

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

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final 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 [X] special extension (enter description) TENNESSEE TAX RELIEF 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 NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN 1b Three-digit plan number (PN) 001 1c Effective date of plan 04/30/1984 2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) NYRSTAR CLARKSVILLE INC. 1800 ZINC PLANT ROAD CLARKSVILLE, TN 37040 2b Employer Identification Number (EIN) 52-1056429 2c Plan Sponsor's telephone number 931-552-4200 2d Business code (see instructions) 212200

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	720
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)	51
	6a(2)	50
	6b	386
	6c	169
	6d	605
	6e	101
	6f	706
	6g(1)	
	6g(2)	
h		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 3H 1I

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

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

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

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input checked="" type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> G (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code _____

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

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

A Name of plan <u>NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>NYRSTAR CLARKSVILLE INC.</u>	D Employer Identification Number (EIN) <u>52-1056429</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>35324326</u>
	b Actuarial value	2b	<u>36551732</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>476</u>	<u>24859465</u>
	b For terminated vested participants	<u>193</u>	<u>3541623</u>
	c For active participants	<u>51</u>	<u>2177910</u>
	d Total	<u>720</u>	<u>30578998</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.06 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>195000</u>
	c Target normal cost	6c	<u>195000</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>10/15/2025</u>	Date
	<u>NOEL WHITEHURST</u>	<u>23-08164</u>	Most recent enrollment number
	<u>USI CONSULTING GROUP</u>	<u>629-895-7862</u>	Telephone number (including area code)
	<u>5301 VIRGINIA WAY, SUITE 400 BRENTWOOD, TN 37027</u>		
	Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>15.30</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)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.18</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	119.41 %
15	Adjusted funding target attainment percentage	15	119.41 %
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	115.15 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls							
18 Contributions made to the plan for the plan year by employer(s) and employees:							
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
			Totals ▶	18(b)	0	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 0
20	Quarterly contributions and liquidity shortfalls:	
	a Did the plan have a "funding shortfall" for the prior year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:	
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
(4) 4th		

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

21 Discount rate:

a Segment rates:

1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code) **21b** 4

22 Weighted average retirement age **22** 64

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	31a	195000
b Excess assets, if applicable, but not greater than line 31a	31b	195000

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount

33

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)..... **34** 0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35) **36** 0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) **37** 0

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

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

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

40 Unpaid minimum required contributions for all years **40** 0

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

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

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

A Name of plan NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 NYRSTAR CLARKSVILLE INC.	D Employer Identification Number (EIN) 52-1056429	

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

FIRST AMERICAN

41-1418224

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

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

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

USI CONSULTING GROUP

06-1053228

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 15 17	NONE	76525	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)

GLOBAL RETIREMENT PARTNERS

47-1411118

(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	NONE	34590	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)

US BANK

31-0841368

(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?
19 21 24 28	NONE	20000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

NOTTINGHAM ADVISORS

16-1133372

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	NONE	15165	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: KRAFTCPAS, PLLC	b EIN: 62-0713250
c Position: AUDITOR	
d Address: 555 GREAT CIRCLE ROAD NASHVILLE, TN 37228	e Telephone: 615-242-4351

Explanation: KRAFTCPAS, PLLC MERGED WITH BAKER TILLY US, LLP EFFECTIVE AUGUST 1, 2025

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
A Name of plan <u>NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NYRSTAR CLARKSVILLE INC.</u>	D Employer Identification Number (EIN) <u>52-1056429</u>

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a 0	0
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1) 0	0
(2) Participant contributions	1b(2)	
(3) Other	1b(3) 85901	118726
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1) 4232374	13788297
(2) U.S. Government securities	1c(2) 4020120	1653239
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A) 337804	553029
(B) All other	1c(3)(B) 1129294	2292764
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(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) 25000813	17975199
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15) 518020	792889

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	35324326	37174143
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	35324326	37174143

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	297758	
(B) U.S. Government securities.....	2b(1)(B)	196987	
(C) Corporate debt instruments.....	2b(1)(C)	112463	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	31631	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		638839
(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)	469031	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		469031
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	3363524	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	3426524	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-63000
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-250373	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-250373

		(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)		3592737
c Other income	2c		22298
d Total income. Add all income amounts in column (b) and enter total.....	2d		4409532

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2341018	
(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)		2341018
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	49755	
(6) Bank or trust company trustee/custodial fees	2i(6)	20000	
(7) Actuarial fees	2i(7)	76525	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	72417	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		218697
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		2559715

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1849817
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: **BAKER TILLY US, LLP**

(2) EIN: **30-1413443**

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		3000000
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 0.

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 551693.

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

A Name of plan <u>NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NYRSTAR CLARKSVILLE INC.</u>	D Employer Identification Number (EIN) <u>52-1056429</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): 31-0841368

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		1
---	--	---

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 _____.

