

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

Complete all entries in accordance with the instructions to the Form 5500.

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, a single-employer plan, a DFE, the first return/report, the final return/report, an amended return/report, a short plan year return/report.
B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report.
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.
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II Basic Plan Information—enter all requested information

1a Name of plan: WOOLRICH, INC. PENSION PLAN
1b Three-digit plan number (PN): 002
1c Effective date of plan: 12/01/1966
2a Plan sponsor's name (employer, if for a single-employer plan): WOOLRICH, INC.
2b Employer Identification Number (EIN): 24-0765400
2c Plan Sponsor's telephone number: 570-769-6464
2d Business code (see instructions): 315100

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

Form 5500 (2024) v. 240311

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	639
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)	4
	6a(2)	3
	6b	497
	6c	70
	6d	570
	6e	50
	6f	620
	6g(1)	
6g(2)		
6h		0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
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 type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

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

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>WOOLRICH, INC. PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>WOOLRICH, INC.</u>	D Employer Identification Number (EIN) <u>24-0765400</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>21307304</u>
	b Actuarial value	2b	<u>19816269</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>560</u>	<u>28153371</u>
	b For terminated vested participants	<u>75</u>	<u>2841789</u>
	c For active participants	<u>4</u>	<u>90546</u>
	d Total	<u>639</u>	<u>31085706</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input checked="" type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	<u>31089123</u>
	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	<u>31083334</u>
5	Effective interest rate	5	<u>5.01 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>650000</u>
	c Target normal cost	6c	<u>650000</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>10/09/2025</u>
	<u>ROBERT D. FICK, EA, FCA, MAAA</u>	Date
	Type or print name of actuary	<u>23-05435</u>
	<u>BUCK GLOBAL, LLC</u>	Most recent enrollment number
	Firm name	<u>412-281-2506</u>
	<u>11 STANWIX STREET, SUITE 700 PITTSBURGH, PA 15222-1312</u>	Telephone number (including area code)
	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	77459
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	77459
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>8.78</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2137
	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>5.13</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		188
	c Total available at beginning of current plan year to add to prefunding balance		2325
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	63.74 %
15	Adjusted funding target attainment percentage	15	63.74 %
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	63.96 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	68.53 %

Part IV Contributions and Liquidity Shortfalls		18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
04/12/2024	441000	0					
07/11/2024	441000	0					
10/15/2024	441000	0					
01/14/2025	441000	0					
09/12/2025	30000	0					
			Totals ▶	18(b)	1794000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	1736072
20	Quarterly contributions and liquidity shortfalls:		
	a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 64
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute

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

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)			31a 650000
b Excess assets, if applicable, but not greater than line 31a			31b 0
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	11272854	1085955	
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 1735955
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35)			36 1735955
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)			37 1736072
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)			38a 117
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....			38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)			39 0
40 Unpaid minimum required contributions for all years			40 0

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

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

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

A Name of plan WOOLRICH, INC. PENSION PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 WOOLRICH, INC.	D Employer Identification Number (EIN) 24-0765400	

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

MATRIX TRUST COMPANY

75-3182674

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

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

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

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

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

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

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

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

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

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

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

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

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

BUCK GLOBAL LLC

13-3954297

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	140962	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)

FIDELITY INST ASSET MGMT TRUST CO

20-2159373

(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 28 50 51	NONE	140000	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)

MATRIX TRUST COMPANY

75-3182674

(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?
21 50	NONE	41030	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 type="checkbox"/>

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

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

MAHER DUESSELL

25-1622758

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	NONE	10500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

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

A Name of plan <u>WOOLRICH, INC. PENSION PLAN</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>WOOLRICH, INC.</u>	D Employer Identification Number (EIN) <u>24-0765400</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>FIAM 8-10 YR CRP BD CP</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY INSTITUTIONAL ASSET</u>		
c EIN-PN <u>20-2159373-000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4674422</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MANAGEMENT AORBETTER-A</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY INSTITUTIONAL ASSET</u>		
c EIN-PN <u>20-2159373-000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5637485</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MANAGEMENT LONG DURATION POOL</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY INSTITUTIONAL ASSET</u>		
c EIN-PN <u>20-2159373-000</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8250308</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)

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

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan WOOLRICH, INC. PENSION PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 WOOLRICH, INC.	D Employer Identification Number (EIN) 24-0765400

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

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1181000	471000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	261721	250902
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	19897150	18562215
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	107	107
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	21339978	19284224
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	21339978	19284224

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)	1794000	
(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)		1794000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	5272	
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		5272
(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)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-302973	
(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)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1496299

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2690334	
(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)		2690334
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	10500	
(5) Investment advisory and investment management fees	2i(5)	140000	
(6) Bank or trust company trustee/custodial fees	2i(6)	41030	
(7) Actuarial fees	2i(7)	140962	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	529227	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		861719
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		3552053

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-2055754
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: MAHER DUESSEL

(2) EIN: 25-1622758

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
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 556622.

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

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

A Name of plan <u>WOOLRICH, INC. PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>WOOLRICH, INC.</u>	D Employer Identification Number (EIN) <u>24-0765400</u>	

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

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

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

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 75-3182674

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

Woolrich, Inc. Pension Plan

Financial Statements and
Supplemental Schedules

Years Ended December 31, 2024 and 2023
with Independent Auditor's Report

MaherDuessel

A horizontal bar is positioned below the company name, consisting of a black segment on the left and a blue segment on the right.

WOOLRICH, INC. PENSION PLAN

YEARS ENDED DECEMBER 31, 2024 AND 2023

TABLE OF CONTENTS

Independent Auditor's Report

Financial Statements:

Statements of Net Assets Available for Benefits	1
Statements of Changes in Net Assets Available for Benefits	2
Statements of Accumulated Plan Benefits	3
Statements of Changes in Accumulated Plan Benefits	4
Notes to Financial Statements	5

Supplemental Schedules:

Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year)	18
Schedule H, Line 4(j) – Schedule of Reportable Transactions	20

Independent Auditor's Report

Trustees

Woolrich, Inc. Pension Plan

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

We have performed audits of the accompanying financial statements of Woolrich, Inc. Pension Plan (Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023 and of accumulated plan benefits as of December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits and of changes in accumulated plan benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our 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 a certification from a qualified institution as of and for the year ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

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

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material

misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

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

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

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

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

Supplemental Schedules Required by ERISA

The supplemental schedules noted in the table of contents, as of and for the year ended December 31, 2024 are presented for the purpose 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 GAAS. For information included in the supplemental information schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental 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, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental 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).



Harrisburg, Pennsylvania
September 30, 2025

WOOLRICH, INC. PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023

	2024	2023
Assets		
<hr/>		
Investments, at fair value:		
Cash	\$ 107	\$ 107
Collective investment trust	18,562,215	19,897,150
Money market funds	250,902	261,721
Total investments	18,813,224	20,158,978
Receivables:		
Employer contribution	471,000	1,181,000
Total receivables	471,000	1,181,000
Total Assets	19,284,224	21,339,978
Liabilities		
<hr/>		
Accrued expenses	-	-
Total liabilities	-	-
Net Assets Available for Benefits	\$ 19,284,224	\$ 21,339,978

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

WOOLRICH, INC. PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
Additions:		
Investment income (loss):		
Net appreciation (depreciation) in fair value of investments	\$ (302,973)	\$ 1,775,332
Interest	5,272	4,329
Total investment income (loss)	<u>(297,701)</u>	<u>1,779,661</u>
Contributions:		
Employer	<u>1,794,000</u>	<u>1,793,000</u>
Total contributions	<u>1,794,000</u>	<u>1,793,000</u>
Total additions	<u>1,496,299</u>	<u>3,572,661</u>
Deductions:		
Benefit payments and participant withdrawals	2,830,334	2,708,557
Administrative expenses	<u>721,719</u>	<u>679,857</u>
Total deductions	<u>3,552,053</u>	<u>3,388,414</u>
Increase (Decrease) in Net Position	(2,055,754)	184,247
Net Assets Available for Benefits:		
Beginning of year	<u>21,339,978</u>	<u>21,155,731</u>
End of year	<u>\$ 19,284,224</u>	<u>\$ 21,339,978</u>

