

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

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>002</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>SUPERIOR ESSEX, INC.</u></p> <p><u>5770 POWERS FERRY ROAD NW</u> <u>SUITE 400</u> <u>ATLANTA, GA 30327-4304</u></p>	<p>1c Effective date of plan <u>03/01/1988</u></p> <p>2b Employer Identification Number (EIN) <u>20-0282396</u></p> <p>2c Plan Sponsor's telephone number <u>770-657-6432</u></p> <p>2d Business code (see instructions) <u>332900</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	KENNETH KIMBRO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	KENNETH KIMBRO
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	1132
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	58
	6a(2)	58
	6b	801
	6c	147
	6d	1006
	6e	108
	6f	1114
	6g(1)	0
6g(2)	0	
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 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 checked="" type="checkbox"/> Insurance	(1) <input checked="" 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 checked="" type="checkbox"/> A (Insurance Information) – Number Attached <u>1</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached <u>0</u>	(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 _____

<p>SCHEDULE A (Form 5500)</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Insurance Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ File as an attachment to Form 5500.</p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p>2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<p>A Name of plan RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.</p>	<p>B Three-digit plan number (PN) ▶ 002</p>
<p>C Plan sponsor's name as shown on line 2a of Form 5500 SUPERIOR ESSEX, INC.</p>	<p>D Employer Identification Number (EIN) 20-0282396</p>

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRINCIPAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
42-0127290	61271	818288	1114	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II	Investment and Annuity Contract Information	
	Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.	
4	Current value of plan's interest under this contract in the general account at year end	0
5	Current value of plan's interest under this contract in separate accounts at year end.....	0
6	Contracts With Allocated Funds:	
a	State the basis of premium rates ▶	
b	Premiums paid to carrier	6b
c	Premiums due but unpaid at the end of the year	6c
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d
e	Type of contract: (1) <input type="checkbox"/> individual policies (2) <input type="checkbox"/> group deferred annuity (3) <input type="checkbox"/> other (specify) ▶	
f	If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ <input type="checkbox"/>	
7	Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)	
a	Type of contract: (1) <input type="checkbox"/> deposit administration (2) <input type="checkbox"/> immediate participation guarantee (3) <input type="checkbox"/> guaranteed investment (4) <input type="checkbox"/> other ▶	
b	Balance at the end of the previous year	7b
c	Additions: (1) Contributions deposited during the year	7c(1)
	(2) Dividends and credits.....	7c(2)
	(3) Interest credited during the year.....	7c(3)
	(4) Transferred from separate account	7c(4)
	(5) Other (specify below)..... ▶	7c(5)
	(6) Total additions	7c(6)
d	Total of balance and additions (add lines 7b and 7c(6))	7d
e	Deductions:	
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)
	(2) Administration charge made by carrier.....	7e(2)
	(3) Transferred to separate account	7e(3)
	(4) Other (specify below)..... ▶	7e(4)
(5) Total deductions	7e(5)	
f	Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f 0

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) ▶

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)	
	(2) Increase (decrease) in amount due but unpaid	9a(2)	
	(3) Increase (decrease) in unearned premium reserve	9a(3)	
	(4) Earned ((1) + (2) - (3))		9a(4)
b	Benefit charges (1) Claims paid	9b(1)	
	(2) Increase (decrease) in claim reserves	9b(2)	
	(3) Incurred claims (add (1) and (2))		9b(3)
	(4) Claims charged		9b(4)
c	Remainder of premium: (1) Retention charges (on an accrual basis) --		
	(A) Commissions	9c(1)(A)	
	(B) Administrative service or other fees	9c(1)(B)	
	(C) Other specific acquisition costs	9c(1)(C)	
	(D) Other expenses	9c(1)(D)	
	(E) Taxes	9c(1)(E)	
	(F) Charges for risks or other contingencies	9c(1)(F)	
	(G) Other retention charges	9c(1)(G)	
	(H) Total retention		9c(1)(H)
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)
	(2) Claim reserves		9d(2)
	(3) Other reserves		9d(3)
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a	
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

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

A Name of plan <u>RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>SUPERIOR ESSEX, INC.</u>	D Employer Identification Number (EIN) <u>20-0282396</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>85702484</u>	
b Actuarial value	2b	<u>88124702</u>	
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	<u>918</u>	<u>68810025</u>	<u>68810025</u>
b For terminated vested participants	<u>165</u>	<u>10422164</u>	<u>10422164</u>
c For active participants	<u>77</u>	<u>5083885</u>	<u>5083885</u>
d Total	<u>1160</u>	<u>84316074</u>	<u>84316074</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	<u>5.00 %</u>	
6 Target normal cost			
a Present value of current plan year accruals	6a	<u>0</u>	
b Expected plan-related expenses	6b	<u>340000</u>	
c Target normal cost	6c	<u>340000</u>	

Statement by Enrolled Actuary

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

SIGN HERE		
	Signature of actuary	<u>08/20/2025</u> Date
	<u>WILLIAM G. MATTHEWS</u> Type or print name of actuary	<u>23-07410</u> Most recent enrollment number
	<u>PRINCIPAL FINANCIAL GROUP</u> Firm name	<u>678-322-3609</u> Telephone number (including area code)
	<u>PO BOX 9394</u> <u>DES MOINES, IA 50306-9394</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	16604
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	16604
10	Interest on line 9 using prior year's actual return of <u>17.50</u> %	0	2906
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.12</u> %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	19510

Part III Funding Percentages			
14	Funding target attainment percentage	14	104.49 %
15	Adjusted funding target attainment percentage	15	104.51 %
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	101.37 %
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 type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
c	If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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 67
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input 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	340000	
b Excess assets, if applicable, but not greater than line 31a	31b	340000	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
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	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	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 type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021
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SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 SUPERIOR ESSEX, INC.	D Employer Identification Number (EIN) 20-0282396	

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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

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

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 50 64	CONTRACT ADMINISTRATOR	55683	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

SEJONG LLP

01-0754454

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	ACCOUNTANT	10000	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)

MERRILL LYNCH ACCOUNTS

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	INVESTMENT ADVISORY	61863	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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.	OMB No. 1210-0110 <hr/> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.</u>	B Three-digit plan number (PN)	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>SUPERIOR ESSEX, INC.</u>	D Employer Identification Number (EIN) <u>20-0282396</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: <u>PRIN LIQUID ASSETS SEP ACCT-Z</u>		
b Name of sponsor of entity listed in (a): <u>PRINCIPAL LIFE INSURANCE COMPANY</u>		
c EIN-PN <u>42-0127290-024</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</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
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 SUPERIOR ESSEX, INC.	D Employer Identification Number (EIN) 20-0282396

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

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	419253
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2527387
(2) U.S. Government securities	1c(2)	1262763
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	28402836
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	874453
(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)	84828031 51268516
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	2620060

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	85702484	86500815
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	85702484	86500815

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)	206154	
(B) U.S. Government securities.....	2b(1)(B)	28443	
(C) Corporate debt instruments.....	2b(1)(C)	618284	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	61421	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		914302
(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)	1574784	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1574784
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	100860804	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	100802924	
(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)	4101088	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1583473
c Other income	2c		13124
d Total income. Add all income amounts in column (b) and enter total.....	2d		8244651

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	7106211	
(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)		7106211
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)	55683	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	10000	
(5) Investment advisory and investment management fees	2i(5)	61863	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	212563	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		340109
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		7446320

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		798331
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: SEJONG LLP

(2) EIN: 01-0754454

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 557858.

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

A Name of plan <u>RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.</u>	B Three-digit plan number (PN)	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SUPERIOR ESSEX, INC.</u>	D Employer Identification Number (EIN) <u>20-0282396</u>	

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
---	---	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 42-0127290

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	0
--	---	---

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: 70.5 % Private Equity: _____ % Investment-Grade Debt and Interest Rate Hedging Assets: 22.8 %
 High-Yield Debt: 4.1 % Real Assets: _____ % Cash or Cash Equivalents: 0.6 % Other: 2.0 %

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 _____.

Structured Attachment Department of the Treasury Internal Revenue Service <hr/> Department of Labor Employee Benefits Security Administration <hr/> Pension Benefit Guaranty Corporation	Schedule SB, line 26a Schedule of Active Participant Data	2024 <hr/> This Form is Open to Public Inspection
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Name of Plan	RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.						
Plan Year Begin Date	01/01/2024	Plan Year End Date	12/31/2024	EIN	20-0282396	PN	002

Attained Age	YEARS OF CREDITED SERVICE					
	Under 1			1 to 4		
	No.	Average		No.	Average	
		Compensation	Cash Balance		Compensation	Cash Balance
Under 25	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0
30 to 34	0	0	0	0	0	0
35 to 39	0	0	0	0	0	0
40 to 44	0	0	0	0	0	0
45 to 49	0	0	0	0	0	0
50 to 54	0	0	0	0	0	0
55 to 59	0	0	0	0	0	0
60 to 64	0	0	0	0	0	0
65 to 69	0	0	0	0	0	0
70 & Up	0	0	0	0	0	0

Attained Age	YEARS OF CREDITED SERVICE					
	5 to 9			10 to 14		
	No.	Average		No.	Average	
		Compensation	Cash Balance		Compensation	Cash Balance
Under 25	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0
30 to 34	0	0	0	0	0	0
35 to 39	0	0	0	0	0	0
40 to 44	0	0	0	0	0	0
45 to 49	1	0	0	0	0	0
50 to 54	1	0	0	6	0	0
55 to 59	2	0	0	4	0	0
60 to 64	3	0	0	9	0	0
65 to 69	1	0	0	7	0	0
70 & Up	0	0	0	4	0	0

Name of Plan	RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.						
Plan Year Begin Date	01/01/2024	Plan Year End Date	12/31/2024	EIN	20-0282396	PN	002

Attained Age	YEARS OF CREDITED SERVICE					
	15 to 19			20 to 24		
	No.	Average		No.	Average	
		Compensation	Cash Balance		Compensation	Cash Balance
Under 25	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0
30 to 34	0	0	0	0	0	0
35 to 39	0	0	0	0	0	0
40 to 44	0	0	0	0	0	0
45 to 49	0	0	0	0	0	0
50 to 54	1	0	0	0	0	0
55 to 59	4	0	0	3	0	0
60 to 64	7	0	0	4	0	0
65 to 69	1	0	0	2	0	0
70 & Up	0	0	0	0	0	0

Attained Age	YEARS OF CREDITED SERVICE					
	25 to 29			30 to 34		
	No.	Average		No.	Average	
		Compensation	Cash Balance		Compensation	Cash Balance
Under 25	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0
30 to 34	0	0	0	0	0	0
35 to 39	0	0	0	0	0	0
40 to 44	0	0	0	0	0	0
45 to 49	0	0	0	0	0	0
50 to 54	0	0	0	0	0	0
55 to 59	1	0	0	0	0	0
60 to 64	8	0	0	2	0	0
65 to 69	3	0	0	2	0	0
70 & Up	0	0	0	1	0	0

Name of Plan	RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.						
Plan Year Begin Date	01/01/2024	Plan Year End Date	12/31/2024	EIN	20-0282396	PN	002

