	301,287	212,906	560,547	1,074,740
2049	286,408	194,968	476,938	958,314
2050	267,421	182,225	404,506	854,152
2051	250,983	166,728	342,088	759,799
2052	234,454	157,640	288,552	680,646

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2053	217,268	138,892	242,835	598,995
2054	201,015	125,138	203,949	530,102
2055	184,274	111,721	170,996	466,991
2056	168,176	98,810	143,169	410,155
2057	152,261	86,563	119,754	358,578
2058	136,875	75,108	100,124	312,107
2059	122,120	64,545	83,726	270,391
2060	108,090	54,943	70,076	233,109
2061	94,895	46,334	58,750	199,979
2062	82,622	38,723	49,378	170,723
2063	71,335	32,083	41,640	145,058
2064	61,070	26,363	35,262	122,695
2065	51,836	21,494	30,013	103,343
2066	43,621	17,398	25,697	86,716
2067	36,388	13,987	22,147	72,522
2068	30,085	11,173	19,224	60,482
2069	24,651	8,873	16,812	50,336
2070	20,014	7,005	14,813	41,832
2071	16,097	5,500	13,148	34,745
2072	12,823	4,294	11,749	28,866
2073	10,115	3,333	10,562	24,010

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	374,445	15.00000	374,445	34,067
2. Shortfall	01/01/2023	3,277,506	14.00000	3,144,878	300,156
3. Shortfall	01/01/2022	(4,407,698)	13.00000	(4,048,190)	(407,322)
4. Shortfall	01/01/2021	(914,950)	12.00000	(799,652)	(85,311)
5. Shortfall	01/01/2020	11,843,028	11.00000	9,763,245	1,111,902
Total				8,434,726	953,492

Plan Name: Maritz Holdings, Inc. Retirement Plan
EIN / PN: 43-0393480/001
Plan Sponsor: Maritz Holdings, Inc.
Valuation Date: January 1, 2024

Maritz Holdings, Inc. Retirement Plan
EIN 43-0393480 PN 001
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2024

Issuer and Description of Investment	Shares/Units/Par	Current Value
Exchange Traded Fund		
STONE RIDGE H/Y REIN RSK-I	285,340 shares	\$ 2,556,648
Government Agency Obligations		
GNMA GTD REMIC P/T 24-29 AE	146,032 par	138,457
PRIVATE EXPORT FUNDING CORP	50,000 par	49,053
CALIFORNIA ST	100,000 par	113,861
U S TREASURY NOTE	810,000 par	805,415
U S TREASURY NOTE	1,810,000 par	1,814,453
U S TREASURY NOTE	460,000 par	435,059
U S TREASURY NOTE	65,000 par	63,512
U S TREASURY NOTE	210,000 par	202,035
U S TREASURY NOTE	185,000 par	182,847
U S TREASURY NOTE	485,000 par	472,497
U S TREASURY NOTE	430,000 par	425,064
U S TREASURY BOND	3,500 par	2,849
U S TREASURY BOND	115,000 par	111,927
U S TREASURY BOND	180,000 par	174,685
U S TREASURY BOND	315,000 par	285,371
U S TREASURY BD CPN STRIP	775,000 par	206,414
U S TREASURY BD CPN STRIP	520,000 par	208,016
U S TREASURY BD CPN STRIP	1,940,000 par	749,073
U S TREASURY BD CPN STRIP	775,000 par	295,415
U S TREASURY BD CPN STRIP	385,000 par	141,545
U S TREASURY BD CPN STRIP	200,000 par	72,664
U S TREASURY BD CPN STRIP	1,470,000 par	514,441
U S TREASURY BD CPN STRIP	100,000 par	34,555
U S TREASURY BD CPN STRIP	1,340,000 par	447,104
U S TREASURY BD CPN STRIP	200,000 par	65,826
U S TREASURY BD CPN STRIP	860,000 par	276,731
U S TREASURY BD CPN STRIP	935,000 par	293,571
U S TREASURY BD CPN STRIP	350,000 par	104,381
U S TREASURY BD CPN STRIP	550,000 par	158,725
U S TREASURY BD CPN STRIP	420,000 par	116,176
U S TREASURY BD CPN STRIP	730,000 par	196,611
U S TREASURY BD CPN STRIP	425,000 par	106,866
U S TREASURY BD PRIN STRIP	610,000 par	159,201
		9,424,400
Corporate Debt Instruments		
ABBVIE INC	210,000 par	207,677
AERCAP IRELAND CAPITAL DAC / A	455,000 par	421,212
ALLSTATE CORP/THE	310,000 par	249,144
AMAZON.COM INC	850,000 par	507,986
AMEREN ILLINOIS CO	195,000 par	147,022