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

WOOLRICH, INC. PENSION PLAN
STATEMENTS OF ACCUMULATED PLAN BENEFITS
DECEMBER 31, 2023 AND 2022

	2023	2022
Actuarial present value of accumulated plan benefits:		
Vested benefits:		
Participants currently receiving payments	\$ 32,366,223	\$ 28,718,943
Terminated participants	3,763,259	5,580,525
Active participants	134,106	189,401
	36,263,588	34,488,869
Nonvested benefits	3,474	7,044
Total actuarial present value of accumulated plan benefits (pension plan)	36,267,062	34,495,913
Total fair value of savings plan assets	107	107
	\$ 36,267,169	\$ 34,496,020

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

WOOLRICH, INC. PENSION PLAN
STATEMENTS OF CHANGES IN ACCUMULATED PLAN BENEFITS
YEARS ENDED DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
Actuarial present value of accumulated plan benefits (pension plan), beginning of period	\$ 34,495,913	\$ 38,974,673
Increase (decrease) during the year attributable to:		
Benefits paid	(2,708,557)	(2,736,771)
Increase in interest due to the decrease in the discount period	1,326,197	1,166,119
Change in actuarial assumptions	3,082,940	(2,940,364)
Benefits accumulated/actuarial experience	<u>70,569</u>	<u>32,256</u>
Net increase (decrease)	<u>1,771,149</u>	<u>(4,478,760)</u>
Actuarial present value of accumulated plan benefits (pension plan), end of period	<u>\$ 36,267,062</u>	<u>\$ 34,495,913</u>

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

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

1. Plan Description

The following brief description of the Woolrich, Inc. Pension Plan (Plan) is provided for general information purposes only. Participants should refer to the Plan agreement for more complete information.

General

The Plan is a frozen defined benefit pension plan established by Woolrich, Inc. (Company) as of January 1, 1997 and restated effective January 1, 2010. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Company's Board of Directors passed a resolution, on December 26, 2006, to amend the Plan to merge the Pension Plan for Production and Maintenance Employees (P&M Plan) with and into the Woolrich, Inc. Pension Plan. The merger was effective as of the close of business on December 31, 2006. The assets and liabilities of the P&M Plan, together with the assets and liabilities of the Salaried and Certain Other Plan (SCO Plan), constitute a single plan within the meaning of Section 414(1) of the Internal Revenue Code (IRC), which was renamed the Woolrich, Inc. Pension Plan. The rights and benefits of a participant in the P&M Plan who terminated employment with the Employer on or prior to December 31, 2006, are determined in accordance with the provisions of the P&M Plan in effect prior to January 1, 2007. Any benefits accrued under the P&M Plan prior to January 1, 2007, to the extent such benefits are protected under Section 411 (d)(6) of the Internal Revenue Code, are preserved under the Plan.

The Plan also includes a separate employee savings plan that consists entirely of employee contributions and earnings thereon. The investment selections of these employee savings plan contributions are participant directed. Participants are always 100% vested in their employee savings plan contributions and the earnings thereon. Investments in the employee savings plan are not available to satisfy accumulated Plan pension benefits.

In March 2012, the Company's Board of Directors authorized a freeze of any future benefits of participation in the Plan effective May 31, 2012. Any benefits that accrued prior to May 31, 2012 have been preserved. No contributions are permitted to the employee savings plan subsequent to May 31, 2012. Participants will continue to participate in the investment experience of balances in their employee savings accounts which are participant directed.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Normal Retirement

The Plan defines normal retirement age at 65. Normal retirement benefits for participants of the SCO Plan are the Larger of (1), (2), or (3) and normal retirement benefits for participants of the P&M Plan are the Larger of (1) or (3):

Career Average Pay Formula:

(1) For service prior to January 1, 1977, the annual pension accrued under the prior plan for employment through November 30, 1976; plus a pro rata portion of the benefit accrued during the plan year ended November 30, 1976 for employment during December of 1976; both increased by 15.5% plus

(2) For service between December 31, 1976 and January 1, 1980, the greater of:

- 0.8 of 1.0% of compensation in each year, increased by 10.0%, or;
- the annual pension accrued under the prior plan for the year ended November 30, 1976, increased by 10%, if the participant is credited with 1,800 hours of service in a plan year.

(3) Plus, for service after December 31, 1979, the greater of:

- 0.8 of 1.0% of compensation in each plan year, or;
- the annual pension accrued under the prior plan for the year ended November 30, 1976, if the participant is credited with 1,800 hours of service in a plan year.

The career average pay benefit as of January 1, 1985 was increased by 5% effective January 1, 1986.

Final Pay Formula:

- 1.55% per year of final average compensation (excluding commissions) for each of the first 30 years of credited service, plus
 - 0.95% of average compensation (excluding commissions) per year of credited service in excess of 30 years, reduced by 2.50% of primary Social Security for each of the first 30 years of credited service.
-

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Effective January 1, 1992, the final pay formula benefit was increased by an additional benefit of 1.55% of average commissions for each year of credited service after December 31, 1991 up to 30 years plus 0.95% of average commissions for each year of credited service after December 31, 1991 in excess of 30 years.

Minimum Annual Benefit of \$84 times years of service (effective January 1, 1993 for the P&M Plan). Effective May 31, 2012 the amount of a participant's monthly pension commencing on his normal retirement date shall be frozen as of May 31, 2012 and shall not increase after May 31, 2012.

Average compensation is defined as compensation averaged over the highest four consecutive plan years out of the last 10 plan years in accordance with applicable compensation limitations. Average commissions are defined as one-fourth of the commissions (net of related expenses) received by the participant during the plan years used in the determination of average compensation. Effective January 1, 1997, average compensation is frozen for commissioned salesman who had not attained age 60 as of that date.

Early Retirement

A participant may be considered for early retirement upon attaining age 60 and five years of service. Early retirement benefits are calculated the same as normal retirement, based on actual service, reduced by 1/180 for each month early retirement precedes normal retirement.

Late Retirement

A participant may be considered for late retirement upon receiving permission of the Company. The calculation of benefits is the same as normal retirement, based on service to actual retirement date or May 31, 2012, whichever is earlier.

Spouse Benefit

Prior to early retirement eligibility and age 50 with 15 years of service, the benefit equals 50% of the accrued benefit payable at the employee's earliest retirement with deductions for early retirement and form of annuity. After early retirement eligibility or age 50 with 15 years of service, the benefit for the spouse of at least one year equals 100% of the benefit the employee would have received had the employee retired (without reduction for early commencement) and elected the 100% joint and survivor annuity option.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Disability

Participants are eligible for disability after five years of service and six months of disability. Disability benefits are calculated the same as normal retirement, based on service the employees would have had at normal retirement and the salary at time of disability, payable immediately.

Employee Contribution

None are required. The Plan included a voluntary employee savings feature, which allowed the employee to contribute after-tax deferrals into the Plan prior to March 31, 2012.

Vesting

Participants are 100% vested upon completing five years of service. Participants in the savings plan option are 100% vested in contributions to the savings plan and the earnings thereon.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Use of Estimates in Preparing Financial Statements

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

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements.

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

Administrative Expenses

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

Payment of Benefits

Benefit payments are recorded when paid.