Attained Age	YEARS OF CREDITED SERVICE					
	35 to 39			40 & Up		
	No.	Average		No.	Average	
		Compensation	Cash Balance		Compensation	Cash Balance
Under 25	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0
30 to 34	0	0	0	0	0	0
35 to 39	0	0	0	0	0	0
40 to 44	0	0	0	0	0	0
45 to 49	0	0	0	0	0	0
50 to 54	0	0	0	0	0	0
55 to 59	0	0	0	0	0	0
60 to 64	0	0	0	0	0	0
65 to 69	0	0	0	0	0	0
70 & Up	0	0	0	0	0	0

Structured AttachmentDepartment of the Treasury
Internal Revenue ServiceDepartment of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Schedule SB, line 26b
Schedule of Projection of Expected
Benefit Payments**2024****This Form is Open to**
Public Inspection

Name of Plan	RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.						
Plan Year Begin Date	01/01/2024	Plan Year End Date	12/31/2024	EIN	20-0282396	PN	002

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	166724	327085	7049816	7543625
2025	232857	482229	6851735	7566821
2026	300891	559305	6638581	7498777
2027	326799	660136	6410154	7397089
2028	352917	736859	6169048	7258824
2029	389515	774820	5918061	7082396
2030	411267	803921	5658654	6873842
2031	425594	806108	5389584	6621286
2032	422621	816263	5114327	6353211
2033	421521	822452	4831633	6075606
2034	415316	826920	4546752	5788988
2035	405797	827560	4260875	5494232
2036	395229	810469	3974737	5180435
2037	382991	791701	3690060	4864752
2038	370253	770332	3408511	4549096
2039	355896	752799	3131686	4240381
2040	341043	726466	2861092	3928601
2041	325915	699301	2598138	3623354
2042	309865	669521	2344168	3323554
2043	292385	638042	2100438	3030865
2044	274880	604927	1868119	2747926
2045	256514	570283	1648309	2475106
2046	237903	534262	1442008	2214173
2047	219135	497060	1250110	1966305
2048	200392	458927	1073380	1732699

Name of Plan	RETIREMENT INCOME PLAN FOR SALARIED EMPLOYEES OF ESSEX GROUP, INC.						
Plan Year Begin Date	01/01/2024	Plan Year End Date	12/31/2024	EIN	20-0282396	PN	002

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2049	181635	420188	912411	1514234
2050	163135	381247	767537	1311919
2051	145097	342582	638787	1126466
2052	127735	304711	525866	958312
2053	111259	268157	428175	807591
2054	95856	233424	344837	674117
2055	81683	200939	274739	557361
2056	68845	171039	216602	456486
2057	57400	143946	169060	370406
2058	47350	119767	130727	297844
2059	38653	98511	100248	237412
2060	31231	80101	76337	187669
2061	24982	64390	57818	147190
2062	19789	51174	43641	114604
2063	15526	40210	32905	88641
2064	12067	31240	24850	68157
2065	9293	24000	18850	52143
2066	7090	18233	14401	39724
2067	5360	13699	11109	30168
2068	4015	10176	8667	22858
2069	2978	7474	6847	17299
2070	2188	5425	5474	13087
2071	1591	3892	4426	9909
2072	1145	2758	3612	7515
2073	815	1930	2969	5714

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

**Employer ID No.: 20-0282396
Plan No.: 002**

**Financial Statements as of December 31, 2024 and 2023,
and for the Year Ended December 31, 2024**

**and Supplemental Schedules as of and for
the Year Ended December 31, 2024**

(With Independent Auditor's Report Thereon)

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

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Note: All other schedules are omitted since they are not applicable or are not required based upon the disclosure requirements of the Employee Retirement Income Security Act of 1974 and applicable regulations issued by the Department of Labor.

Independent Auditor's Report

To the Administrative Committee of
Retirement Income Plan for Salaried Employees of Essex Group, Inc.:

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

We have performed audits of the accompanying financial statements of Retirement Income Plan for Salaried Employees of Essex Group, Inc. (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 11 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 financial statements referred to above, 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 financial statements referred to above 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. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit for 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 for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit for 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 generally accepted auditing standards 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 generally accepted auditing standards, 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.

Supplemental Schedules Required by ERISA

The supplemental schedules of assets (held at end of year) as of December 31, 2024 and reportable transactions for the year then ended, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. 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).

SEJONG LLP

Ridgefield Park, New Jersey

October 13, 2025

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

Statements of Net Assets Available for Benefits

December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Assets:		
Investments, at fair value	\$ 86,081,562	\$ 84,828,031
Investment in pooled separate account, at net asset value	<u>—</u>	<u>874,453</u>
Total investment	86,081,562	85,702,484
Accrued dividend and interest	<u>419,253</u>	<u>—</u>
Net assets available for benefits	<u>\$ 86,500,815</u>	<u>\$ 85,702,484</u>

See independent auditor's report and accompanying notes to financial statements.

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2024

Additions:

Investment income:

Net appreciation in fair value of investments	\$ 5,742,441
Dividend and interest income	2,489,086
Other income	<u>13,124</u>
Total investment income	<u>8,244,651</u>

Total additions	<u>8,244,651</u>
-----------------	------------------

Deductions:

Benefits paid to participants and beneficiary	7,106,211
Administrative expenses	<u>340,109</u>
Total deductions	<u>7,446,320</u>

Net increase	798,331
--------------	---------

Net assets available for benefits:

Beginning of year	<u>85,702,484</u>
End of year	<u>\$ 86,500,815</u>

See independent auditor's report and accompanying notes to financial statements.

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

Notes to Financial Statements

December 31, 2024

(1) Description of the Plan

a) General

Retirement Income Plan for Salaried Employees of Essex Group, Inc. (the “Plan”) is a noncontributory defined benefit pension plan established by Essex Group, Inc. (the “Company”), a wholly owned subsidiary of Superior Essex Inc., for the benefit of eligible employees of the Company. The following description of the Plan provides only general information. Participants should refer to the Plan document (dated as of May 12, 2020) for a more completed description of the Plan’s provisions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

All salaried employees of the Company were eligible to participate upon reaching the age of 21 and having completed one year of continuous service. The Plan was amended effective January 1, 2000, such that salaried employees hired on or after January 1, 2000, are not eligible to participate in the Plan. The Plan was amended to freeze benefit accruals effective January 22, 2004, for all participants in the Plan. Effective January 1, 2014, the Plan was amended and restated to bring the Plan into compliance with the current laws and regulations enacted prior to the adoption of the amended and restated plan.

b) Contributions

Contributions to provide benefits under the Plan are made solely by the Company and are calculated by the Plan’s independent actuaries using an asset smoothing method. The Company’s funding policy is to make annual cash contributions to the Plan in amounts as deemed necessary to maintain the Plan on a sound actuarial basis. The Company met the minimum funding requirements of Employee Retirement Income Security Act of 1974 (ERISA) for the year ended December 31, 2024.

c) Vesting

An employee under the Plan became fully vested after five years of continuous service or attainment of age 65. Employees who terminate service before completing five years of credited service forfeited their right to receive benefits under the Plan.

d) Pension Benefits

Participants who have attained the normal retirement age of 65 are generally entitled to the following monthly pension benefits:

- For service prior to January 1, 1974, benefits equal to the greater of the pension accrued under prior Plan provisions or \$5 per month for each year of service accrued from the date of employment to December 31, 1973.
- For service after December 31, 1973, benefits equal to the greater of (i) 1/12th of 1.5% of final average earnings multiplied by years of service (after December 31, 1973, and prior to January 22, 2004), minus 50% of primary social security or (ii) 1/12th of the minimum

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service benefit equal to years of service multiplied by a stated benefit multiplier based on final average earnings.

The Plan provides that benefits be paid for the remaining lifetime of a retired participant, and after the participant's death, an amount equal to 50% of the benefits is paid to the eligible surviving spouse, if any. Participants may elect, with spousal consent, if applicable, monthly payments for life of the participant only or other spousal beneficiary survivorship, as defined by the Plan. If the present value of a participant's benefit is \$5,000 or less, the participant will automatically receive a lump-sum cash payment following termination of employment.

Participants with ten years of continuous service, as defined in the Plan, can elect to receive early retirement benefits upon attaining age 50. Early monthly retirement benefits are based on the accrued amount at the participant's normal retirement date reduced, as defined by the Plan, by 0.3% or 0.5%, depending on age and years of service, for each month prior to the participant's normal retirement date.

e) Death and Disability Benefits

In the event that a participant dies after completing five years of service, but prior to attaining age 55, the eligible surviving spouse is entitled to monthly benefits equal to 50% of the amount the deceased participant would have received if the participant had retired at age 55. Payments to the spouse commence on the date the participant would have been 55. In the event that a participant dies after completing five or ten years of service and attaining age 55, the eligible surviving spouse is entitled to monthly benefits equal to 50% and 100%, respectively, of the amount the deceased participant would have received if the participant had retired at age 55.

Prior to January 22, 2004, in the event that a participant becomes permanently and totally disabled while the participant were an actively employed Plan participant with 10 or more years of continuous service and were receiving Social Security disability benefits, the participant continued to earn credited service until the earliest of the dates specified under the Plan policy.

f) Funding Policy

The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. During 2024, the Plan was fully funded; therefore, no Company contributions were required to be made.

Although it has not expressed any intentions to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

(2) Summary of Significant Accounting Policies

a) Basis of Accounting

The accompanying financial statements are prepared in conformity with accounting principles generally accepted in the United States of America ("GAAP").

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b) 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, and disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits and changes therein at the date of the financial statements. Actual results could differ from those estimates.

c) Contributions Receivable

Contributions and contributions receivable presented in the financial statements are in accordance with GAAP and may differ from contributions and contributions receivable presented on Schedule H of Form 5500 which are presented based on the plan year for which they are designated.

d) Investment Valuation and Income Recognition

Investments are stated at fair value. Fair value of a financial instrument is the amount that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The following is a description of the valuation methodologies used to measure the Plan's investments at fair value:

Interest-bearing cash – The Plan's investments in interest-bearing cash are valued at the daily closing price as reported by the fund. Interest-bearing cash held by the Plan consists of investments in money market funds, which are deemed to be actively traded.

U.S. government securities – The Plan's investments in U.S. government securities are valued using quoted prices in active markets.

Corporate bonds – The Plan's investments in corporate bonds are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

Mutual Funds – The Plan's investments in mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. The value is based on the quoted market prices of the underlying shares owned by the fund, minus its liabilities, then divided by the number of shares outstanding.

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Pooled Separate Account – The unit of pooled separate account is valued by the asset custodian at the daily net asset value, which represents the cumulative market values of the pooled separate account’s underlying investments. The NAV, as provided by the trustee, is used as a practical expedience to estimate fair value. The NAV is generally based on the fair value of the underlying investments held by the pooled separate account less its liabilities. As of December 31, 2024, there was no such account.

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.

e) Net Appreciation (Depreciation) in Fair Value of Investments

Net realized and unrealized appreciation (depreciation) is recorded in the accompanying statement of changes in net assets available for benefits as net appreciation (depreciation) in fair value of investments.

f) Payment of Benefits

Benefits are recorded when paid.

g) Administrative Expenses

The Plan’s expenses are paid by the Plan. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statement of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation of fair value of investments presented in the accompanying statement of changes in net assets available for benefits.

(3) Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, which are attributable under the Plan’s provisions to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. The actuarial present value of accumulated plan benefits is determined by an independent actuary and 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.