Maritz Holdings, Inc. Retirement Plan
 EIN 43-0393480 PN 001
 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
 December 31, 2024

(Continued)

Issuer and Description of Investment	Shares/Units/Par	Current Value
Corporate Debt Instruments Continued		
AMERICAN ELECTRIC POWER CO INC	315,000 par	\$ 322,762
AMERICAN EXPRESS CO	420,000 par	424,687
AMERICAN HONDA FINANCE CORP	290,000 par	302,006
AMERICAN HONDA FINANCE CORP	175,000 par	170,147
AMERICAN TOWER CORP	660,000 par	633,897
AMGEN INC	360,000 par	306,576
ANHEUSER-BUSCH INBEV WORLDWIDE	535,000 par	536,412
APPLE INC	905,000 par	800,038
ARES CAPITAL CORP	530,000 par	549,239
ARTHUR J GALLAGHER & CO	175,000 par	170,865
ASTRAZENECA PLC	125,000 par	81,878
AT&T INC	630,000 par	616,682
AVALONBAY COMMUNITIES INC	485,000 par	487,275
AVIS BUDGET RENTAL C 8A A 144A	110,000 par	114,037
BANK OF AMERICA CORP	800,000 par	725,904
BANK OF NOVA SCOTIA/THE	440,000 par	367,334
BBCMS MORTGAGE TRUST 20 C22 AS	60,000 par	66,058
BENCHMARK 2020-I IG3 T33B 144A	100,000 par	68,663
BENCHMARK 2020-IG2 IG2 B 144A	140,000 par	79,269
BHP BILLITON FINANCE USA LTD	340,000 par	334,186
BLACKSTONE PRIVATE CREDIT FUND	335,000 par	319,191
BMO 2022-C2 MORTGAGE TRU C2 AS	70,000 par	66,833
BMO 2023-C7 A5	125,000 par	132,363
BNP PARIBAS SA 144A	490,000 par	437,095
BORGWARNER INC	320,000 par	318,355
BOSTON GAS CO 144A	450,000 par	408,308
BP CAPITAL MARKETS AMERICA INC	580,000 par	496,329
BREAN ASSET BACKED RM6 A1 144A	91,187 par	89,327
BREAN ASSET BACKED RM7 A2 144A	110,000 par	100,852
BRIGHTHOUSE FINANCIAL INC	190,000 par	184,351
BRISTOL-MYERS SQUIBB CO	290,000 par	304,477
BURLINGTON NORTHERN SANTA FE L	440,000 par	421,533
CAMERON LNG LLC 144A	400,000 par	348,372
CANADIAN NATIONAL RAILWAY CO	145,000 par	109,262
CAPITAL ONE FINANCIAL CORP	320,000 par	318,947
CENTERPOINT ENERGY RESOURCES C	305,000 par	255,642
CF HIPPOLYTA ISSUER 1A A1 144A	94,245 par	89,347
CHUBB INA HOLDINGS LLC	150,000 par	148,266
CIGNA GROUP/THE	270,000 par	236,255
CISCO SYSTEMS INC	115,000 par	116,035
CISCO SYSTEMS INC	305,000 par	304,222
CITIGROUP INC	420,000 par	371,566
CNO GLOBAL FUNDING 144A	25,000 par	24,991
COMCAST CORP	915,000 par	854,326

Maritz Holdings, Inc. Retirement Plan
 EIN 43-0393480 PN 001
 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
 December 31, 2024

(Continued)