Actuarial Present Value of Accumulation Plan Benefits

Accumulated Plan benefits are those estimated future periodic defined benefit payments, including lump-sum distributions that are attributable under the Plan's provisions to the service employees have rendered to the valuation date. Accumulated Plan benefits include expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries.

The actuarial present value of accumulated Plan benefits is estimated by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated Plan benefits to reflect the time value of money and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The valuations are based on the most recent actuarial information available using a beginning of the year benefit

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

information date. The computations of the actuarial present value of accumulated Plan benefits were made as of January 1, 2024 and 2023. Had the valuations been performed as of December 31, 2024 and 2023, there would be no material differences.

The significant assumptions used in the valuations as of January 1, 2024 were (a) Pri-2012 amount-weighted Blue-Collar mortality tables for employees, primary retirees, and surviving beneficiaries plus Pri-2012 amount-weighted mortality tables for disabled retirees, all projected with the Buck Modified 2021 Improvement Scale, (b) retirement age assumptions in accordance with the assumptions which produce an average retirement age of 65, and (c) an investment return of 4.60% and discount rate of 3.00%. The mortality assumption was updated as specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2022-22, applied on a static basis.

The significant assumptions used in the valuations as of January 1, 2023 were (a) Pri-2012 amount-weighted Blue-Collar mortality tables for employees, primary retirees, and surviving beneficiaries plus Pri-2012 amount-weighted mortality tables for disabled retirees, all projected with the Buck Modified 2021 Improvement Scale, (b) retirement age assumptions in accordance with the assumptions which produce an average retirement age of 65, and (c) an investment return of 4.90% and discount rate of 4.00%. The mortality assumption was updated as specified in IRS Regulation 1.430(h)(3)-1, as amended in IRS Notice 2022-22, applied on a static basis.

Subsequent Events

Subsequent events have been evaluated through the Independent Auditor's Report date, which is the date the financial statements were available to be issued.

3. Funding Policy

The Company's funding policy is to fund normal cost plus the short-fall amortization charge. The minimum required contributions under ERISA for the years ended December 31, 2024 and 2023 were \$1,735,955 and \$1,762,996, respectively. Company contributions during the years ended December 31, 2024 and 2023 met the minimum funding requirements.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

4. Information Certified by the Plan's Trustees

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the trustee, Matrix Trust Company, as of December 31, 2024 and 2023, has certified that the following data included in the accompanying financial statements and supplemental schedules is complete and accurate:

Total investments as shown in the accompanying statements of net assets available for benefits were \$18,813,224 and \$20,158,978 as of December 31, 2024 and 2023, respectively.

Total investment income for the years ended December 31, 2024 and 2023, respectively) as shown in the accompanying statements of changes in net assets available for benefits were (\$297,701) and \$1,779,661 for the years ended December 31, 2024 and 2023, respectively.

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

5. Fair Value Measurement

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

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

Level 2 - Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability; and

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

- inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value:

Mutual Funds: Mutual funds listed on a national market or exchange are valued at the last sales price, or if there is no sale and the market is still considered active, at the mean of the last bid and ask prices on such exchange. The Plan's interests in such investments are categorized as mutual funds. Such securities are classified within Level 1 of the valuation hierarchy.

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

	2024			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ -	\$ -	\$ -	\$ -
Total investments in the fair value hierarchy	-	-	-	-
Investments measured at net asset value *	-	-	-	18,813,117
Total investments at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 18,813,117</u>

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

	2023			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ -	\$ -	\$ -	\$ -
Total investments in the fair value hierarchy	-	-	-	-
Investments measured at net asset value *	-	-	-	20,158,871
Total investments at fair value	\$ -	\$ -	\$ -	\$ 20,158,871

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

Investments Measured Using the Net Asset Value per Share

The following table summarizes investments for which fair value is measured using the net asset value per share:

	2024	2023
Collective investment trust	18,562,215	19,897,150
Money market mutual funds	250,902	261,721
Total investments measured at net asset value	\$ 18,813,117	\$ 20,158,871

Collective Investment Trust Funds (CIT):

Long Corporate A or Better Composite - The sub-composite seeks to generate returns that exceed Bloomberg Barclays Long U.S. Corporate A or Better Bond Index through investments in fixed income securities and commingled vehicles. The sub-composite is composed of all fee-paying discretionary accounts that are managed by the Firm in this style. This sub-composite, along with one or more other sub-composites, combine to create aggregate composite. The composite contains a pool portfolio that is presented net of custody and audit fees. Investment security transactions for the pool portfolio are accounted for on trade date-plus-one. There are no unfunded commitments or restrictions on redemptions.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Long Duration - The investment objective of this composite is to achieve absolute and risk-adjusted returns in excess of the Bloomberg Barclays U.S. Long Government/Credit Bond Index through investments in investment-grade fixed income securities including primarily government, corporate, structured securities, and commingled vehicles. The composite of all fee-paying discretionary accounts that are managed by the Firm in this style. The composite contains a pool portfolio that is presented net of custody and audit fees. Investment security transactions for the pool portfolio are accounted for on trade date-plus-one. There are no unfunded commitments or restrictions on redemptions.

8-10 Year Corporate Bond – The investment objective of this composite is to maintain overall performance and characteristics consistent with the Bloomberg Barclays 8-10 Year Maturity A or Better Corporate Custom Index through investments primarily in fixed income instruments. Portfolios will utilize bottom-up fundamental analysis with top-down macro inputs and quantitative portfolio analysis to build a high-quality portfolio that will match the risk profile of the index. The composite is composed of all fee-paying, discretionary accounts managed by the Firm in this style. The composite contains a pool portfolio that is presented net of custody and audit fees. Investment security transactions for the pool portfolio are accounted for on trade date-plus-one. There are no unfunded commitments or restrictions on redemptions.

FIAM Pension Journey Pool - The pool seeks capital growth and income by diversifying across a range of asset classes, including equity and debt securities issued anywhere in the world. Portfolios will typically employ a fund-of-funds approach by investing in underlying investment vehicles to achieve a target asset allocation of approximately 60% of its assets in return-seeking asset classes and 40% of its assets in liability-hedging asset classes. Investment security transactions for the pool portfolio are accounted for on trade date-plus-one. Underlying pools are subject to Fidelity Institutional Asset Management group market timing policy, which requires net asset value to be determined using security valuations at 4:00 pm EST. As a result, performance of the pools may be different from the performance of other accounts in this composite and may have a material impact on the performance of the overall composite. There are no unfunded commitments or restrictions on redemptions.

Money Market Mutual Fund: Valued based on an estimated net asset value of \$1 per share/unit. The fund seeks high current income with liquidity and stability of principal. The fund invests exclusively in high-quality, short-term securities that are issued or guaranteed by the U.S. government or by U.S. government agencies and instrumentalities. There are no unfunded commitments or restrictions on redemptions. There are no unfunded commitments or restrictions on redemptions.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value for certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes in the methodologies used at December 31, 2024 and 2023.

6. Plan Termination

The Company may terminate the Plan at any time. Under provisions of ERISA, if the Plan were to terminate, the Company may be obligated to make certain termination payments to the Plan, and participants may be eligible for continuation of benefits under insurance provided by the Pension Benefit Guaranty Corporation (PBGC).

In the event of termination of the Plan, the trust fund assets, after withdrawal for final expenses, will be distributed as prescribed by ERISA and its related regulations generally to provide benefits in the following order: (1) benefits called for under the Plan for those retired participants who have been receiving benefit payment for three years or who have been eligible to receive such payments for three years; (2) benefits called for under the Plan that are guaranteed by the PBGC; (3) other benefits that are deemed not forfeitable; and (4) all other benefits under the Plan.

Whether a particular participant's accumulated Plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided by the then existing assets as well as the PBGC guaranty while other benefits may not be provided at all. Additional information in this regard is provided in the Plan agreement.