**RETIREMENT INCOME PLAN FOR SALARIED
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The actuarial present value of accumulated plan benefits as of December 31, 2024 and 2023, is as follows:

	2024	2023
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving payments	\$ 63,902,878	\$ 63,448,045
Other participants	11,834,111	13,813,460
Total vested benefits	75,736,989	77,261,505
Nonvested benefits	—	—
Total actuarial value of accumulated plan benefits	\$ 75,736,989	\$ 77,261,505

The changes in the present value of accumulated plan benefits for the year ended December 31, 2024, are as follows:

Actuarial present value of accumulated plan benefits at beginning of year	\$ 77,261,505
Increase (decrease) during the year	
Interest due to decrease in discount period	4,610,157
Benefit payments	(7,105,684)
Noninvestment experience	(383,406)
Change in assumptions	1,354,417
Net decrease	(1,524,516)
Actuarial present value of accumulated plan benefits at end of year	\$ 75,736,989

Significant assumptions underlying the actuarial computations as of December 31, 2024 and 2023, are as follows:

	2024	2023
Discount rate	6.00%	6.25%
Retirement rates	Rates vary by age and status	Rates vary by age and status
Form of benefit	Normal form	Normal form
Mortality	Pri-2012 Total dataset base rate mortality table projected generationally using the Principal Mortality Improvement Scale (Principal 2024).	Pri-2012 Total dataset base rate mortality table projected generationally using the Principal Mortality Improvement Scale (Principal 2023).

**RETIREMENT INCOME PLAN FOR SALARIED
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These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

(4) Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) Topic 820, “Fair Value Measurements and Disclosures”, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that requires assets and liabilities measured at fair value to be categorized into one of the three levels based on the priority of inputs used in the valuation. Assets and liabilities are classified in their entirety based on the lowest level of input significant to the fair value measurement. The three levels of the fair value hierarchy under FASB ASC Topic 820 are described as follows:

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

Level 2: Inputs to the valuation methodology include (a) quoted prices for similar assets or liabilities in active markets; (b) quoted prices for identical or similar assets or liabilities in inactive markets; (c) inputs other than quoted prices that are observable for the asset or liability; and (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

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

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

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

**RETIREMENT INCOME PLAN FOR SALARIED
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Notes to Financial Statements

December 31, 2024

The following table sets forth, by level within the fair value hierarchy, the Plan's investment assets that are measured at fair value as of December 31, 2024 and 2023.

Investments at Fair Value as of December 31, 2024

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Interest-bearing cash	\$ 2,527,387	–	–	\$ 2,527,387
U.S. government securities	1,262,763	–	–	1,262,763
Corporate bonds	–	31,022,896	–	31,022,896
Mutual funds	<u>51,268,516</u>	<u>–</u>	<u>–</u>	<u>51,268,516</u>
Total	<u>\$ 55,058,666</u>	<u>31,022,896</u>	<u>–</u>	<u>\$ 86,081,562</u>

Investments at Fair Value as of December 31, 2023

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	<u>\$ 84,828,031</u>	<u>–</u>	<u>–</u>	<u>\$ 84,828,031</u>
Investment measured at net asset value *				<u>874,453</u>
Total				<u>\$ 85,702,484</u>

* Investment that is measured at fair value using the net asset value per share (or its equivalent) practical expedient has not been categorized in the fair value hierarchy. The fair value amount presented in this table is intended to permit reconciliation of the fair value hierarchy to the amount presented in the statements of net assets available for benefits.

(5) Federal Income Tax Status

The Internal Revenue Service has determined and informed the Company by a letter dated February 20, 2014, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the Company and the Plan administrator believe that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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Generally accepted accounting principles require Plan's management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the US taxing authorities. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2024, there are no uncertain positions taken, or expected to be taken, that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. Plan management believes it is no longer subject to income tax examinations for years prior to 2021.

(6) Plan Termination

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

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (PBGC), if the Plan terminates. 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, subject to a statutory ceiling on the amount of an individual's monthly benefit.

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

(7) Related Party and Party-in-Interest Transactions

Principal Life Insurance Company serves as a recordkeeper and consulting actuary. Plan expenses include administrative services and actuary consulting fees paid to Principal Life Insurance Company of \$55,683 for the year ended December 31, 2024. Fees paid during the year for administrative services rendered by other parties in interest were based on customary and reasonable rates for such services.

**RETIREMENT INCOME PLAN FOR SALARIED
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Notes to Financial Statements

December 31, 2024

Other notable related party transactions and party-in-interest transactions for services provided to the Plan by the related party and party-in-interest disclosed.

<u>Related party and party-in-interest</u>	<u>Description / Services</u>
Essex Group, Inc.	Employer of participants of the Plan and Plan Sponsor
Delaware Charter Guarantee & Trust Company	Former trustee
Principal Bank	Current trustee
Sejong LLP	External auditors of the Plan
Merrill Lynch Pierce Fenner & Smith	Investment advisor

(8) Concentrations of Credit Risks

The Plan's exposure to a concentration of credit risk is limited by diversification of investments across various financial instruments.

(9) Risk and Uncertainties

The Plan provides for various investment options in common stocks, a money market fund, a guaranteed interest account, and in registered investment companies which invest in combinations of stocks, bonds, fixed income securities, mutual funds, and other 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 such changes could materially affect participants' account balances and 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 and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

(10) Reconciliation of Financial Statements to Form 5500

There was no major difference between the financial statements and Form 5500.

**RETIREMENT INCOME PLAN FOR SALARIED
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Notes to Financial Statements

December 31, 2024

(11) Information Certified by Trustee

The following is a summary of the unaudited information regarding the Plan as of December 31, 2024 and 2023, and for the year ended December 31, 2024, included in the Plan's financial statements and supplemental schedules that were prepared by or derived from information certified by Principal Bank, the trustee of the Plan as of December 31, 2024, and for the period from July 1, 2024 to December 31, 2024 and Delaware Charter Guarantee & Trust Company, the trustee of the Plan as of December 31, 2023 and for the period from January 1, 2024 to June 30, 2024.

The trustees hold the Plan's investment assets and execute investment transactions. The plan administrator obtained certifications from the trustees as of December 31, 2024 and 2023, and for the year ended December 31, 2024 that the information provided to the plan administrator by the trustees is complete and accurate.

	2024	2023
Statements of net assets available for benefits:		
Investment, at fair value	\$ 86,081,562	\$ 84,828,031
Investment in pooled separate account	—	874,453
Accrued dividend and interest	419,253	
Statement of changes in net assets available for benefits:		
Net appreciation in fair value of investments	5,742,441	
Dividend and interest income	2,489,086	

Note (4): The total fair value amounts of all investments in the note, excluding the classification and level of investments.

Supplemental schedules: All investment balances and information included in the supplemental schedules of assets (held at end of year) and reportable transactions.

(12) Subsequent Events

For the year ended December 31, 2024, subsequent events were evaluated through October 13, 2025, the date the financial statements were available to be issued.

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December 31, 2024

**SUPPLEMENTAL SCHEDULES
(See independent auditors' report)**

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EMPLOYEES OF ESSEX GROUP, INC.**