Issuer and Description of Investment	Shares/Units/Par	Current Value
Corporate Debt Instruments Continued		
COMCAST CORP	65,000 par	\$ 45,694
COMMONWEALTH EDISON CO	65,000 par	51,335
COMMONWEALTH EDISON CO	295,000 par	225,353
CONAGRA BRANDS INC	700,000 par	635,572
CONOCOPHILLIPS CO	290,000 par	268,584
CONSOLIDATED EDISON CO OF NEW	431,000 par	368,479
COPT DEFENSE PROPERTIES LP	390,000 par	343,251
COREBRIDGE FINANCIAL INC	495,000 par	507,924
CVS HEALTH CORP	375,000 par	304,920
DISCOVERY COMMUNICATIONS LLC	295,000 par	279,336
DRIVE AUTO RECEIVABLES TRU 2 D	700,000 par	687,001
DTE ELECTRIC CO	525,000 par	462,861
DTE ELECTRIC CO	145,000 par	94,352
DUKE ENERGY CORP	755,000 par	743,207
ELEVANCE HEALTH INC	450,000 par	416,183
ELI LILLY & CO	265,000 par	207,667
ENEL FINANCE INTERNATIONA 144A	395,000 par	376,344
ENERGY TRANSFER LP	155,000 par	163,787
ENERGY TRANSFER LP	670,000 par	661,283
ENTERPRISE PRODUCTS OPERATING	340,000 par	307,452
EQUINOR ASA	335,000 par	274,670
EVERGY KANSAS CENTRAL INC	85,000 par	82,178
EVERSOURCE ENERGY	160,000 par	153,603
EXETER AUTOMOBILE RE 2A E 144A	95,000 par	92,282
EXETER AUTOMOBILE RECEIVA 2A D	525,000 par	523,136
EXETER AUTOMOBILE RECEIVA 4A D	215,000 par	216,735
EXETER AUTOMOBILE RECEIVA 5A C	125,000 par	128,436
EXETER AUTOMOBILE RECEIVA 5A D	245,000 par	240,053
EXXON MOBIL CORP	80,000 par	53,385
FINANCE OF AMERICA S6 A1 144A	99,028 par	96,712
FLORIDA POWER & LIGHT CO	535,000 par	436,549
GENERAL DYNAMICS CORP	385,000 par	336,344
GENERAL MOTORS FINANCIAL CO IN	530,000 par	511,885
GEORGIA POWER CO	400,000 par	362,760
GILEAD SCIENCES INC	265,000 par	233,966
GOLDMAN SACHS GROUP INC/THE	830,000 par	685,422
HALEON US CAPITAL LLC	495,000 par	448,287
HCA INC	470,000 par	471,048
HOME DEPOT INC/THE	490,000 par	419,068
HONEYWELL INTERNATIONAL INC	335,000 par	314,274
HYUNDAI CAPITAL AMERICA 144A	615,000 par	623,948
INTEL CORP	435,000 par	287,196
INTERCONTINENTAL EXCHANGE INC	450,000 par	314,006
JOHN DEERE CAPITAL CORP	300,000 par	298,902
JOHNSON & JOHNSON	400,000 par	349,408
JPMBB COMMERCIAL MORTGAG C28 B	55,000 par	54,096
JPMDB COMMERCIAL MORTGAG C5 AS	190,000 par	171,355

Maritz Holdings, Inc. Retirement Plan
 EIN 43-0393480 PN 001
 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
 December 31, 2024

(Continued)