Savings plan participants are always 100% vested in their entire account balances and the earnings thereon.

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

7. Tax Status

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated January 3, 2017, that the Plan and related trust, as then designated, was in compliance with applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designated and being operated in compliance with the applicable provisions of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2021. The Plan annually files a Form 5500.

8. Related Party Transaction and Party-in-Interest Transactions

Certain Plan investments are shares of collective investment trusts managed by Fidelity Institutional Asset Management Trust Company and Matrix Trust Company as of December 31, 2024 and 2023. Matrix Trust Company is a trustee as defined by the Plan as of December 31, 2024 and 2023; these transactions qualify as party-in-interest transactions. In addition, certain officers and employees of the Company are administrators of the Plan and participants of the Plan.

9. Risks and Uncertainties

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

WOOLRICH, INC. PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

YEARS ENDED DECEMBER 31, 2024 AND 2023

Plan contributions are made and actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the 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.

SUPPLEMENTAL SCHEDULES

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Line 26a – Schedule of Active Participant Data

Distribution of Active Participants as of January 1, 2024 – Age by Service

Age	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0	0
40-44	0	1	0	0	0	0	0	0	0	0	1
45-49	0	1	0	1	0	0	0	0	0	0	2
50-54	0	0	0	0	0	0	0	0	0	0	0
55-59	0	0	0	0	0	0	0	0	0	0	0
60-64	0	0	0	0	0	0	0	1	0	0	1
65-69	0	0	0	0	0	0	0	0	0	0	0
70+	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	2	0	1	0	0	0	1	0	0	4

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods

Funding assumptions selection and rationale

The non-prescribed funding assumptions were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations. The demographic assumptions are based on the plan sponsor's anticipated experience. Actual experience is reviewed each year and compared to the assumption. Changes are then made, as appropriate, based on this review.

For funding, the interest rates and mortality assumption have a significant effect on the measurement and are prescribed by law and regulation. The expected rate of return on plan assets has a significant effect on the measurement and is selected by the actuary. The expected rate of return on plan assets is based on the market outlook, the mix of asset class and inputs from the plan's investment managers. The expected rate of return on plan assets is reasonable for funding purposes.

Use of Models

Actuarial Standard of Practice No. 56 ("ASOP 56") provides guidance to actuaries when performing actuarial services with respect to designing, developing, selecting, modifying, using, reviewing, or evaluating models. Gallagher uses third-party software in the performance of annual actuarial valuations and projections. The model is intended to calculate the liabilities associated with the provisions of the plan using data and assumptions as of the measurement date under the funding rules specified in this report. Further, the model applies those funding rules to the liabilities derived and other inputs, such as plan assets and contributions, to generate this report. Gallagher has an extensive review process whereby the results of the liability calculations are checked using detailed sample output, changes from year to year are summarized by source, and significant deviations from expectations are investigated. Other funding outputs are similarly reviewed in detail and at a high level for accuracy, reasonability and consistency with prior results. Gallagher also reviews the model when significant changes are made to the software. The review is performed by experts within the company who are familiar with applicable funding rules as well as the manner in which the model generates its output.

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the actuarial assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Prescribed Funding Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

Interest rates

	2024 Plan Year	2023 Plan Year
Funding Rates – Constrained*		
First Segment Rate	4.75%	4.75%
Second Segment Rate	4.87%	5.00%
Third Segment Rate	5.59%	5.74%
Effective Interest Rate	5.01%	5.13%
Funding Rates – Unconstrained**		
First Segment Rate	3.62%	1.41%
Second Segment Rate	4.46%	3.09%
Third Segment Rate	4.52%	3.58%
Effective Interest Rate	4.39%	3.08%

* Used for minimum funding and benefit restriction purposes.

**Used for maximum tax-deduction purposes.

The interest rates used for funding purposes are the Segment Rates with four-month lookback, constrained in accordance with relevant legislation.

Mortality

Mortality tables mandated by applicable law and regulation as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale.

Actuarial cost method

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including expected plan administrative expenses to be paid from plan assets during the year.

Since the plan is frozen, the Target Normal Cost represents expected plan expenses only.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Expenses

Expected plan administrative expenses are assumed to be the prior year actual administrative expenses, minus the prior year PBGC premium, adjusted for inflation, plus the current year PBGC premium, rounded up to the next 10,000 which equals \$650,000 for 2024.

Frequency of optional payment forms

Male

Types of Participants	Single Life	75% Joint & Survivor	50% Joint & Survivor
Active Retirements	50%	50%	0%
Future vested deferred	50%	50%	0%
Future disabilities	50%	50%	0%
Future deaths	0%	0%	100%
Current vested deferred	100%	0%	0%

Female

Types of Participants	Single Life	75% Joint & Survivor	50% Joint & Survivor
Active Retirements	70%	30%	0%
Future vested deferred	70%	30%	0%
Future disabilities	70%	30%	0%
Future deaths	0%	0%	100%
Current vested deferred	100%	0%	0%

Marital percentage

85% of male participants and 65% of female participants are assumed to be married at death. Husbands are assumed to be 3 years older than their wives.

Retirement rates

Attained Age	Percentage
60 – 61	5%
62	25%
63 – 64	10%
65 – 69	50%
70 and above	100%

Current and future vested deferred participants are assumed to commence at age 65.

In addition, for purposes of determining At-Risk Funding Target and At-Risk Target Normal Cost, employees eligible to retire and receive a benefit in the next 11 years are assumed to retire when first eligible (but not before the end of the current plan year) and will elect to receive the form of benefit producing the highest present value

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Disability rates

The 1985 Pension Disability Table. Sample rates set forth below:

Age	Male	Female
20	0.029%	0.030%
25	0.038%	0.047%
30	0.048%	0.080%
35	0.069%	0.136%
40	0.117%	0.211%
45	0.202%	0.323%
50	0.358%	0.533%
55	0.722%	0.952%
60	1.256%	1.159%

Withdrawal rates for active participants not eligible for retirement

A rate based on age plus a rate based on service, in accordance with the table illustrated below:

Age	Percentage of Terminations in Plan Year	Completed Years of Service	Percentage of Terminations in Plan Year
20	26.240%	0	10.000%
25	18.140%	1	10.000%
30	12.590%	≥ 2	0.000%
35	9.040%		
40	6.760%		
45	5.080%		
50	3.590%		
55	2.130%		
60	0.810%		

Asset valuation method

The asset valuation method is an average of the adjusted market value for each month during the last three months preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected return. This amount is adjusted to be no greater than 110% and no less than 90% of the fair market value, as defined in IRC Section 430. The expected return is based on an assumed earnings rate chosen by the actuary but required by PPA to be not greater than the applicable third Segment Rate.

	Actuary's Assumption	Third Segment Rate	Reflecting PPA Limit
2024 Expected Return	4.60%	5.59%	4.60%
2023 Expected Return	4.90%	5.74%	4.90%
2022 Expected Return	3.10%	5.92%	3.10%

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Statement of Actuarial Assumptions/Methods (continued)

Summary of Changes from the January 1, 2023 Valuation

- The interest rates were updated to those applicable to the current year in accordance with relevant legislation.
- The mortality assumption was updated as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale.
- The expected return on plan assets was changed from 4.90% for the return during 2023 to 4.60% for the return during 2024 based on an analysis of expected asset returns, taking into account the plan's investment policy and the current asset allocation and information provided by the Plan's investment consultant.

The changes in interest rates and mortality listed above decreased the Funding Target by \$82,000.