Plan Number: 002
EIN: 20-0282396

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
Interest-bearing cash:				
* PRINCIPAL FUNDS	Principal Government Money market fund	\$ 2,527,387	\$ 2,527,387	
Total interest-bearing cash		2,527,387	2,527,387	
U.S. government securities:				
UNITED STATES TREASURY NOTES	91282CFH9 DTD 08/31/2022 3.125% 08/31/2027	1,250,556	1,262,763	
Total U.S. government securities		1,250,556	1,262,763	
Corporate bonds:				
ABBVIE INC	00287YDR7 DTD 02/26/2024 4.800% 03/15/2027 CALLABLE	125,478	125,716	
ABBVIE INC	00287YDT3 DTD 02/26/2024 4.950% 03/15/2031 CALLABLE	126,603	124,975	
ABBVIE INC	00287YDX4 DTD 02/26/2024 5.500% 03/15/2064 CALLABLE	91,508	85,928	
ABBVIE INC	00287YCA5 DTD 05/21/20 4.050 11/21/2039	93,411	89,705	
ABBVIE INC	00287YCB3 DTD 05/21/20 4.250 11/21/2049	94,433	89,434	
AERCAP IRELAND CAP/GLOBA	00774MAW5 DTD 10/29/21 3.000 10/29/2028	234,269	236,120	
AERCAP IRELAND CAP/GLOBA	00774MAY1 DTD 10/29/21 3.400 10/29/2033	123,734	123,485	
ALABAMA POWER CO	010392FM5 DTD 03/11/15 3.750 03/01/2045	160,907	156,954	
ALABAMA POWER CO	010392FW3 DTD 11/18/21 3.000 03/15/2052	162,347	157,263	
ALPHABET INC	02079KAD9 DTD 08/05/20 1.100 08/15/2030	124,221	124,731	
ALPHABET INC	02079KAG2 DTD 08/05/20 2.250 08/15/2060	63,529	59,582	
AMAZON.COM INC	023135CK0 DTD 04/13/2022 4.100% 04/13/2062 CALLABLE	61,754	58,691	
AMAZON.COM INC	023135AP1 DTD 12/05/14 4.800 12/05/2034	96,012	94,552	
AMAZON.COM INC	023135BJ4 DTD 02/22/18 4.050 08/22/2047	123,901	119,815	
AMAZON.COM INC	023135BY1 DTD 05/12/21 1.650 05/12/2028	126,127	127,494	
AMAZON.COM INC	023135CA2 DTD 05/12/21 2.875 05/12/2041	94,686	91,758	
AMERICA MOVIL SAB DE CV	02364WBJ3 DTD 05/07/20 2.875 05/07/2030	219,219	218,508	
AMERICAN EXPRESS CO	025816BF5 DTD 12/03/12 4.050 12/03/2042	129,225	125,585	
AMERICAN EXPRESS CO	025816DT3 DTD 04/25/2024 VAR CPN 04/23/2027 CALLABLE	161,608	161,715	
AMERICAN INTERNATIONAL	026874DS3 DTD 03/27/2023 5.125% 03/27/2033 CALLABLE	160,285	158,013	
AMERICAN INTL GROUP	026874DA2 DTD 07/16/14 4.500 07/16/2044	131,877	128,999	
AMERICAN INTL GROUP	026874DP9 DTD 05/11/20 4.375 06/30/2050	97,101	95,037	
AMERICAN TOWER CORP	03027XAY6 DTD 10/03/19 3.700 10/15/2049	63,586	61,549	
AMERICAN TOWER CORP	03027XBD1 DTD 06/03/20 3.100 06/15/2050	92,639	89,802	
AMERICAN TOWER CORP	03027XCH1 DTD 03/07/2024 5.450% 02/15/2034 CALLABLE	60,506	60,103	
AMGEN INC	031162DQ0 DTD 03/02/2023 5.250% 03/02/2030 CALLABLE	122,228	121,120	
AMGEN INC	031162DR8 DTD 03/02/2023 5.250% 03/02/2033 CALLABLE	126,308	124,078	
ANHEUSER-BUSCH COS LLC / ANHEUSER-BUSCH INBEV		92,426	90,109	
ANHEUSER-BUSCH INBEV	03523TB33 DTD 03/21/2024 5.000% 06/15/2034 CALLABLE	126,191	123,534	
ANHEUSER-BUSCH INBEV WOR	03523TBV9 DTD 01/23/19 5.550 01/23/2049	93,195	88,528	
ANHEUSER-BUSCH INBEV WOR	03523TBW7 DTD 01/23/19 5.800 01/23/2059	91,297	86,553	
ANTHEM INC	036752AM5 DTD 05/05/20 3.125 05/15/2050	34,062	31,984	
APPLE INC	037833EP1 DTD 08/08/2022 3.350% 08/08/2032 CALLABLE	92,016	91,608	
APPLE INC	037833EV8 DTD 05/10/2023 4.300% 05/10/2033 CALLABLE	95,101	92,693	
APPLE INC	037833EW6 DTD 05/10/2023 4.850% 05/10/2053 CALLABLE	93,761	89,724	
APPLE INC	037833AL4 DTD 05/03/13 3.850 05/04/2043	64,142	62,126	
APPLE INC	037833DG2 DTD 11/13/17 3.750 11/13/2047	93,691	90,379	
ASTRAZENECA PLC	046353AU2 DTD 08/17/18 4.375 08/17/2048	93,305	88,972	
ASTRAZENECA PLC	046353AZ1 DTD 05/28/21 3.000 05/28/2051	97,153	91,546	
AT&T INC	00206RMT6 DTD 06/02/2023 5.400% 02/15/2034 CALLABLE	126,729	125,500	
AT&T INC	00206RJZ6 DTD 05/28/20 3.500 06/01/2041	155,588	153,254	
AT&T INC	00206RKA9 DTD 05/28/20 3.650 06/01/2051	126,203	123,590	
AT&T INC	00206RLV2 DTD 03/15/21 3.650 09/15/2059	61,665	59,613	
BANK OF NY MELLON CORP	MEDIUM TERM NOTE	248,108	249,335	
BAT CAPITAL CORP	054989AB4 DTD 08/02/2023 6.421% 08/02/2033 CALLABLE	90,583	89,840	
BAT CAPITAL CORP	054989AD0 DTD 08/02/2023 7.081% 08/02/2053 CALLABLE	121,448	120,680	
BAT CAPITAL CORP	05526DBV6 DTD 03/16/2022 5.650% 03/16/2052 CALLABLE	92,750	91,541	
BECTON DICKINSON & CO	075887CS6 DTD 02/08/2024 5.110% 02/08/2034 CALLABLE	94,625	93,603	
BECTON DICKINSON & CO	075887CU1 DTD 06/07/2024 5.081% 06/07/2029 CALLABLE	95,955	95,611	
BECTON DICKINSON AND CO	075887BX6 DTD 06/06/17 4.669 06/06/2047	93,552	89,870	
BHP BILLITON FIN USA LTD	055451AV0 DTD 09/30/13 5.000 09/30/2043	130,811	126,126	
BP CAP MARKETS AMERICA	10373QBU3 DTD 02/13/2023 4.812% 02/13/2033 CALLABLE	152,596	149,835	
BP CAP MKTS AMER	10373QBY5 DTD 05/17/2024 5.017% 11/17/2027 CALLABLE	156,541	156,700	
BROADCOM INC	11135FBX8 DTD 07/12/2024 5.050% 07/12/2029 CALLABLE	125,628	125,475	
BROADCOM INC	11135FBY6 DTD 07/12/2024 5.150% 11/15/2031 CALLABLE	125,489	125,810	
CAPITAL ONE FINANCIAL CO	14040HCZ6 DTD 06/08/2023 VAR CPN 06/08/2029 CALLABLE	248,372	247,824	
CARRIER GLOBAL CORP	14448CBD5 DTD 11/30/2023 6.200% 03/15/2054 CALLABLE	93,021	89,863	
CATERPILLAR INC	149123CB5 DTD 08/15/12 3.803 08/15/2042	124,659	121,860	
CATERPILLAR INC	149123CJ8 DTD 04/09/20 3.250 04/09/2050	95,018	89,805	
CHUBB INA HLDGS INC	MEDIUM TERM NOTE	95,295	93,817	
CIGNA GROUP	125523CTS DTD 02/13/2024 5.000% 05/15/2029 CALLABLE	125,619	124,899	
CIGNA GROUP	125523CW8 DTD 02/13/2024 5.600% 02/15/2054 CALLABLE	93,141	88,973	
CITIGROUP INC	172967NF4 DTD 11/03/21 11/03/2042	125,143	122,556	
CITIGROUP INC	172967PF2 DTD 02/13/2024 VAR CPN 02/13/2030 CALLABLE	155,739	154,882	
CITIGROUP INC	172967PL9 DTD 06/11/2024 VAR CPN 06/11/2035 CALLABLE	108,377	104,113	
COCA-COLA CO/THE	191216CY4 DTD 05/01/20 2.750 06/01/2060	31,601	29,148	
COMCAST CORP	20030NEC1 DTD 02/09/2023 4.650% 02/15/2033 CALLABLE	92,985	91,760	

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EMPLOYEES OF ESSEX GROUP, INC.**

Plan Number: 002
EIN: 20-0282396

Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value		Cost	Current value
COMCAST CORP	20030NED9	DTD 05/09/2023 4.550% 01/15/2029 CALLABLE	154,231	153,472
COMCAST CORP	20030NEF4	DTD 05/09/2023 5.350% 05/15/2053 CALLABLE	92,460	87,935
COMCAST CORP	20030NEJ6	DTD 05/22/2024 5.300% 06/01/2034 CALLABLE	91,414	89,888
COMCAST CORP	20030NDH1	DTD 03/27/20 3.750 04/01/2040	91,102	88,476
CONOCOPHILLIPS	20826FBE5	DTD 05/23/2023 5.300% 05/15/2053 CALLABLE	63,374	60,132
CONOCOPHILLIPS COMPANY	20826FBC9	DTD 09/15/2022 3.758% 03/15/2042 CALLABLE	93,327	90,630
CONOCOPHILLIPS COMPANY	20826FBD7	DTD 09/15/2022 4.025% 03/15/2062 CALLABLE	76,309	72,257
CONSTELLATION BRANDS INC	21036PBG2	DTD 04/27/20 3.750 05/01/2050	62,888	60,806
CSX CORP	126408HV8	DTD 07/28/2022 4.500% 11/15/2052 CALLABLE	91,233	88,542
CSX CORP	126408HW6	DTD 09/07/2023 5.200% 11/15/2033 CALLABLE	126,996	125,206
CVS HEALTH CORP	126650EC0	DTD 05/09/2024 5.550% 06/01/2031 CALLABLE	91,283	89,341
CVS HEALTH CORP	126650ED8	DTD 05/09/2024 5.700% 06/01/2034 CALLABLE	91,160	88,464
CVS HEALTH CORP	126650EF3	DTD 05/09/2024 6.050% 06/01/2054 CALLABLE	94,429	89,114
CVS HEALTH CORP	126650CZ1	DTD 03/09/18 5.050 03/25/2048	123,778	115,437
DEERE & COMPANY	244199BK0	DTD 03/30/20 3.750 04/15/2050	48,077	46,092
DELL INT LLC / EMC CORP	24703DBF7	DTD 06/15/2023 3.375% 12/15/2041 CALLABLE	63,360	62,537
DELL INT LLC EMC CORP	24703DBH3	DTD 06/15/2023 3.450% 12/15/2051 CALLABLE	62,184	61,087
DELL INT LLC/EMC CORP	24703DBJ9	DTD 01/24/2023 5.250% 02/01/2028 NON CALLABLE	91,073	91,092
DELL INTL LLC	24703DBN0	DTD 03/18/2024 5.400% 04/15/2034 CALLABLE	60,241	59,855
DOW CHEMICAL CO/THE	260543CG6	DTD 11/14/12 4.375 11/15/2042	97,898	94,336
DOW CHEMICAL CO/THE	260543DD2	DTD 08/26/20 3.600 11/15/2050	64,817	61,797
DOWDUPONT INC	26078JAE0	DTD 11/28/18 5.319 11/15/2038	101,442	95,281
DTE ELECTRIC CO	23338VAT3	DTD 03/03/2023 5.400% 04/01/2053 CALLABLE	197,872	193,938
DTE ENERGY CO	233331BL0	DTD 05/03/2024 5.850% 06/01/2034 CALLABLE	129,353	128,320
DUKE ENERGY CORP	26441CCC7	DTD 01/05/2024 4.850% 01/05/2029 CALLABLE	129,932	129,398
DUKE ENERGY CORP	26441CCE3	DTD 06/07/2024 5.450% 06/15/2034 NON CALLABLE	100,783	99,839
DUKE ENERGY CORP	26441CCF0	DTD 06/07/2024 5.800% 06/15/2054 CALLABLE	99,333	97,410
DUKE ENERGY CORP	26441CBM6	DTD 06/10/21 3.300 06/15/2041	96,767	95,404
ELEVANCE HEALTH INC	036752AY9	DTD 05/30/2024 5.150% 06/15/2029 CALLABLE	131,993	130,710
ELEVANCE HEALTH INC	036752AZ6	DTD 05/30/2024 5.375% 06/15/2034 CALLABLE	162,773	158,576
ELEVANCE HEALTH INC	28622HAC5	DTD 02/08/2023 5.125% 02/15/2053 CALLABLE	97,816	93,414
ENERGY TRANSFER LP	29273VAW0	DTD 01/25/2024 5.950% 05/15/2054 CALLABLE	93,373	91,841
ENERGY TRANSFER LP	29273VAZ3	DTD 06/21/2024 5.250% 07/01/2029 CALLABLE	95,666	95,452
ENERGY TRANSFER LP	29273VBA7	DTD 06/21/2024 5.600% 09/01/2034 CALLABLE	91,883	90,920
ENERGY TRANSFER PARTNERS	29278NAE3	DTD 06/08/18 6.000 06/15/2048	93,241	91,761
ENTERPRISE PRODUCTS OPER	29379VCF8	DTD 01/11/2024 4.850% 01/31/2034 CALLABLE	94,029	91,890
ENTERPRISE PRODUCTS OPER	29379VBY8	DTD 01/15/20 3.700 01/31/2051	60,600	57,319
ENTERPRISE PRODUCTS OPER	29379VCB7	DTD 09/15/21 3.300 02/15/2053	133,477	128,187
EXELON CORP	30161NBL4	DTD 02/21/2023 5.600% 03/15/2053 CALLABLE	98,407	96,218
EXELON CORP	30161NBM2	DTD 02/27/2024 5.150% 03/15/2029 CALLABLE	96,157	95,480
EXELON CORP	30161NBN0	DTD 02/27/2024 5.450% 03/15/2034 CALLABLE	96,304	94,780
EXELON CORP	30161NAV3	DTD 04/07/16 4.450 04/15/2046	97,259	95,774
FIFTH THIRD BANCORP	316773DL1	DTD 01/29/2024 VAR CPN 01/29/2032 CALLABLE	186,900	187,061
FISERV INC	337738BL1	DTD 03/04/2024 5.450% 03/15/2034 CALLABLE	60,685	60,037
FLORIDA POWER & LIGHT CO	341081GQ4	DTD 05/18/2023 4.800% 05/15/2033 CALLABLE	128,960	126,464
FLORIDA PWR & LT CO	341081GU5	DTD 06/03/2024 5.300% 06/15/2034 CALLABLE	134,007	130,369
GOLDMAN SACHS GROUP INC	38141GYK4	DTD 07/21/21 07/21/2042	126,193	121,592
GOLDMAN SACHS GROUP INC	38141GZM9	DTD 01/24/22 02/24/2033	168,602	163,755
GOLDMAN SACHS GROUP INC	38141GA87	DTD 04/25/2024 5.727% 04/25/2030 CALLABLE	123,444	122,473
HCA INC	404119CP2	DTD 05/04/2023 5.200% 06/01/2028 CALLABLE	95,233	95,233
HCA INC	404119CU1	DTD 02/23/2024 5.600% 04/01/2034 CALLABLE	90,788	88,658
HCA INC	404119CW7	DTD 02/23/2024 6.100% 04/01/2064 CALLABLE	89,969	85,865
HCA INC	404119BV0	DTD 06/22/17 5.500 06/15/2047	94,650	90,799
HOME DEPOT INC	437076DD1	DTD 06/25/2024 4.850% 06/25/2031 CALLABLE	95,519	94,964
HOME DEPOT INC	437076DE9	DTD 06/25/2024 4.950% 06/25/2034 CALLABLE	65,292	64,122
HOME DEPOT INC	437076BX9	DTD 12/06/18 4.500 12/06/2048	62,237	59,794
HOME DEPOT INC	437076CC4	DTD 03/30/20 3.300 04/15/2040	63,742	62,327
HP ENTERPRISE CO	42824CAY5	DTD 10/15/16 6.350 10/15/2045	64,101	62,269
HP ENTERPRISE CO	42824CBK4	DTD 07/17/20 1.750 04/01/2026	122,980	125,207
HUNTINGTON BANCSHARES	446150BD5	DTD 02/02/2024 VAR CPN 02/02/2035 CALLABLE	251,005	249,515
IBM CORP	459200KX8	DTD 02/06/2023 4.500% 02/06/2028 CALLABLE	154,284	154,087
IBM CORP	459200JZ5	DTD 05/15/19 3.300 05/15/2026	155,747	157,112
JOHN DEERE CAPITAL CORP	24422EXH7	DTD 01/08/2024 4.500% 01/16/2029 NON CALLABLE	94,220	94,140
JPMORGAN CHASE & CO	46647PAJ5	DTD 07/24/17 07/24/2038	134,396	127,979
JPMORGAN CHASE & CO	46647PAL0	DTD 11/10/17 11/15/2048	61,716	58,644
JPMORGAN CHASE & CO	46647PCD6	DTD 04/22/21 04/22/2042	126,352	121,153
JPMORGAN CHASE & CO	46647PCE4	DTD 04/22/21 04/22/2052	62,020	58,122
JPMORGAN CHASE & CO	46647PDR4	DTD 06/01/2023 VAR CPN 06/01/2034 CALLABLE	165,800	159,888
KEYCORP	MEDIUM TERM NOTE		191,046	193,856
KINDER MORGAN INC	494553AD2	DTD 02/01/2024 5.000% 02/01/2029 CALLABLE	90,113	89,694
KINDER MORGAN INC	494553AE0	DTD 02/01/2024 5.400% 02/01/2034 CALLABLE	89,920	88,628
KINDER MORGAN INC	49456BAT8	DTD 02/11/21 3.600 02/15/2051	63,023	60,751
KINDER MORGAN INC/DELAWA	49456BAH4	DTD 11/26/14 5.550 06/01/2045	95,871	93,460
KRAFT HEINZ FOODS CO	50077LAM8	DTD 08/19/16 5.200 07/15/2045	61,075	58,732
KRAFT HEINZ FOODS CO	50077LBC9	DTD 11/15/20 3.875 05/15/2027	126,939	127,373
KROGER CO	50104DX6	DTD 08/27/2024 5.650% 09/15/2064 CALLABLE	134,012	131,384