Issuer and Description of Investment	Shares/Units/Par	Current Value
Corporate Debt Instruments Continued		
JPMORGAN CHASE & CO	540,000 par	\$ 461,084
JPMORGAN CHASE & CO	525,000 par	477,188
KIMBERLY-CLARK CORP	55,000 par	42,970
KIMCO REALTY OP LLC	145,000 par	140,245
KIMCO REALTY OP LLC	445,000 par	474,054
KINDER MORGAN INC	265,000 par	265,199
MANUFACTURERS & TRADERS TRUST	610,000 par	586,985
MANULIFE FINANCIAL CORP	265,000 par	258,470
MASTERCARD INC	285,000 par	215,337
METROPOLITAN LIFE GLOBAL 144A	250,000 par	231,123
MICROSOFT CORP	445,000 par	294,991
MIDAMERICAN ENERGY CO	190,000 par	154,286
MILL CITY MORTGAGE L 2 M3 144A	85,000 par	78,551
MORGAN STANLEY	765,000 par	625,854
MOTOROLA SOLUTIONS INC	615,000 par	613,991
NATIONAL RURAL UTILITIES COOPE	245,000 par	236,565
NATIONAL RURAL UTILITIES COOPE	160,000 par	152,925
NATIONAL RURAL UTILITIES COOPE	280,000 par	289,719
NATWEST GROUP PLC	385,000 par	367,355
NEVADA POWER CO	565,000 par	539,038
NEW YORK LIFE INSURANCE C 144A	375,000 par	273,053
NORTHROP GRUMMAN CORP	335,000 par	320,160
OGE ENERGY CORP	270,000 par	274,479
OMNICOM GROUP INC	410,000 par	350,562
ONCOR ELECTRIC DELIVERY CO LLC	450,000 par	340,047
ORACLE CORP	285,000 par	306,603
O'REILLY AUTOMOTIVE INC	310,000 par	253,899
PACIFIC GAS AND ELECTRIC CO	335,000 par	313,838
PAYPAL HOLDINGS INC	150,000 par	149,073
PENSKE TRUCK LEASING CO L 144A	330,000 par	315,031
PEPSICO INC	185,000 par	120,960
PFIZER INVESTMENT ENTERPRISES	425,000 par	398,565
PHILIP MORRIS INTERNATIONAL IN	320,000 par	312,845
PNC BANK NA	650,000 par	628,043
PRINCIPAL LIFE GLOBAL FUN 144A	190,000 par	189,436
PROLOGIS LP	260,000 par	213,078
PROLOGIS LP	265,000 par	259,040
PRUDENTIAL FINANCIAL INC	360,000 par	265,964
PUBLIC SERVICE ELECTRIC AND GA	325,000 par	264,908
PUBLIC SERVICE ELECTRIC AND GA	215,000 par	201,455
REYNOLDS AMERICAN INC	360,000 par	359,003
RTX CORP	200,000 par	209,944
SANTANDER DRIVE AUT S1 R1 144A	66,497 par	67,543
SANTANDER DRIVE AUTO RECEI 3 C	175,000 par	174,622
SANTANDER DRIVE AUTO RECEI 4 C	90,000 par	90,424
SANTANDER DRIVE AUTO RECEI 4 C	170,000 par	173,638

Maritz Holdings, Inc. Retirement Plan
 EIN 43-0393480 PN 001
 Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
 December 31, 2024

(Continued)

Issuer and Description of Investment	Shares/Units/Par	Current Value
Corporate Debt Instruments Continued		
SANTANDER DRIVE AUTO RECEI 5 D	255,000 par	\$ 252,422
SANTANDER HOLDINGS USA INC	650,000 par	630,598
SANTANDER UK GROUP HOLDINGS PL	110,000 par	107,481
SCOTT TRUST 2023-SF SFS A 144A	50,000 par	50,761
SFAVE COMMERCIAL 5AVE A2B 144A	125,000 par	107,061
SIMON PROPERTY GROUP LP	35,000 par	34,035
SIMON PROPERTY GROUP LP	590,000 par	434,954
SOUTHERN CALIFORNIA EDISON CO	30,000 par	29,919
SOUTHERN CALIFORNIA EDISON CO	60,000 par	60,190
SOUTHERN CALIFORNIA EDISON CO	250,000 par	251,533
STATE STREET CORP	320,000 par	317,821
SUMITOMO MITSUI FINANCIAL GROU	360,000 par	365,684
TELEFONICA EMISIONES SA	275,000 par	270,669
TORONTO-DOMINION BANK/THE	390,000 par	369,447
TOTALENERGIES CAPITAL SA	160,000 par	153,922
TOYOTA MOTOR CREDIT CORP	355,000 par	311,094
TRAVELERS COS INC/THE	260,000 par	208,359
TRINITY HEALTH CORP	35,000 par	24,422
TRUIST BANK	460,000 par	444,116
UBS COMMERCIAL MORTGAGE T C3 B	130,000 par	121,559
UNION ELECTRIC CO	500,000 par	480,440
UNITED PARCEL SERVICE INC	405,000 par	306,779
UNITEDHEALTH GROUP INC	130,000 par	143,060
UNITEDHEALTH GROUP INC	595,000 par	561,960
US BANCORP	635,000 par	629,736
VERIZON COMMUNICATIONS INC	355,000 par	328,989
VERIZON COMMUNICATIONS INC	522,000 par	500,833
VICI PROPERTIES LP	155,000 par	151,564
VIRGINIA ELECTRIC AND POWER CO	215,000 par	213,805
VMWARE LLC	75,000 par	74,891
VULCAN MATERIALS CO	30,000 par	29,916
WALMART INC	380,000 par	332,135
WELLS FARGO & CO	700,000 par	690,144
WELLS FARGO COMMERCIAL LC25 B	45,000 par	42,849
WELLS FARGO COMMERCIAL M C35 B	120,000 par	115,187
		52,957,968
Common Collective Trust Fund		
BNY Temporary Investment Fund *	10,087,526 units	10,087,526
Private Equity Limited Partnership		
SKYBRIDGE CHIME	1,409,292 units	1,409,292