5% Reportable Transactions (Single Transactions)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
---	----------	-------	------------------	---------------	----------------	-----------------

BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76

NO TRANSACTIONS TO REPORT

5% Reportable Transactions (Series by Security)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
FIAM 8-10 Yr Crp Bd CP (CUSIP MTC430693)						
01/12/2024 PURCHASE	4,813.9530	11.6100	0.00	55,890.00	55,890.00	0.00
01/23/2024 SALE	4,791.4070	11.5100	0.00	59,317.16	55,149.10	(4,168.06)
01/30/2024 SALE	1,689.5780	11.6100	0.00	20,916.82	19,616.00	(1,300.82)
02/26/2024 SALE	4,804.8640	11.4800	0.00	59,483.76	55,159.84	(4,323.92)
03/21/2024 SALE	4,768.4020	11.5800	0.00	59,032.36	55,218.10	(3,814.26)
04/12/2024 PURCHASE	9,585.2760	11.4100	0.00	109,368.00	109,368.00	0.00
04/22/2024 SALE	4,960.4680	11.3500	0.00	61,297.82	56,301.31	(4,996.51)
05/22/2024 SALE	4,845.4690	11.6100	0.00	59,876.75	56,255.90	(3,620.85)
06/12/2024 SALE	945.6270	11.7300	0.00	11,685.36	11,092.20	(593.16)
06/20/2024 SALE	4,758.4270	11.7600	0.00	58,801.15	55,959.10	(2,842.05)
07/16/2024 PURCHASE	9,152.9700	11.9200	0.00	109,103.40	109,103.40	0.00
07/22/2024 SALE	5,260.3430	11.8500	0.00	64,951.39	62,335.07	(2,616.32)
08/22/2024 SALE	4,789.4620	12.2400	0.00	59,137.24	58,623.02	(514.22)
09/13/2024 PURCHASE	18,577.3190	12.4600	0.00	231,473.40	231,473.40	0.00
09/24/2024 SALE	4,665.1670	12.4700	0.00	57,626.17	58,174.63	548.46
10/11/2024 SALE	6,051.4710	12.2400	0.00	74,750.40	74,070.00	(680.40)
11/18/2024 SALE	6,503.2750	12.0500	0.00	80,331.28	78,364.46	(1,966.82)
12/16/2024 SALE	5,422.5140	12.1400	0.00	66,981.25	65,829.32	(1,151.93)
SECURITY TOTAL	106,385.9920		0.00	1,300,023.74	1,267,982.85	(32,040.89)

Fidelity Institutional Asset Management Aorbetter-A

(CUSIP 31564M575)						
01/12/2024 PURCHASE	2,827.9900	24.8300	0.00	70,219.00	70,219.00	0.00
01/23/2024 SALE	2,840.8430	24.3900	0.00	67,367.30	69,288.15	1,920.85
01/30/2024 SALE	986.9250	24.7800	0.00	23,403.78	24,456.00	1,052.22
02/26/2024 SALE	2,826.8190	24.2500	0.00	67,034.74	68,550.35	1,515.61
03/21/2024 SALE	2,816.3310	24.3500	0.00	66,786.03	68,577.67	1,791.64
04/12/2024 PURCHASE	5,627.1900	23.8400	0.00	134,152.20	134,152.20	0.00

5% Reportable Transactions (Series by Security)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
04/22/2024 SALE	2,934.9730	23.5300	0.00	69,608.11	69,059.91	(548.20)
05/22/2024 SALE	2,840.1030	24.3000	0.00	67,358.10	69,014.51	1,656.41
06/12/2024 SALE	553.4760	24.5700	0.00	13,126.67	13,598.91	472.24
06/20/2024 SALE	2,798.7890	24.7100	0.00	66,378.27	69,158.08	2,779.81
07/16/2024 PURCHASE	5,352.6090	25.0300	0.00	133,975.80	133,975.80	0.00
07/22/2024 SALE	3,095.4890	24.7100	0.00	73,506.60	76,489.53	2,982.93
08/22/2024 SALE	2,828.3950	25.8700	0.00	67,164.09	73,170.57	6,006.48
09/13/2024 PURCHASE	10,908.5290	26.5200	0.00	289,294.20	289,294.20	0.00
09/24/2024 SALE	2,741.0820	26.4900	0.00	65,432.53	72,611.25	7,178.72
10/11/2024 SALE	3,569.3690	25.6600	0.00	85,204.62	91,590.00	6,385.38
11/18/2024 SALE	3,868.9000	25.0300	0.00	92,354.75	96,838.57	4,483.82
12/16/2024 SALE	3,193.2460	25.2000	0.00	76,226.17	80,469.80	4,243.63
SECURITY TOTAL	62,611,0580		0.00	1,528,592.96	1,570,514.50	41,921.54

Fidelity Institutional Asset Management Long Duration Pool

(CUSIP WTC303957)						
01/12/2024 PURCHASE	4,266.5710	24.3500	0.00	103,891.00	103,891.00	0.00
01/23/2024 SALE	4,298.2720	23.8500	0.00	97,824.32	102,513.78	4,689.46
01/30/2024 SALE	1,480.9560	24.2600	0.00	33,705.06	35,928.00	2,222.94
02/26/2024 SALE	4,252.6310	23.8300	0.00	96,785.58	101,340.19	4,554.61
03/21/2024 SALE	4,251.8750	23.8700	0.00	96,768.37	101,492.25	4,723.88
04/12/2024 PURCHASE	8,461.0030	23.3400	0.00	197,479.80	197,479.80	0.00
04/22/2024 SALE	4,414.2510	23.0300	0.00	100,523.59	101,660.19	1,136.60
05/22/2024 SALE	4,273.4570	23.8100	0.00	97,317.35	101,751.00	4,433.65
06/12/2024 SALE	832.8460	24,1000	0.00	18,966.00	20,071.60	1,105.60
06/20/2024 SALE	4,207.4480	24.3500	0.00	95,814.16	102,451.35	6,637.19
07/16/2024 PURCHASE	8,052.1070	24.5800	0.00	197,920.80	197,920.80	0.00
07/22/2024 SALE	4,659.2850	24.2600	0.00	106,293.15	113,034.25	6,741.10
08/22/2024 SALE	4,264.5910	25.4800	0.00	97,288.92	108,661.79	11,372.87
09/13/2024 PURCHASE	16,465.0750	26.1300	0.00	430,232.40	430,232.40	0.00

5% Reportable Transactions (Series by Security)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
09/24/2024 SALE	4,131.6040	25.9100	0.00	94,872.64	107,049.87	12,177.23
10/11/2024 SALE	5,384.3690	24.9500	0.00	123,639.46	134,340.00	10,700.54
11/18/2024 SALE	5,818.3620	24.3500	0.00	133,605.10	141,677.11	8,072.01
12/16/2024 SALE	4,815.0820	24.5000	0.00	110,567.12	117,969.51	7,402.39
SECURITY TOTAL	94,329.7850		0.00	2,233,494.83	2,319,464.89	85,970.06