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

Plan Number: 002

EIN: 20-0282396

Schedule H, line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
L3HARRIS TECHNOLOGIES INC	502431AP4 DTD 07/31/2023 5.400% 01/15/2027 NON CALLABLE	121,457	121,475	
L3HARRIS TECHNOLOGIES INC	502431AQ2 DTD 07/31/2023 5.400% 07/31/2033 CALLABLE	182,284	179,678	
LOCKHEED MARTIN CORP	539830BV0 DTD 10/24/2022 5.100% 11/15/2027 CALLABLE	157,647	157,384	
LOCKHEED MARTIN CORP	539830CD9 DTD 01/29/2024 4.800% 08/15/2034 CALLABLE	94,776	92,198	
LOWE'S COS INC	548661EN3 DTD 09/08/2022 5.800% 09/15/2062 CALLABLE	95,110	91,943	
LOWE'S COS INC	548661DR5 DTD 04/05/19 3.650 04/05/2029	123,631	123,793	
LOWE'S COS INC	548661EA1 DTD 03/31/21 2.625 04/01/2031	95,422	95,543	
LOWE'S COS INC	548661EE3 DTD 09/20/21 2.800 09/15/2041	123,079	120,080	
LYB INT FINANCE III	50249AAK9 DTD 10/08/20 3.800 10/01/2060	31,784	29,736	
LYB INTERNATIONAL FIN III LLC	50249AAM5 DTD 02/28/2024 5.500% 03/01/2034 CALLABLE	96,706	93,188	
LYB INTERNATIONAL FINANC	50247WAB3 DTD 03/02/17 3.500 03/02/2027	97,082	97,223	
MCDONALD'S CORP	58013MFJ8 DTD 08/12/19 2.625 09/01/2029	186,257	186,585	
MCDONALD'S CORP	58013MFQ2 DTD 03/27/20 3.600 07/01/2030	187,624	187,606	
META PLATFORMS INC	30303M8G0 DTD 08/09/2022 3.500% 08/15/2027 CALLABLE	189,140	190,628	
META PLATFORMS INC	30303M8K1 DTD 08/09/2022 4.650% 08/15/2062 CALLABLE	123,309	118,814	
META PLATFORMS INC	30303M8M7 DTD 05/03/2023 4.800% 05/15/2030 CALLABLE	126,733	126,040	
META PLATFORMS INC	30303M8N5 DTD 05/03/2023 4.950% 05/15/2033 CALLABLE	157,664	155,217	
METLIFE INC	59156RCN6 DTD 06/05/2024 5.300% 12/15/2034 CALLABLE	96,449	94,633	
METLIFE INC SR	59156RCE6 DTD 07/12/2023 5.375% 07/15/2033 CALLABLE	133,194	131,378	
MICRON TECHNOLOGY INC	595112CD3 DTD 01/12/2024 5.300% 01/15/2031 CALLABLE	126,131	124,875	
MICRON TECHNOLOGY INC	595112BU6 DTD 11/01/21 3.477 11/01/2051	62,938	60,755	
MICROSOFT CORP	594918BT0 DTD 08/08/16 3.700 08/08/2046	91,791	88,033	
MONDELEZ INTERNATIONAL	609207BB0 DTD 03/17/2022 3.000% 03/17/2032 CALLABLE	127,053	125,827	
MONDELEZ INTERNATIONAL	609207AW5 DTD 09/04/20 2.625 09/04/2050	46,223	43,866	
MORGAN STANLEY	6174468N2 DTD 03/24/20 03/24/2051	78,274	74,175	
MORGAN STANLEY	MEDIUM TERM NOTE	167,421	163,392	
MORGAN STANLEY	MEDIUM TERM NOTE	133,332	127,869	
MORGAN STANLEY SR	MEDIUM TERM NOTE	159,269	157,784	
MPLX LP	55336VBW9 DTD 02/09/2023 5.650% 03/01/2053 CALLABLE	62,469	60,575	
MPLX LP	55336VBX7 DTD 05/20/2024 5.500% 06/01/2034 CALLABLE	95,073	93,629	
MPLX LP	55336VAL4 DTD 02/10/17 5.200 03/01/2047	91,631	88,780	
NATIONAL RURAL UTIL COOP	637432NT8 DTD 01/31/19 4.300 03/01/2049	163,194	157,593	
NATIONAL RURAL UTIL COOP	637432PA7 DTD 10/31/2022 5.800% 01/15/2033 CALLABLE	131,670	129,310	
NATIONAL RURAL UTIL COOP	MEDIUM TERM NOTE	130,247	130,228	
NEXTERA ENERGY CAP HLDGS INC	65339KCS7 DTD 01/31/2024 4.950% 01/29/2026 NON CALLABLE	129,951	130,244	
NEXTERA ENERGY CAPITAL	65339KCP3 DTD 02/09/2023 5.050% 02/28/2033 CALLABLE	93,980	93,127	
NISOURCE FINANCE CORP	65473QBC6 DTD 04/12/13 4.800 02/15/2044	61,970	61,819	
NISOURCE INC	65473PAM7 DTD 06/10/2022 5.000% 06/15/2052 CALLABLE	63,319	61,931	
NISOURCE INC	65473PAQ8 DTD 03/14/2024 5.350% 04/01/2034 CALLABLE	64,972	64,462	
NISOURCE INC	65473PAJ4 DTD 04/13/20 3.600 05/01/2030	65,370	65,295	
NORFOLK SOUTHERN CORP	655844CQ9 DTD 02/02/2023 4.450% 03/01/2033 CALLABLE	124,571	124,032	
NORTHROP GRUMMAN CORP	666807CK6 DTD 01/31/2024 4.600% 02/01/2029 CALLABLE	124,306	123,970	
NORTHROP GRUMMAN CORP	666807CM2 DTD 01/31/2024 5.200% 06/01/2054 CALLABLE	72,418	69,767	
NUCOR CORP	670346AV7 DTD 03/11/2022 3.125% 04/01/2032 CALLABLE	134,375	131,360	
NUCOR CORP	670346AQ8 DTD 04/26/18 4.400 05/01/2048	65,842	62,449	
ORACLE CORP	68389XBH7 DTD 07/07/16 3.850 07/15/2036	94,252	94,241	
ORACLE CORP	68389XBU8 DTD 04/01/20 2.800 04/01/2027	233,772	235,244	
ORACLE CORP	68389XBZ7 DTD 03/24/21 3.650 03/25/2041	62,201	62,379	
PACCAR FINANCIAL CORP	69371RT22 DTD 05/13/2024 5.000% 05/13/2027 NON CALLABLE	186,972	187,102	
PARKER-HANNIFIN CORP	701094AR5 DTD 06/15/2022 4.250% 09/15/2027 CALLABLE	122,929	123,683	
PARKER-HANNIFIN CORP	MEDIUM TERM NOTE	156,951	153,958	
PEPSICO INC	713448FF0 DTD 10/21/21 2.625 10/21/2041	93,141	90,193	
PHILIP MORRIS INTL INC	718172CW7 DTD 11/17/2022 5.625% 11/17/2029 CALLABLE	124,334	123,602	
PHILIP MORRIS INTL INC	718172DJ5 DTD 02/13/2024 5.250% 02/13/2034 CALLABLE	90,046	88,950	
PHILIP MORRIS INTL INC	718172BL2 DTD 11/10/14 4.250 11/10/2044	96,086	94,140	
PHILLIPS 66	718547AR3 DTD 03/29/2023 5.300% 06/30/2033 CALLABLE	125,200	123,878	
PNC FINANCIAL SERVICES	693475BV6 DTD 01/22/2024 VAR CPN 01/21/2028 NON CALLABLE	276,755	277,360	
PPL ELECTRIC UTILITIES	69351UBB8 DTD 03/02/2023 5.250% 05/15/2053 CALLABLE	161,007	157,392	
PUBLIC STORAGE	74460WAF4 DTD 07/26/2023 5.125% 01/15/2029 NON CALLABLE	127,183	126,501	
QUALCOMM INC	747525BR3 DTD 05/09/2022 4.500% 05/20/2052 CALLABLE	92,120	88,012	
QUALCOMM INC	747525AK9 DTD 05/20/15 4.800 05/20/2045	61,065	58,738	
QUALCOMM INC	747525AU7 DTD 05/26/17 3.250 05/20/2027	170,728	170,207	
QUALCOMM INC	747525BJ1 DTD 05/08/20 3.250 05/20/2050	126,242	119,238	
REGIONS FINANCIAL CORP	7591EPAU4 DTD 06/06/2024 VAR CPN 06/06/2030 CALLABLE	252,855	253,458	
REPUBLIC SERVICES INC	760759BK5 DTD 06/25/2024 5.200% 11/15/2034 CALLABLE	126,958	123,804	
RTX CORPORATION	75513ECR0 DTD 02/27/2023 5.150% 02/27/2033 CALLABLE	126,206	123,950	
RTX CORPORATION	75513ECS8 DTD 02/27/2023 5.375% 02/27/2053 CALLABLE	73,763	71,216	
RTX CORPORATION	913017CY3 DTD 08/16/2018 4.125% 11/16/2028 CALLABLE	126,571	126,532	
SIMON PPTY GROUP LP	828807DX2 DTD 11/09/2023 6.650% 01/15/2054 CALLABLE	123,307	122,432	
SIMON PROPERTY GROUP LP	828807DW4 DTD 11/09/2023 6.250% 01/15/2034 CALLABLE	123,204	121,952	
STARBUCKS CORP	855244BG3 DTD 02/08/2024 4.850% 02/08/2027 CALLABLE	125,229	125,601	
STARBUCKS CORP	855244BJ7 DTD 02/08/2024 5.000% 02/15/2034 CALLABLE	124,248	122,379	
STARBUCKS CORP	855244AS8 DTD 08/10/18 4.500 11/15/2048	94,037	90,900	
STATE STR CORP	857477CL5 DTD 03/18/2024 4.993% 03/18/2027 CALLABLE	281,851	282,330	
SYNCHRONY FINANCIAL	87165BAM5 DTD 12/01/17 3.950 12/01/2027	251,082	256,223	
T MOBILE INC	87264ADD4 DTD 09/14/2023 6.000% 06/15/2054 CALLABLE	63,538	60,814	