Maritz Holdings, Inc. Retirement Plan
EIN 43-0393480 PN 001
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2024

(Continued)

<u>Issuer and Description of Investment</u>	<u>Shares/Units/Par</u>	<u>Current Value</u>
Hedge Funds		
SERENGETI LYCAON	182,099 units	\$ 182,099
SERENGETI CARACAL FUND LTD	866 units	923,887
SERENGETI CARACAL II	450 units	440,716
POINTER OFFSHORE III LTD	146,066 units	146,066
		<u>1,692,768</u>
		<u>\$ 78,128,602</u>

* Represents a party-in-interest to the Plan

Maritz Holdings, Inc. Retirement Plan
 EIN 43-0393480 PN 001
 Schedule H, Line 4j – Schedule of Reportable Transactions
 Year Ended December 31, 2024

Identity	Description	Purchase Price	Selling Price	Expenses Incurred in Transactions	Cost of Asset	Net Gain (Loss)
Single Transactions						
Purchases						
U S TREASURY NOTE	Short Term Investment Fund	\$ 10,631,420	\$ -	\$ -	\$ 10,631,420	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 4,482,711	\$ -	\$ -	\$ 4,482,711	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 17,343,915	\$ -	\$ -	\$ 17,343,915	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 19,497,914	\$ -	\$ -	\$ 19,497,914	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 19,752,083	\$ -	\$ -	\$ 19,752,083	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 19,524,906	\$ -	\$ -	\$ 19,524,906	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 8,900,000	\$ -	\$ -	\$ 8,900,000	\$ -
Sales						
ISHARES CORE S&P 500 ETF	Short Term Investment Fund	\$ -	\$ 19,497,914	\$ 1,248	\$ 10,182,695	\$ 9,315,219
VANGUARD TOT INT ST IDX-INST	Short Term Investment Fund	\$ -	\$ 14,462,170	\$ -	\$ 12,728,445	\$ 1,733,725
EB TEMP INV FD	Short Term Investment Fund	\$ -	\$ 17,350,213	\$ -	\$ 17,350,213	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ -	\$ 19,752,083	\$ -	\$ 19,752,083	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ -	\$ 19,152,083	\$ -	\$ 19,152,083	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ -	\$ 19,237,485	\$ -	\$ 19,237,485	\$ -
GOLDENTREE SELECT OFFSHORE	Alternative Investment	\$ -	\$ 4,482,711	\$ -	\$ 2,804,654	\$ 1,678,057
Series of Transactions						
Purchases						
U S TREASURY NOTE	Short Term Investment Fund	\$ 10,631,420	\$ -	\$ -	\$ 10,631,420	\$ -
VANGUARD TOT INT ST IDX-INST	Short Term Investment Fund	\$ 52,809	\$ -	\$ -	\$ 52,809	\$ -
EB TEMP INV FD	Short Term Investment Fund	\$ 108,254,392	\$ -	\$ -	\$ 108,254,392	\$ -
Sales						
U S TREASURY NOTE	Short Term Investment Fund	\$ -	\$ 8,856,264	\$ -	\$ 8,815,198	\$ 41,066
ISHARES CORE S&P 500 ETF	Short Term Investment Fund	\$ -	\$ 19,798,005	\$ -	\$ 10,352,041	\$ 9,445,964
VANGUARD TOT INT ST IDX-INST	Short Term Investment Fund	\$ -	\$ 14,462,170	\$ -	\$ 12,728,445	\$ 1,733,725
EB TEMP INV FD	Short Term Investment Fund	\$ -	\$ 100,435,758	\$ -	\$ 100,435,758	\$ -
GOLDENTREE SELECT OFFSHORE	Alternative Investment	\$ -	\$ 5,816,260	\$ -	\$ 3,639,002	\$ 2,177,258