5% Reportable Transactions (Series By Broker)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
BROKER: Fidelity						
FIAM 8-10 Yr Crp Bd CP (CUSIP MTC430693)						
01/12/2024 PURCHASE	4,813.9530	11.6100	0.00	55,890.00	55,890.00	0.00
01/23/2024 SALE	4,791.4070	11.5100	0.00	59,317.16	55,149.10	(4,168.06)
01/30/2024 SALE	1,689.5780	11.6100	0.00	20,916.82	19,616.00	(1,300.82)
02/26/2024 SALE	4,804.8640	11.4800	0.00	59,483.76	55,159.84	(4,323.92)
03/21/2024 SALE	4,768.4020	11.5800	0.00	59,032.36	55,218.10	(3,814.26)
04/12/2024 PURCHASE	9,585.2760	11.4100	0.00	109,368.00	109,368.00	0.00
04/22/2024 SALE	4,960.4680	11.3500	0.00	61,297.82	56,301.31	(4,996.51)
05/22/2024 SALE	4,845.4690	11.6100	0.00	59,876.75	56,255.90	(3,620.85)
06/12/2024 SALE	945.6270	11.7300	0.00	11,685.36	11,092.20	(593.16)
06/20/2024 SALE	4,758.4270	11.7600	0.00	58,801.15	55,959.10	(2,842.05)
07/16/2024 PURCHASE	9,152.9700	11.9200	0.00	109,103.40	109,103.40	0.00
07/22/2024 SALE	5,260.3430	11.8500	0.00	64,951.39	62,335.07	(2,616.32)
08/22/2024 SALE	4,789.4620	12.2400	0.00	59,137.24	58,623.02	(514.22)
09/13/2024 PURCHASE	18,577.3190	12.4600	0.00	231,473.40	231,473.40	0.00
09/24/2024 SALE	4,665.1670	12.4700	0.00	57,626.17	58,174.63	548.46
10/11/2024 SALE	6,051.4710	12.2400	0.00	74,750.40	74,070.00	(680.40)
11/18/2024 SALE	6,503.2750	12.0500	0.00	80,331.28	78,364.46	(1,966.82)
12/16/2024 SALE	5,422.5140	12.1400	0.00	66,981.25	65,829.32	(1,151.93)
Fidelity Institutional Asset Management Aorbetter-A (CUSIP 31564M575)						
01/12/2024 PURCHASE	2,827.9900	24.8300	0.00	70,219.00	70,219.00	0.00
01/23/2024 SALE	2,840.8430	24.3900	0.00	67,367.30	69,288.15	1,920.85
01/30/2024 SALE	986.9250	24.7800	0.00	23,403.78	24,456.00	1,052.22
02/26/2024 SALE	2,826.8190	24.2500	0.00	67,034.74	68,550.35	1,515.61
03/21/2024 SALE	2,816.3310	24.3500	0.00	66,786.03	68,577.67	1,791.64
04/12/2024 PURCHASE	5,627.1900	23.8400	0.00	134,152.20	134,152.20	0.00
04/22/2024 SALE	2,934.9730	23.5300	0.00	69,608.11	69,059.91	(548.20)

5% Reportable Transactions (Series By Broker)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
05/22/2024 SALE	2,840.1030	24.3000	0.00	67,358.10	69,014.51	1,656.41
06/12/2024 SALE	553.4760	24.5700	0.00	13,126.67	13,598.91	472.24
06/20/2024 SALE	2,798.7890	24.7100	0.00	66,378.27	69,158.08	2,779.81
07/16/2024 PURCHASE	5,352.6090	25.0300	0.00	133,975.80	133,975.80	0.00
07/22/2024 SALE	3,095.4890	24.7100	0.00	73,506.60	76,489.53	2,982.93
08/22/2024 SALE	2,828.3950	25.8700	0.00	67,164.09	73,170.57	6,006.48
09/13/2024 PURCHASE	10,908.5290	26.5200	0.00	289,294.20	289,294.20	0.00
09/24/2024 SALE	2,741.0820	26.4900	0.00	65,432.53	72,611.25	7,178.72
10/11/2024 SALE	3,569.3690	25.6600	0.00	85,204.62	91,590.00	6,385.38
11/18/2024 SALE	3,868.9000	25.0300	0.00	92,354.75	96,838.57	4,483.82
12/16/2024 SALE	3,193.2460	25.2000	0.00	76,226.17	80,469.80	4,243.63
Fidelity Institutional Asset Management Long Duration Pool (CUSIP WTC303957)						
01/12/2024 PURCHASE	4,266.5710	24.3500	0.00	103,891.00	103,891.00	0.00
01/23/2024 SALE	4,298.2720	23.8500	0.00	97,824.32	102,513.78	4,689.46
01/30/2024 SALE	1,480.9560	24.2600	0.00	33,705.06	35,928.00	2,222.94
02/26/2024 SALE	4,252.6310	23.8300	0.00	96,785.58	101,340.19	4,554.61
03/21/2024 SALE	4,251.8750	23.8700	0.00	96,768.37	101,492.25	4,723.88
04/12/2024 PURCHASE	8,461.0030	23.3400	0.00	197,479.80	197,479.80	0.00
04/22/2024 SALE	4,414.2510	23.0300	0.00	100,523.59	101,660.19	1,136.60
05/22/2024 SALE	4,273.4570	23.8100	0.00	97,317.35	101,751.00	4,433.65
06/12/2024 SALE	832.8460	24.1000	0.00	18,966.00	20,071.60	1,105.60
06/20/2024 SALE	4,207.4480	24.3500	0.00	95,814.16	102,451.35	6,637.19
07/16/2024 PURCHASE	8,052.1070	24.5800	0.00	197,920.80	197,920.80	0.00
07/22/2024 SALE	4,659.2850	24.2600	0.00	106,293.15	113,034.25	6,741.10
08/22/2024 SALE	4,264.5910	25.4800	0.00	97,288.92	108,661.79	11,372.87
09/13/2024 PURCHASE	16,465.0750	26.1300	0.00	430,232.40	430,232.40	0.00
09/24/2024 SALE	4,131.6040	25.9100	0.00	94,872.64	107,049.87	12,177.23
10/11/2024 SALE	5,384.3690	24.9500	0.00	123,639.46	134,340.00	10,700.54
11/18/2024 SALE	5,818.3620	24.3500	0.00	133,605.10	141,677.11	8,072.01

5% Reportable Transactions (Series By Broker)
Woolrich, Inc. Pension Plan Statement Group
a6537

CONSOLIDATED

From January 1, 2024 Through December 31, 2024

DESCRIPTION OF ASSET/IDENTITY OF PARTIES INVOLVED	QUANTITY	PRICE	EXPENSE INCURRED	COST OF ASSET	VALUE OF ASSET	NET GAIN/(LOSS)
BASED ON MARKET VALUE OF 20,159,315.20 AND 5% VALUE OF 1,007,965.76						
12/16/2024 SALE	4,815.0820	24.5000	0.00	110,567.12	117,969.51	7,402.39
BROKER TOTAL			0.00	5,062,111.53	5,157,962.24	95,850.71

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

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

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

A Name of plan WOOLRICH, INC. PENSION PLAN		B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Woolrich, Inc.		D Employer Identification Number (EIN) 24-0765400	
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		21,307,304
b Actuarial value	2b		19,816,269
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	560	28,153,371	28,153,371
b For terminated vested participants	75	2,841,789	2,841,789
c For active participants	4	90,546	93,963
d Total	639	31,085,706	31,089,123
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) <input checked="" type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions	4a		31,089,123
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		31,083,334
5 Effective interest rate	5		5.01%
6 Target normal cost			
a Present value of current plan year accruals	6a		0
b Expected plan-related expenses	6b		650,000
c Target normal cost	6c		650,000

Statement by Enrolled Actuary

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

SIGN HERE	<i>Robert D. Fick</i> Signature of actuary	<u>10/9/2025</u> Date
	ROBERT D. FICK, EA, FCA, MAAA Type or print name of actuary	2305435 Most recent enrollment number
	BUCK GLOBAL, LLC Firm name	412-281-2506 Telephone number (including area code)
	11 STANWIX STREET, SUITE 700 PITTSBURGH PA 15222-1312 Address of the firm	

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

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

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

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75%	2nd segment: 4.87%	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 64
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	650,000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	11,272,854	1,085,955	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	1,735,955	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35).....	36	1,735,955	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	1,736,072	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	117	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input checked="" type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021
--

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Line 22 – Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
60	1.8974	0.0500	0.0949	5.6922
61	2.7753	0.0500	0.1388	8.4647
62	2.5957	0.2500	0.6489	40.2335
63	1.9073	0.1000	0.1907	12.0160
64	1.6861	0.1000	0.1686	10.7913
65	1.4892	0.5000	0.7446	48.4004
66	0.7396	0.5000	0.3698	24.4056
67	0.3670	0.5000	0.1835	12.2959
68	0.1820	0.5000	0.0910	6.1891
69	0.0902	0.5000	0.0451	3.1121
70	0.0447	1.0000	<u>0.0447</u>	<u>3.1263</u>
Total			2.7206	174.7271
Weighted Average Retirement Age = 174.7271 / 2.7206				64.22
Rounded Weighted Average Retirement Age				64

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General note: The table presents values rounded to fewer significant digits than used in the calculation.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Line 4 – Additional Information for Plans in At-Risk Status

At-risk assumptions for the assumed form of payment:

Salaried and Certain Other Employees: Life annuity

Production and Maintenance Employees: Life annuity for females, 100% J&S for males

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V – Summary of Plan Provisions

Effective Date

Original Plan: December 1, 1966
Restated plan: January 1, 2016
Most recent plan amendment: Amendment #2 effective October 27, 2017.