**RETIREMENT INCOME PLAN FOR SALARIED
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December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current value	
T MOBILE USA INC	87264ADF9 DTD 01/12/2024 5.150% 04/15/2034 CALLABLE	60,007	59,031	
TAKEDA PHARMACEUTICAL	874060AY2 DTD 07/09/20 3.025 07/09/2040	96,205	94,229	
TEXAS INSTRS INC	882508CJ1 DTD 02/08/2024 5.150% 02/08/2054 CALLABLE	122,555	117,015	
THERMO FISHER SCIENTIFIC	883556BY7 DTD 08/14/17 4.100 08/15/2047	127,211	121,698	
THERMO FISHER SCIENTIFIC	883556CM2 DTD 08/23/21 2.800 10/15/2041	124,331	119,542	
THERMO FISHER SCIENTIFIC INC	883556DA7 DTD 12/05/2023 5.000% 01/31/2029 CALLABLE	121,720	121,015	
T-MOBILE USA INC	87264ABL8 DTD 02/15/21 3.000 02/15/2041	154,881	151,186	
T-MOBILE USA INC	87264ABY0 DTD 05/15/21 3.600 11/15/2060	124,380	118,787	
TOYOTA MTR CR CORP	89236TMF9 DTD 05/16/2024 5.050% 05/16/2029 NON CALLABLE	187,779	186,334	
TRUIST FINANCIAL CORP	MEDIUM TERM NOTE	247,577	247,163	
UNION PACIFIC CORP	907818FT0 DTD 05/20/21 3.200 05/20/2041	154,094	149,722	
UNION PACIFIC CORP	907818GA0 DTD 02/14/22 3.850 02/14/2072	32,659	31,226	
UNITED PARCEL SERVICE	911312CF1 DTD 05/22/2024 5.600% 05/22/2064 CALLABLE	29,885	29,089	
UNITEDHEALTH GROUP INC	91324PEV0 DTD 03/28/2023 4.500% 04/15/2033 CALLABLE	96,785	94,878	
UNITEDHEALTH GROUP INC	91324PFJ6 DTD 07/25/2024 5.150% 07/15/2034 CALLABLE	100,857	98,666	
UNITEDHEALTH GROUP INC	91324PFK3 DTD 07/25/2024 5.500% 07/15/2044 CALLABLE	100,108	96,997	
UNITEDHEALTH GROUP INC	91324PFL1 DTD 07/25/2024 5.625% 07/15/2054 CALLABLE	132,006	126,192	
UNITEDHEALTH GROUP INC	91324PFM9 DTD 07/25/2024 5.750% 07/15/2064 CALLABLE	66,187	63,158	
VERIZON COMMUNICATIONS	92343VER1 DTD 06/21/18 4.329 09/21/2028	127,824	127,329	
VERIZON COMMUNICATIONS	92343VGK4 DTD 03/22/21 3.400 03/22/2041	156,082	151,258	
VERIZON COMMUNICATIONS	92343VGP3 DTD 03/01/22 3.875 03/01/2052	124,454	118,150	
VERIZON COMMUNICATIONS INC	92343VGT5 DTD 05/09/2023 5.050% 05/09/2033 CALLABLE	125,033	123,580	
VIRGINIA ELEC & POWER CO	927804GG3 DTD 01/13/2022 2.400% 03/30/2032 CALLABLE	96,617	96,004	
VIRGINIA ELEC & POWER CO	927804GQ1 DTD 01/08/2024 5.350% 01/15/2054 CALLABLE	101,694	98,745	
VIRGINIA ELEC & PWR CO	927804GH1 DTD 05/31/2022 3.750% 05/15/2027 CALLABLE	97,333	97,932	
WELLS FARGO & COMPANY	95000U3D3 DTD 04/24/2023 VAR CPN 04/24/2034 CALLABLE	169,386	163,164	
WELLS FARGO & COMPANY	MEDIUM TERM NOTE	248,247	240,619	
WESTPAC BANKING CORP	961214EX7 DTD 11/18/21 11/18/2036	167,296	164,976	
WILLIAMS COS INC	88339WAB2 DTD 01/05/2024 4.900% 03/15/2029 CALLABLE	94,798	94,297	
WILLIAMS COS INC	88339WAC0 DTD 01/05/2024 5.150% 03/15/2034 CALLABLE	89,139	87,502	
WILLIAMS COS INC	969457CH1 DTD 03/02/2023 5.400% 03/02/2026 NON CALLABLE	90,411	90,607	
WILLIAMS PARTNERS LP	96949LAC9 DTD 03/03/15 5.100 09/15/2045	92,110	89,790	
BANK OF MONTREAL	MEDIUM TERM NOTE	251,845	252,923	
BANK OF NOVA SCOTIA	CONVERTIBLE	248,968	250,070	
BARCLAYS PLC	06738ECP8 DTD 03/12/2024 VAR CPN 03/12/2028 CALLABLE	126,244	126,559	
BARCLAYS PLC	06738ECL7 DTD 09/13/2023 VAR CPN 09/13/2034 CALLABLE	124,528	121,733	
BHP BILLITON FIN	055451AZ1 DTD 02/28/2023 4.750% 02/28/2028 CALLABLE	131,227	129,739	
CANADIAN NATL RY CO	136375DJ8 DTD 11/01/2023 6.125% 11/01/2053 CALLABLE	123,769	118,430	
CANADIAN PAC RY CO	13648TAH0 DTD 04/19/2023 4.200% 11/15/2069 CALLABLE	61,637	58,637	
DIAGEO CAP PLC	25243YBK4 DTD 10/05/2023 5.375% 10/05/2026 CALLABLE	218,803	217,866	
DIAGEO CAP PLC	25243YBN8 DTD 10/05/2023 5.625% 10/05/2033 CALLABLE	95,270	92,374	
LLOYDS BANKING GROUP	53944YAU7 DTD 08/11/2022 VAR CPN 08/11/2033 CALLABLE	168,893	163,335	
PFIZER INVT ENTERPRISES	716973AF9 DTD 05/19/2023 5.110% 05/19/2043 CALLABLE	92,501	89,177	
PFIZER INVT ENTERPRISES	716973AG7 DTD 05/19/2023 5.300% 05/19/2053 CALLABLE	129,020	121,721	
PFIZER INVT ENTERPRISES	716973AH5 DTD 05/19/2023 5.340% 05/19/2063 CALLABLE	92,893	87,203	
ROYAL BANK OF CANADA	MEDIUM TERM NOTE	276,543	277,570	
TAKEDA PHARMACEUTICAL CO LTD	874060BK1 DTD 07/05/2024 5.300% 07/05/2034 CALLABLE	95,753	94,096	
TAKEDA PHARMACEUTICAL CO LTD	874060BN5 DTD 07/05/2024 5.800% 07/05/2064 CALLABLE	49,872	48,086	
TORONTO DOMINION BANK	MEDIUM TERM NOTE	281,058	280,926	
TOTALENERGIES CAP	89157XAA9 DTD 04/05/2024 5.150% 04/05/2034 CALLABLE	91,469	89,606	
	Total corporate bonds	31,583,207	31,022,896	
Mutual funds:				
ISHARES CORE MSCI EAFE ETF		9,944,737	9,402,199	
ISHARES CORE MSCI EMERGING MARKETS ETF		4,488,999	4,259,742	
ISHARES CORE S&P MID-CAP ETF		10,224,035	10,948,864	
ISHARES CORE S&P SMALL-CAP ETF		3,820,159	4,146,768	
VANGUARD INDEX FD ETF		21,466,141	22,510,943	
	Total mutual funds	49,944,071	51,268,516	
	Total investments	\$ 85,305,221	\$ 86,081,562	

* Represents a permitted party-in-interest

See independent auditor's report.