Status of the plan

Benefit accruals under the plan are frozen effective May 31, 2012, and no new participants shall be added to the plan after that date.

Salaried and Certain Other Employees

Covered employees

Each employee (excluding effective January 1, 1997, commissioned salesmen other than those who had attained age 60 as of January 1, 1997) of an affiliated company who is not a Production and Maintenance Employee.

Effective May 31, 2012, no new employee shall become a participant in the plan. Any employee rehired after May 31, 2012 shall not be eligible to become a participant.

Participation

Participation is frozen effective May 31, 2012.

Employee contributions

None.

Employment periods

Before 1977:

Continuous employment (including leaves of absence) from full-time or part-time date of hire through December 31, 1976.

After 1976:

For full-time employment, plan years calculated to the nearest month. For part-time employment, number of plan years in which 870 hours are credited.

Vesting service

Sum of Employment Periods. For Ailey employees only, service used to determine vesting and eligibility will begin at the employee's original date of hire in the Ailey Division. For accrual of benefit purposes, service means Employment Periods after the later of date of hire or April 4, 1988.

Credited service

Service (excluding leaves without pay) calculated to years and nearest month for full-time employment and full years in which 870 hours are credited for part-time employment. For Ailey employees only, employment periods beginning after the later of date of hire or April 4, 1988 will be considered. Credited service is frozen as of January 1, 1997 for all commissioned salesmen except those who had attained age 60 as of January 1, 1997. No period of employment shall be counted after May 31, 2012 in determining years of credited service under the plan.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Salaried and Certain Other Employees (continued)

Compensation

Total earnings excluding commissions limited in accordance with IRS regulations. Effective January 1, 1992, commissions net of expenses are included in compensation.

Effective March 1996, all amounts deferred under the Deferred Income Plan including amounts deferred prior to March 1996, are included in compensation.

Effective May 31, 2012, no remuneration for services performed after May 31, 2012 paid by the employer to a participant shall be considered Compensation for any purpose under the plan.

Average compensation

Compensation averaged over the highest four consecutive Plan Years (including annualized earnings in year of termination of employment is terminated by reason of death, disability, or retirement) out of the last 10 Plan Years. Effective January 1, 1997, average compensation shall be frozen for commissioned salesmen who had not attained age 60 on January 1, 1997. Effective May 31, 2012 average compensation shall be frozen for all participants (annualized earnings are used for 2012).

Primary Social Security benefit

Estimated amount payable at age 65 based on law in effect as of the first day of the Plan Year of determination, or age 65 if earlier and assuming level earnings to age 65.

Accrued benefit

Greatest of (1), (2) or (3) below:

1. Under Career Average Formula, amount earned to date of determination based on Normal Retirement formula 1.
2. Under Final Pay Formula for non-commission-related benefit, amount projected to Normal Retirement Date, using Average Compensation at date of determination and Social Security and Credited Service at age 65; the results multiplied by the ratio of Credited Service at date of determination to Credited Service at Normal Retirement. For commission-related benefit, the projected benefit is multiplied by the ratio of Credited Service after 1991 at date of determination to Credited Service after 1991 at Normal Retirement.
3. Under minimum Annual Benefit, amount earned to date of determination based on Normal Retirement formula 3.

The accrued benefit for commissioned salesmen who had not attained age 60 on January 1, 1997 is frozen on January 1, 1997.

All accrued benefits for participants shall be frozen effective May 31, 2012, and no additional benefits will accrue under the Plan after such date.

Normal retirement

Eligibility

Retirement on the first day of the month coincident with or following 65th birthday

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Salaried and Certain Other Employees (continued)

Benefit

Greatest of (1), (2) or (3) below:

(1) Career Average Formula:

For service before January 1, 1977, the annual pension accrued under the prior plan for employment through November 30, 1976; plus a pro rata portion of the benefit accrued during the plan year ending November 30, 1976 for employment during December 1976; both increased by 15.5%.

Plus for service between December 31, 1976 and January 1, 1980, the greater of:

- A. 0.8 of 1% Compensation in each plan year, increased by 10%, or
- B. The annual pension accrued under the prior plan for the year ending November 30, 1976, increased by 10%, if the participant is credited with 1,800 hours of service in a plan year.

Plus for service after December 31, 1979, the greater of:

- C. 0.8 of 1% of Compensation in each plan year; or
- D. the annual pension accrued under the prior plan for the year ending November 30, 1976, if the participant is credited with 1,800 hours of service in a plan year.

Note: The accrued benefit as of January 1, 1985 under this section (1) was increased by 5% effective January 1, 1986.

(2) Final Pay Formula:

- E. 1.55% of Average Compensation (excluding commissions) for each of the first 30 years of Credited Service, plus
- F. 0.95% of Average Compensation (excluding commissions) for each year of Credited Service in excess of 30 years; reduced by
- G. 2.5% of primary Social Security for each of the first 30 years of Credited Service.

Effective January 1, 1992, an additional benefit of:

- H. 1.55% of Average Commissions for each year of Credited Service after December 31, 1991 up to 30 years, plus
- I. 0.95% of Average Commissions for each year of Credited Service after December 31, 1991 in excess of 30 years.

(3) Minimum Annual Benefit:

\$84.00 times service

Effective May 31, 2012 the amount of a participant's monthly pension commencing on his normal retirement date shall be frozen as of May 31, 2012 and shall not increase after May 31, 2012.

Early retirement

Eligibility

Retirement on the first day of any month coincident with or following attainment of age 60 and completion of five years of Service.

Benefit

Accrued Benefit as of date of termination reduced 1/180 for each month of early commencement.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Salaried and Certain Other Employees (continued)

Late retirement

Eligibility

Retirement on the first day of any month following Normal Retirement Date.

Benefit

Normal Retirement formula using Compensation, Average Compensation, and Credited Service as of the earlier of late retirement date or May 31, 2012.

Deferred vested

Eligibility

Termination for any reason other than death, disability or retirement, after completion of at least five years of Service.

Benefit

Accrued Benefit to date of termination payable unreduced at Normal Retirement. If an employee has five years of Service at termination, he may commence his benefit reduced after age 60, as if for Early Retirement.

Disability

Eligibility

Retirement after completing five years of Service and following six months of disability (as determined by two doctors assigned by Committee).

Benefit

Accrued Benefit payable immediately.

Pre-retirement death

Eligibility

Employee dies after satisfying the requirements for termination benefits or dies after attaining age 65, and has been married for at least the one year prior to death.

Benefit prior to early retirement

50% of the Accrued Benefit payable at the employee's earliest retirement date with reductions for early retirement and Form of Benefit.

Benefit after early but before normal retirement

100% of the benefit the employee would have received had he retired (without reduction for early commencement) and elected the 100% Joint and Survivor Annuity Option. Also eligible after attainment of age 50 with 15 years of Service.

Benefit after normal retirement

If an employee dies while active and after attaining age 65, 100% of the benefit the employee would have received had he retired (without reduction for early commencement) and elected the 100% Joint and Survivor Annuity Option.

Forms of benefit

Automatic form for unmarried participants

Life only

Automatic form for married participants

50% joint and survivor

Automatic lump sum if actuarial equivalent of participant's vested accrued benefit is \$1,000 or less or paid with participant's consent if between \$1,000 and \$5,000.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Salaried and Certain Other Employees (continued)

Optional form conversion factors

Conversion factors use the actuarial equivalence of UP84 mortality setback two years for participants and beneficiaries and 7% interest.

Optional forms

Life only,
Life with 10 years certain,
100%, 75%, or 50% joint and survivor annuity,
Small lump sum payment

Miscellaneous

Maximum compensation

Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually.

Maximum benefits

Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually.

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Production and Maintenance

Covered employees

Each employee of an affiliated company employed as a Production and Maintenance Employee and who is compensated on an hourly basis.

Effective May 31, 2012, no new employee shall become a participant in the plan. Any employee rehired after May 31, 2012 shall not be eligible to become a participant.

Participation

Participation is frozen effective May 31, 2012.

Employee contributions

None.

Employment periods

Before 1977:

Continuous employment (including leaves of absence) from full-time or part-time date of hire through December 31, 1976.

After 1976:

Number of plan years from January 1, 1977 in which 870 hours are credited.

Vesting service

Sum of Employment Periods. For Ailey employees only, service used to determine vesting and eligibility will begin at the employee's original date of hire in the Ailey Division. For accrual of benefit purposes, service means Employment Periods after the later of date of hire or April 4, 1988.

Compensation

Total earnings excluding commissions limited in accordance with IRS regulations.

Effective May 31, 2012, no remuneration for services performed after May 31, 2012 paid by the employer to a participant shall be considered Compensation for any purpose under the plan.

Accrued benefit

Greater of (1) and (2) below:

(1) Career Average Formula:

For service before January 1, 1977, the annual accrued pension under the prior plan for employment through November 30, 1976; plus a pro rata portion of the benefit accrued during the Plan Year ending November 30, 1976 for employment during December of 1976; both increased by 15.5%;

Plus for service between December 31, 1976 and January 1, 1980, the greater of:

- A. 0.8 of 1% Compensation in each plan year, increased by 10%, or
- B. The annual pension accrued under the prior plan for the year ending November 30, 1976, increased by 10%, if the participant is credited with 1,800 hours of service in a plan year.

Plus for service after December 31, 1979, the greater of:

- C. 0.8 of 1% of Compensation in each plan year; or

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Production and Maintenance (continued)

D. the annual pension accrued under the prior plan for the year ending November 30, 1976, if the participant is credited with 1,800 hours of service in a plan year.

Note: The accrued benefit as of January 1, 1985 under this section (1) was increased by 5%.

(2) Minimum Annual Benefit:

\$84.00 times service, effective January 1, 1993.

All accrued benefits for participants shall be frozen effective May 31, 2012, and no additional benefits will accrue under the Plan after such date.

Normal retirement

Eligibility

Retirement on the first day of the month coincident with or following 65th birthday.

Benefit

Accrued Benefit as of Normal Retirement Date.

Early retirement

Eligibility

Retirement on the first day of any month coincident with or following attainment of age 60 and completion of five years of Service.

Benefit

Accrued Benefit as of date of termination reduced 1/180 for each month of early commencement.

Late retirement

Eligibility

Retirement on the first day of any month following Normal Retirement Date.

Benefit

Accrued Benefit as of the earlier of late retirement date or May 31, 2012.

Deferred vested

Eligibility

Termination for any reason other than death, disability or retirement, after completion of at least five years of Service.

Benefit

Accrued Benefit to date of termination payable unreduced at Normal Retirement. If an employee has five years of Service at termination, he may commence his benefit reduced after age 60, as if for Early Retirement.

Disability

Eligibility

Retirement after completing five years of Service and following six months of disability (as determined by two doctors assigned by Committee).

Benefit

Accrued Benefit payable immediately

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Part V - Summary of Plan Provisions (continued)

Production and Maintenance (continued)

Pre-retirement death

Eligibility

Employee dies after satisfying the requirements for termination benefits or dies after attaining age 65, and has been married for at least the one year prior to death.

Benefit prior to early retirement

50% of the Accrued Benefit payable at the employee's earliest retirement date with reductions for early retirement and Form of Benefit.

Benefit after early but before normal retirement

100% of the benefit the employee would have received had he retired (without reduction for early commencement) and elected the 100% Joint and Survivor Annuity Option. Also eligible after attainment of age 50 with 15 years of Service.

Benefit after normal retirement

If an employee dies while active and after attaining age 65, 100% of the benefit the employee would have received had he retired (without reduction for early commencement) and elected the 100% Joint and Survivor Annuity Option.

Forms of benefit

Automatic form for unmarried participants

Life only

Automatic form for married participants

50% joint and survivor

Automatic lump sum if actuarial equivalent of participant's vested accrued benefit is \$1,000 or less or paid with participant's consent if between \$1,000 and \$5,000.

Optional forms

Life only,

Life with 10 years certain,

100%, 75%, or 50% joint and survivor annuity

Small lump sum payment

Optional form conversion factors

Conversion factors use the actuarial equivalence of UP84 mortality setback two years for participants and one year for beneficiaries and 7% interest.

Miscellaneous

Maximum compensation

Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually.

Maximum benefits

Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually

Summary of Changes from the January 1, 2023 Valuation

None.

WOOLRICH, INC. PENSION PLAN

EIN 24-0765400 Plan No.: 002

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

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Units	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
Cash	107	Cash	N/A	\$ 107
		Total savings plan assets		<u>107</u>

(Continued)

* Represents a party-in-interest to the Plan

N/A - Investment is participant directed

WOOLRICH, INC. PENSION PLAN

EIN 24-0765400 Plan No.: 002

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

DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor, or similar party	Units	Description of investment including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
* FIAM 8-10 Yr Crp Bd CP	390,185	Collective Investment Trust	4,819,741	4,674,422
* Fidelity Institutional Asset Management Aorbetter-A	229,259	Collective Investment Trust	5,472,662	5,637,485
* Fidelity Institutional Asset Management Long Duration Pool	345,201	Collective Investment Trust	7,926,739	8,250,308
JP Morgan US Government MM Institutional	249,645	Money market mutual fund	249,645	249,645
JP Morgan Deposit Account B	1,257	Money market mutual fund	1,257	1,257
		Total pension plan assets	<u>18,470,044</u>	<u>18,813,117</u>
		Total plan assets	<u>\$ 18,470,044</u>	<u>\$ 18,813,224</u>

(Concluded)

* Represents a party-in-interest to the Plan

Woolrich, Inc. Pension Plan
EIN / PN: 24-0765400 / 002

Schedule SB, Line 32 – Schedule of Amortization Bases

Date Established	Type Of Base	Years Remaining	Shortfall Amortization Installment	Present Value of Remaining Installments as of January 1, 2024
January 1, 2022	Shortfall	13	198,066	1,968,489
January 1, 2023	Shortfall	14	884,930	9,271,838
January 1, 2024	Shortfall	15	<u>2,959</u>	<u>32,527</u>
Total			\$ 1,085,955	\$ 11,272,854

Woolrich, Inc. Pension Plan

EIN / PN: 24-0765400 / 002

Schedule SB, Line 24 – Change in Actuarial Assumptions

The expected return on plan assets was changed from 4.90% for the return during 2023 to 4.60% for the return during 2024 based on an analysis of expected asset returns, taking into account the plan's investment policy and the current asset allocation and information provided by the Plan's investment consultant.