**RETIREMENT INCOME PLAN FOR SALARIED
EMPLOYEES OF ESSEX GROUP, INC.**

Plan Number: 002
EIN: 20-0282396

Schedule H, line 4j - Schedule of Reportable Transactions
For the Year Ended December 31, 2024

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of party involved	Description of assets	Purchase price	Selling price	Cost of asset	Current value of asset on transaction date	Net gain or (loss)
Series of transactions in excess of 5% of plan assets						
Principal Life Insurance Company	Principal Liquid Assets Separate Account-Z	\$ 4,120,029	\$ —	\$ —	\$ 4,120,029	\$ —
Principal Life Insurance Company	Principal Liquid Assets Separate Account-Z	—	5,017,675	4,992,121	5,017,675	25,554
Principal Life Insurance Company	Principal Government Money Market Fund	95,333,520	—	—	95,333,520	—
Principal Life Insurance Company	Principal Government Money Market Fund	—	92,806,130	92,806,130	—	—
Metropolitan Life Insurance Co.	Metropolitan West Total Return Bond Plan Fund	152,131	—	—	152,131	—
TCW Group	Metropolitan West Total Return Bond Plan Fund	—	7,055,223	8,587,820	—	(1,532,597)
PIMCO Funds	PIMCO Income Institutional Fund	259,315	—	—	259,315	—
PIMCO Funds	PIMCO Income Institutional Fund	—	8,382,256	9,430,407	—	(1,048,151)
PIMCO Funds	PIMCO Long Duration Total Return Institutional Fund	93,936	—	—	93,936	—
PIMCO Funds	PIMCO Long Duration Total Return Institutional Fund	—	5,552,815	8,253,726	—	(2,700,911)
BlackRock Group	iShares Core S&P Mid-Cap ETF	10,796,459	—	—	10,796,459	—
BlackRock Group	iShares Core S&P Mid-Cap ETF	—	629,900	572,424	—	57,476
BlackRock Group	iShares Core MSCI EAFE ETF	9,944,737	—	—	9,944,737	—
BlackRock Group	iShares Core MSCI Emerging Markets ETF	4,488,999	—	—	4,488,999	—
Vanguard Group	Vanguard Index Fund ETF	22,580,579	—	—	22,580,579	—
Vanguard Group	Vanguard Index Fund ETF	—	1,164,634	1,114,437	—	50,197
BlackRock Group	iShares Core S&P Small-Cap ETF	4,151,331	—	—	4,151,331	—
BlackRock Group	iShares Core S&P Small-Cap ETF	—	375,107	331,172	—	43,935
Vanguard Group	Vanguard Institutional Index Institutional Fund	284,782	—	—	284,782	—
Vanguard Group	Vanguard Institutional Index Institutional Fund	—	32,563,410	21,940,687	—	10,622,723
Vanguard Group	Vanguard Mid Cap Index Institutional Fund	90,084	—	—	90,084	—
Vanguard Group	Vanguard Mid Cap Index Institutional Fund	—	11,533,655	8,802,775	—	2,730,880
Vanguard Group	Vanguard Small Cap Index Institutional Fund	56,779	—	—	56,779	—
Vanguard Group	Vanguard Small Cap Index Institutional Fund	—	8,119,962	6,449,414	—	1,670,548
Vanguard Group	Vanguard FTSE All-World EX-US Index Institutional Fund	95,542	—	—	95,542	—
Vanguard Group	Vanguard FTSE All-World EX-US Index Institutional Fund	—	8,414,501	7,597,461	—	817,040

See independent auditor's report.

Assumptions prescribed by law

Mortality

Before benefit payment period
 IRS Prescribed Mortality - Generational Non-annuitant, male and female.

During benefit payment period
 IRS Prescribed Mortality - Generational Annuitant, male and female.

Assumptions selected by actuary

Inflation 2.40% increase per year.
 Our long-term inflation assumption considered the current economic environment, recent and historical data, and forecasts from Federal Reserve Bank FOMC, Congressional Budget Office, and Survey of Professional Forecasters. See Long-Term Capital Market Assumptions link.

Asset return 7.00% for the current plan year.
 The asset return is developed as a weighted average rate based on the target asset allocation of the plan and the long-term capital market assumptions. The calculated return is on an arithmetic mean basis. For details, see the Long-Term Capital Market Assumptions link.

Expected expense The expected expense included in target normal cost is an estimate based on prior year expenses paid from plan assets, with an updated estimate of PBGC premiums. This is the best estimate available of upcoming year's expenses.

Retirement Active participants

Age	Probability of retirement	Age	Probability of retirement
60-64	10%	66-69	25%
65	30%	70	100%

Inactive participants are assumed to retire at age 65.

This assumption is based on the results of recent experience analysis and anticipated future experience.

Disability None. This plan does not offer a subsidized disability benefit therefore the disability assumption is built into the withdrawal assumption.

Marriage 80% married; husbands are 3 years older than wives.
 This assumption does not have material impact on the results of this report and has been selected based on our best estimate of active workforce.

Withdrawal 2003 Society of Actuaries Small Plan Age Table, multiplied by 0.50.
 We rely on a publicly published table due to the limited size of the plan. The SOA Small Plan Age Table is the most recent withdrawal experience table published by the Society of Actuaries. A multiplier of 0.50 is applied to this table to reflect the results of the most recent experience analysis and anticipated future experience.

Form of benefit Participants are assumed to receive their benefits on the normal form at the assumed retirement age.
 This assumption is based on the results of recent experience analysis and anticipated future experience.

Methods prescribed by law

Liability measure Funding target is the present value of the benefits accrued on the valuation date. Target normal cost is based on benefits expected to accrue during the current plan year and includes an estimate of plan expenses for the year.

Methods selected by plan sponsor

Asset method The asset valuation method is prescribed by law for plans that elect to use a value other than market value.
 For each of the preceding two years, an expected value of assets at the end of the year is compared to the end of year market value. The resulting gain or loss is recognized evenly over three plan years.
 The expected value includes contributions, distributions, any deducted administrative expenses, and expected earnings (based on the lesser of the assumed interest rate or the maximum allowable rate). The deferred gains and losses are added to the current market value and then restricted to no more than 110% and no less than 90% of that market value.
 When actual returns exceed the assumed return, the actuarial value of assets will lag below market value. The lag and the smoothing effect are limited since the value must be within 10% of market value.

Segment rates 24-month average with no weighting to prior law basis. Use rates where August is the last month included in the average.

PBGC premium basis Variable rate premiums are calculated using census, market value of assets and the one-month average of corporate bond rates in effect on the valuation date. You elected this Standard interest method for the 01/01/2023 plan year and the method must be used for five years before a change can be made.

Segment 1 years 0-5	Segment 2 years 5-20	Segment 3 years 20+
5.01%	5.13%	5.15%

Methods elected by actuary

Retirees	Assets and liabilities for current and future retirees are included.
Vested benefits	<p>A benefit is included in vested benefits if it meets the requirements under PBGC. The benefit is multiplied by the participant's vesting percentage applicable to each benefit on the valuation date.</p> <p>The following ancillary benefits are always treated as nonvested: disability benefits payable to retirement age unless in pay status, pre-retirement death benefits in excess of the survivor annuity death benefit and post retirement death benefits for non-retired participants except as noted in the Plan provisions.</p>

Assumptions and methods elected by actuary - plan accounting (ASC 960)

With the exceptions below, all assumptions and methods are the same as those used in determining your plan's regular funding target and target normal cost.

Mortality	Based on Pri-2012 Total dataset base rate mortality table projected generationally using the using the Principal Mortality Improvement Scale (Principal 2023).
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Mortality base rates	Before benefit payment period Employee amount-weighted, male and female
	During benefit payment period Retiree amount-weighted, male and female

The Society of Actuaries (SOA) is an actuarial organization that periodically reviews mortality data and publishes mortality tables and improvement scales. In October 2019, the SOA released the Pri-2012 Mortality Tables for private-sector retirement plans in the U.S. The Pri-2012 report contains different sets of mortality tables based on complete dataset or various subsets. The Total dataset base rate table was selected based on information provided by the plan sponsor.

Pri-2012 section 12.4. provided three approaches for designated beneficiaries in the calculation of joint-and-survivor annuities. We believe "Approach 1" is reasonable for this plan.

Mortality improvement

Principal 2023 MI scale is based on MIM-2021-v4 application tool issued by SOA in October 2023 with the following parameters:

Parameter	Principal 2023
Historical dataset	SSA
Whittaker-Henderson Graduation	Order 3
Interpolation Structure	Basic
Graduated MI data last year ("jumping off" point)	2017
H/D transition ultimate year by age/cohort	2029/2029
Weight placed on interpolation by cohort	50%
Initial Slope periods (constraint)	2016-2017 (0.000)
LTR	SSA LTR 2023
COVID-19 or Excess load	None ¹

¹Based on the sponsor's input, plan experience does not show a need for long-term excess death or Covid death load adjustments.

See [Mortality documentation](#) for rationale and additional information.

Interest rate used to value liabilities

6.25%.

The interest rate used to value ASC 960 liabilities is developed as long-term expected geometric return on plan assets. Arithmetic expected return is calculated as the weighted average of broad asset classes' arithmetic returns of the plan's target asset allocation, and then converted to the geometric under lognormal distribution assumption. For details, see Long-Term Capital Market Assumptions link.

Treatment of administrative expenses

No adjustments are made for administrative expenses, either through a reduction in the discount rate or by calculating a present value of future expenses.

Plan sponsors may change their administrative expense handling at any time. Our approach provides consistent handling of ASC 960 liabilities from year to year, whether expenses are paid with plan assets or directly by the employer.

Note - expenses paid with plan assets are required to be included in funding normal cost. As a result, the plan is reimbursed annually through required funding. Exception – contributions are not required due to assets sufficiently in excess of liabilities to fund both expenses and normal cost. In this case, administrative expenses are taken from the excess assets.

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024


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

A Name of plan <u>Retirement Income Plan for Salaried Employees of Essex Group, Inc.</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>Superior Essex, Inc.</u>	D Employer Identification Number (EIN) <u>20-0282396</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>85702484</u>
	b Actuarial value	2b	<u>88124702</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>918</u>	<u>68810025</u>
	b For terminated vested participants	<u>165</u>	<u>10422164</u>
	c For active participants	<u>77</u>	<u>5083885</u>
	d Total	<u>1160</u>	<u>84316074</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.00 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>340000</u>
	c Target normal cost	6c	<u>340000</u>

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

SIGN HERE	 Signature of actuary	<u>08/20/2025</u> Date
	<u>William G. Matthews</u> Type or print name of actuary	<u>2307410</u> Most recent enrollment number
	<u>Principal Financial Group</u> Firm name	<u>678-322-3609</u> Telephone number (including area code)
	<u>PO Box 9394 Des Moines, IA 50306-9394</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	16604
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	16604
10	Interest on line 9 using prior year's actual return of <u>17.50</u> %	0	2906
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.12</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	19510

Part III	Funding Percentages		
14	Funding target attainment percentage	14	104.49 %
15	Adjusted funding target attainment percentage	15	104.51 %
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	101.37 %
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	0
	b Contributions made to avoid restrictions adjusted to valuation date	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	0
20	Quarterly contributions and liquidity shortfalls:	
	a Did the plan have a "funding shortfall" for the prior year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year		
	(1) 1st	(2) 2nd
	(3) 3rd	(4) 4th

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 67
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

Part VI Miscellaneous Items			
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
26 Demographic and benefit information			
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...			<input 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	340000	
b Excess assets, if applicable, but not greater than line 31a	31b	340000	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
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	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	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 type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021			

Schedule SB, Line 22 - Description Of Weighted Average Retirement Age
 Retirement Income Plan for Salaried Employees of Essex Group, Inc.
 EIN 20-0282396 Plan No. 002

The weighted average retirement age is weighted by the expected percentage of active participants retiring at each age. The retirement rate reflects only those participants who meet retirement eligibility. An active participant working past assumed retirement age is expected to retire at current age.

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
60	24.6381	0.1000	2.4638	147.8283
61	27.0901	0.1000	2.7090	165.2499
62	27.2799	0.1000	2.7280	169.1351
63	32.4415	0.1000	3.2441	204.3814
64	38.0550	0.1000	3.8055	243.5519
65	42.0730	0.3000	12.6219	820.4233
66	32.2427	0.2500	8.0607	532.0048
67	24.0051	0.2500	6.0013	402.0846
68	23.8604	0.2500	5.9651	405.6267
69	21.7426	0.2500	5.4356	375.0593
70	18.1596	1.0000	18.1596	1,271.1720
71	1.0000	1.0000	1.0000	71.0000
72	1.0000	1.0000	1.0000	72.0000
73	0.0000	1.0000	0.0000	0.0000
74	0.0000	1.0000	0.0000	0.0000
75	1.0000	1.0000	1.0000	75.0000
76	0.0000	1.0000	0.0000	0.0000
77	0.0000	1.0000	0.0000	0.0000
78	0.0000	1.0000	0.0000	0.0000
79	0.0000	1.0000	0.0000	0.0000
80	1.0000	1.0000	1.0000	80.0000
Total			75.1946	5,034.5173
Average				66.95

This report reflects the maximum benefit limits under Internal Revenue Code (IRC) Section 415 and maximum compensation limits under IRC Section 401 in effect on the first day of each plan year.

The following is a summary of plan provisions and does not alter the intent or meanings of the provisions contained in the contract or plan document. This report reflects the provisions of the plan signed 11/06/2013 including amendments through number 3.

Plan eligibility

Age	Attained age 21.
Service	One year of service in which at least 1,000 hours worked.
Class	Individuals who were active Participants in the Plan on or prior to January 22, 2004 will continue to be a Participant until he no longer has an Accrued Benefit. Individuals who first became eligible for the Plan between January 1, 2000 and January 22, 2004, due to ceasing to be covered under the Retirement Income Plan for Hourly Employees of Essex Group, Inc. were generally eligible to participant in the Plan. Effective as of January 22, 2004, no new individuals are eligible to actively participate in the Plan.

Normal retirement benefit

Age	Attained age 65.
Service	None. Participants become fully-vested upon reaching normal retirement age.
Form	Monthly annuity payable for life (optional forms may be elected in advance of retirement).
Amount (accrued benefit)	Sum of (a) and (b) minus (c): (a) Post-1973 Benefit: 1/12 of the greater of (i) 1.5% of his Average Compensation multiplied by his Accrual Service minus 50 percent of his Social Security Amount or (ii) \$78 (if Average Compensation is at least \$6,000 but less than \$10,000) or \$120 (if Average Compensation is at least \$6,000 but less than \$10,000) multiplied by Accrual Service; plus (b) Pre-1974 Benefit: Accrued Benefit earned prior to January 1, 1974; minus (c) United Technologies Corporation Offset: if the participant's vesting or accrual service include any period of service credited under the United Technologies Corporation defined benefit pension plan as of May 1, 1988, and the Participant's benefit under such plan has not been transferred to the Plan, the lesser of the Participant's benefit under such plan or the amount determined under the Pre-1974 Benefit. For Participants covered under Group Annuity Contract No. 383 (Participant's covered prior to January 1, 1984), benefit is equal to ½ of the greater of (a) or (b):

(a) The sum of:

- (1) Benefit under GA-383 (paid under an individual annuity); plus
- (2) The greater of (i) the difference of 1.5% of Average Compensation earned after December 31, 1983 multiplied by Accrual Service earned after December 31, 1983; minus 50% of his Social Security Amount determined using only earnings after December 31, 1983 or the product Accrual Service earned after December 31, 1983 multiplied by \$78 (if Average Compensation is at least \$6,000 but less than \$10,000) or \$120 (if Average Compensation is at least \$6,000 but less than \$10,000) multiplied by Accrual Service.

(b) Benefit under annuity contract GA-383

As of January 22, 2004, no additional benefits will be earned.

Early retirement benefit

Age	Attained age 50.
Service	Completed 10 years of vesting service and age plus years and months of vesting service is greater than or equal to 65
Form	Same as normal retirement benefit.
Amount	Retirement from active employment: Accrued benefit on early retirement date reduced by 0.3% for each month that the early retirement date precedes normal retirement date. Retirement from inactive status: Accrued benefit on early retirement date reduced by 0.5% for each month that the early retirement date precedes normal retirement date.

Late retirement benefit

Age	No maximum age.
Form	Same as normal retirement benefit.
Amount	Greater of accrued benefit on late retirement date or accrued benefit on normal retirement date actuarially increased to late retirement date. retirement age.

Termination benefit

Vesting percentage	100% after five years of vesting service.
TEFRA minimum vesting percentage	In top heavy years, the schedule as follows: 100% after 3 years of vesting service.
Form	Same as normal retirement benefit with income deferred until normal retirement date.
Amount	Accrued benefit on date of termination multiplied by the vesting percentage.

Disability benefit

Eligibility	Receiving disability benefit under the Social Security Act.
Service	10 years of vesting service.
Form	Monthly income payable until normal retirement, death, or recovery and a deferred annuity payable at the normal retirement date.
Amount	Frozen accrued benefit on date of disability.

Death benefit – Death before Age 55 or after Age 55 with less than 10 Years of Continuous Service

Survivor annuity death benefit (a vested benefit)

Eligibility	Death of a qualified married participant who has reached age 55 and has between five (5) and 10 years of vesting service or who has not reached age 55 and has at least five (5) years of vesting service.
Form	Monthly annuity payable to spouse, deferred to participant's earliest retirement date if later than the date of death.
Amount	If death occurs, the amount paid to the surviving spouse is equal to the amount that would have been paid had the participant terminated employment on the date of death and survived to his/her earliest retirement age, retired with a qualified joint and 100% survivor annuity in effect, then died the next day. The benefit is further reduced by 0.5% per month for each month the Surviving Spouse's Benefit Commencement Date precedes the date that would have been the Participant's Normal Retirement Date.

Death benefit – Death on or after Age 55 and 10 Years of Continuous Service

Survivor annuity death benefit (a vested benefit)

Eligibility	Death of a participant who has reached age 55 and has at least 10 years of vesting service.
Form	Monthly annuity payable to spouse or designated beneficiary as soon as administratively possible after the date of death.
Amount	If death occurs, the amount paid to the surviving spouse is equal to the amount that would have been paid had the participant terminated employment on the date of death with a qualified joint and 100% survivor annuity in effect, then died the next day.

Definitions

Accrual Service

Service earned between January 1, 1974 (January 1, 1983, with respect to an Employee who was employed by American Samica Corporation) and December 31, 2003.

No additional accrual service will be earned after January 22, 2004.

Average compensation

Highest five consecutive years of Compensation out of the last 10 years.

Optional forms of benefit payments

The optional forms of benefit payments are:

- Monthly annuity payable for life or 20 years certain and life.
- Monthly annuity payable as a survivorship life annuity with survivorship percentages of 50, 75, or 100.
- Social Security Adjustment annuity adjusted by increasing the amount of each monthly payment becoming payable until Social Security retirement age and by decreasing the amount of each monthly payment becoming payable thereafter.
- Single sum payment if less than \$5,000.

The optional form conversion basis is 6.0% interest and the 1971 Group Annuity Mortality Table for payments other than lump sums.

The optional form conversion basis uses the applicable interest rate and applicable mortality table as set forth in Code Section 417 for lump sum payments. The applicable interest rate uses the third calendar month preceding the first day of the stability period which is the plan quarter.

Changes in Principal Eligibility or Benefit Provisions

There have been no changes in principal eligibility or benefit provisions since the last valuation.

Significant Event

The enrolled actuary has not been made aware that any significant events have occurred during the year.

SCHEDULE H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

SCHEDULE H, Line 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

DESCRIPTION OF ASSET	(A) Total Number of Purchases	(B) Total Number of Sales	(C) Total Value of Purchases	(D) Total Value of Sales	(E) Net Gain/(Loss)
Pooled Separate Accounts PRINCIPAL LIQUID ASSETS SEPARATE	23		\$4,120,029.00		\$0.00
Pooled Separate Accounts PRINCIPAL LIQUID ASSETS SEPARATE		30		\$5,017,674.70	\$25,554.27
Registered Investment Company METROPOLITAN WEST TOTAL RETURN	7		\$152,130.90		\$0.00
Registered Investment Company METROPOLITAN WEST TOTAL RETURN		2		\$7,055,222.91	\$1,532,596.62-
Registered Investment Company PIMCO INCOME INSITUTIONAL FUND	7		\$259,315.02		\$0.00
Registered Investment Company PIMCO INCOME INSITUTIONAL FUND		2		\$8,382,255.68	\$1,048,150.84-
Registered Investment Company PIMCO LONG DURATION TOTAL RETUR	7		\$93,935.99		\$0.00
Registered Investment Company PIMCO LONG DURATION TOTAL RETUR		2		\$5,552,814.56	\$2,700,910.66-
Registered Investment Company VANGUARD INSITUTIONAL INDEX I	4		\$284,781.86		\$0.00
Registered Investment Company VANGUARD INSITUTIONAL INDEX I		3		\$32,563,409.99	\$10,622,722.68
Registered Investment Company VANGUARD MID CAP INDEX INSITUTION	2		\$90,084.27		\$0.00
Registered Investment Company VANGUARD MID CAP INDEX INSITUTION		1		\$11,533,654.85	\$2,730,880.41
Registered Investment Company VANGUARD SMALL CAP INDEX INSTITU	2		\$56,779.37		\$0.00
Registered Investment Company VANGUARD SMALL CAP INDEX INSTITU		1		\$8,119,962.03	\$1,670,547.79
Registered Investment Company					

VANGUARD FTSE ALL-WORLD EX-US	2		\$95,541.96		\$0.00
Registered Investment Company					
VANGUARD FTSE ALL-WORLD EX-US		1		\$8,414,500.85	\$817,039.81
Interest Bearing Cash					
PRINCIPAL GOVT MM INSTL	116		\$95,333,520.00		\$0.00
Interest Bearing Cash					
PRINCIPAL GOVT MM INSTL		59		\$92,806,130.00	\$0.00
Registered Investment Company					
ISHARES CORE S&P MIDCAP ETF	1		\$10,796,459.00		\$0.00
Registered Investment Company					
ISHARES CORE S&P MIDCAP ETF		1		\$629,000.00	\$57,476.00
Registered Investment Company					
ISHARES CORE S&P SMALL-CAP ETF	1		\$4,151,331.00		\$0.00
Registered Investment Company					
ISHARES CORE S&P SMALL-CAP ETF		1		\$375,107.00	\$43,935.00
Registered Investment Company					
ISHARES CORE MSCI EAFE ETF	3		\$9,944,737.00		\$0.00
Registered Investment Company					
ISHARES CORE MSCI EMERGING ETF	3		\$4,488,999.00		\$0.00
Registered Investment Company					
VANGUARD INDEX FD ETF	2		\$22,580,579.00		\$0.00
Registered Investment Company					
VANGUARD INDEX FD ETF		1		\$1,164,634.00	\$50,197.00

* Schedule is prepared using the alternative way of reporting (iii) series transactions under DOL Regulation 2520.103-6(d)(2).