NYRSTAR CLARKSVILLE INC.
SALARIED EMPLOYEES' RETIREMENT PLAN

FINANCIAL STATEMENTS,

SUPPLEMENTAL SCHEDULES

AND INDEPENDENT AUDITORS' REPORT

DECEMBER 31, 2024 AND 2023

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

FINANCIAL STATEMENTS,

SUPPLEMENTAL SCHEDULES

AND INDEPENDENT AUDITORS' REPORT

DECEMBER 31, 2024 AND 2023

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All other supplemental schedules ordinarily required by the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable to this plan for the audit years addressed in the Independent Auditor's Report.

INDEPENDENT AUDITORS' REPORT

The Pension Committee acting as the Plan Administrator and Plan Participants
Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan
Clarksville, Tennessee

SCOPE AND NATURE OF THE ERISA SECTION 103(a)(3)(C) AUDIT OF THE 2024 FINANCIAL STATEMENTS

We have performed an audit of the financial statements of the Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan (the "Plan"), an employee benefit plan subject to 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 statement of net assets available for benefits as of December 31, 2024, the related statement of changes in net assets available for benefits for the year then ended, the statement of accumulated plan benefits as of December 31, 2023, and the related statement of changes in accumulated plan benefits for the year December 31, 2023 ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's 2024 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from the qualified institutions as of and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 4 to the 2024 financial statements, is complete and accurate.

OPINION ON THE 2024 FINANCIAL STATEMENTS

In our opinion, based on our audit and on procedures performed as described in the Auditors' Responsibilities for the Audit of the 2024 Financial Statements section:

- The amounts and disclosures in the 2024 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America ("GAAP").
- The information in the 2024 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Baker Tilly Advisory Group, LP and Baker Tilly US, LLP, trading as Baker Tilly, are members of the global network of Baker Tilly International Ltd., the members of which are separate and independent legal entities. Baker Tilly US, LLP is a licensed CPA firm that provides assurance services to its clients. Baker Tilly Advisory Group, LP and its subsidiary entities provide tax and consulting services to their clients and are not licensed CPA firms.

BASIS FOR OPINION ON THE 2024 FINANCIAL STATEMENTS

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (“GAAS”). Our responsibilities under those standards are further described in the Auditors’ Responsibilities for the Audit of the 2024 Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion on the 2024 financial statements.

SUBSTANTIAL DOUBT ABOUT THE PLAN’S ABILITY TO CONTINUE AS A GOING CONCERN

The accompanying financial statements have been prepared assuming that the Plan will continue as a going concern. As discussed in Notes 2 and 6 to the financial statements, the Board of Directors of the Plan Sponsor, decided on August 27, 2025, to terminate the Plan effective October 31, 2025, which indicates that the Plan is not a going concern. The financial statements do not include any adjustments that might be necessary upon termination. Our opinion is not modified with respect to that matter.

RESPONSIBILITIES OF MANAGEMENT FOR THE 2024 FINANCIAL STATEMENTS

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

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

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

AUDITOR’S RESPONSIBILITIES FOR THE AUDIT OF THE 2024 FINANCIAL STATEMENTS

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2024 Financial Statements 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 certifications, comparing the certified investment information with the related information presented and disclosed in the 2024 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2024 financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

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

OTHER MATTERS

2024 SUPPLEMENTAL SCHEDULES REQUIRED BY ERISA

The supplemental schedules Schedule H, Line 4i – Schedule of Assets (Held at End of Year) and Schedule H, Line 4j Schedule of Reportable Transactions for the year ended December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

AUDITORS' REPORT ON THE 2023 FINANCIAL STATEMENTS

Predecessor auditors performed an audit of the 2023 financial statements of the Plan. In accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the prior year audit did not extend to any statements or information related to assets held for investment of the Plan that were certified by a qualified institution. Their report dated October 2, 2024 indicated that (a) the amounts and disclosures in the 2023 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 2023 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C). Their report also indicated that the form and content of the 2023 supplemental schedules, other than the information in the 2023 supplemental schedules that agreed to or is derived from the certified investment information, were presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2023 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).

Baker Tilly US, LLP

Nashville, Tennessee
November 3, 2025

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at fair value	\$ 37,055,417	\$ 35,238,425
Accrued interest receivable	<u>118,726</u>	<u>85,901</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 37,174,143</u>	<u>\$ 35,324,326</u>

See accompanying notes to financial statements

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Investment income:		
Net appreciation in fair value of investments	\$ 3,301,662	\$ 4,018,023
Interest and dividend income	<u>1,107,870</u>	<u>918,260</u>
Total investment income	<u>4,409,532</u>	<u>4,936,283</u>
TOTAL ADDITIONS	<u>4,409,532</u>	<u>4,936,283</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid	2,341,018	2,298,212
Administrative fees	<u>218,697</u>	<u>269,539</u>
TOTAL DEDUCTIONS	<u>2,559,715</u>	<u>2,567,751</u>
NET INCREASE	1,849,817	2,368,532
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>35,324,326</u>	<u>32,955,794</u>
End of year	<u>\$ 37,174,143</u>	<u>\$ 35,324,326</u>

See accompanying notes to financial statements

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

STATEMENT OF ACCUMULATED PLAN BENEFITS

DECEMBER 31, 2023

Actuarial present value of accumulated plan benefits:

Vested benefits:

Active, terminated and transferred employees not presently
receiving benefits

\$ 4,611,040

Retirement participants and beneficiaries currently receiving benefits

21,523,032

26,134,072

Nonvested benefits

25,473

Total actuarial present value of accumulated plan benefits

\$ 26,159,545

See accompanying notes to financial statements

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

STATEMENT OF CHANGES IN ACCUMULATED PLAN BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2023

Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 26,761,652</u>
Increase (decrease) during the year attributable to:	
Increase for interest due to decrease in discount period	1,794,239
Benefits paid	(2,298,212)
Benefits accumulated	<u>(98,134)</u>
Net decrease	<u>(602,107)</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 26,159,545</u></u>

See accompanying notes to financial statements

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

NOTE 1 - DESCRIPTION OF PLAN

The following brief description of the Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information on the Plan's provisions.

General

The Plan is a non-contributory defined benefit pension plan covering all salaried, non-bargaining unit hourly employees, and all bargaining unit employees of Nyrstar Clarksville Inc. (the "Employer" or "Plan Sponsor") who are members of the United Steel Workers of America, Local Union No. 8413, and who had completed at least one year and 1,000 hours of service with Nyrstar Clarksville Inc., and certain of its affiliated and/or predecessor companies (the "Employer" or "Plan Sponsor"). It is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"). The Board of Directors is responsible for oversight of the Plan. The Pension Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance and reports to the Plan's Board of Directors.

On December 31, 2021, the Board of Directors of the Plan consented to merge all plan assets and accumulated plan benefits of The Pension Plan of Nyrstar Clarksville Inc. for Bargaining Unit Employees (Members of the United Steel Workers of America, Local Union No. 8413) and Nyrstar Clarksville Inc. Hourly Employees' Pension Plan into the Plan. The merged plans' provisions will continue to apply to participants covered by each plan until the Plan can be amended and restated to incorporate terms of each plan.

Freezing of Plan

On December 30, 2008, the Board of Directors of Nyrstar Clarksville Inc., acting as the Pension Committee and Plan Administrator, elected to freeze the participation and benefit accruals under the Plan effective January 31, 2009. Plan participants as of that date are eligible to continue to earn vesting service, eligibility service and service used for special early retirement benefit eligibility.

Contributions

Contributions by participants are not permitted. Contributions by the Employer are designed to fund the Plan's current service costs on a current basis and are based on amounts required to be funded under provisions of ERISA. The yield (interest and dividend income and net realized and unrealized gains and losses) on investments of the Plan serves to reduce or increase future contributions that would otherwise be required to provide for the defined level of benefits under the Plan. The Employer met the minimum funding requirements of ERISA in 2024 and 2023.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

Pension Benefits – Salaried Participants

Participants with five or more years of participation in the Plan are entitled to annual pension benefits beginning at normal retirement age (65) equal to 1.5% of their average monthly earnings multiplied by total years of service (not to exceed 40 years) less 1.25% of their Social Security benefit multiplied by total years of service (not to exceed 40 years). The minimum monthly normal retirement benefit is 1.25% of average monthly earnings (not to exceed \$1,400), multiplied by total years of service. In addition, there are minimum monthly benefit calculations for employees who were participants in either the New Jersey Zinc Company Plan or the Marquette Company Retirement Plan for Salaried Employees on December 31, 1978. Participants of the New Jersey Zinc Company Plan are entitled, at a minimum, to the greater of (i) 1% of average monthly earnings (not in excess of the basic average monthly compensation ranging from \$488 to \$1,000), plus 1.25% of average monthly earnings in excess of the basic average monthly compensation, multiplied by the total years of service, or (ii) 1.5% of average monthly earnings (not to exceed \$650), multiplied by total years of service. Participants in the Marquette Company Retirement Plan for Salaried Employees are entitled, at a minimum, to the greater of (i) 1.8% of average monthly earnings less 2% of their monthly Social Security benefit, multiplied by total years of service (not to exceed 25 years), or (ii) the greater of 0.9% of average monthly earnings multiplied by total years of service or \$15.50 multiplied by total years of service. "Average earnings" is defined as the average annual compensation of a participant for the 60 consecutive-month period which produces the highest annual average during the 120-month period prior to termination of employment.

The Plan permits early retirement at the age of 55 and completion of ten years of service. In such event, the participant's benefit shall be reduced by 0.35% for each month that the benefit commencement date precedes the normal retirement date. The Plan also provides for payments, under certain conditions, relating to the disability or death of the participant.

Participants who terminate before rendering five years of service forfeit the right to receive their accumulated plan benefits.

Pension Benefits – Hourly Participants

A partial plan termination occurred in 2004 following a location closing. As a result, all accumulated benefits of the affected employees were fully vested as of their employment termination date.

Participants employed on or after January 1, 2000, with five or more years of service are entitled to a monthly benefit beginning at normal retirement age (65) equal to \$14 times the number of years of benefit service prior to January 1, 1985, plus \$24 times the number of years of benefit service after December 31, 1984.

The Plan permits early retirement at the age of 55 and completion of ten years of service. The early retirement benefit shall be reduced based on whether the participant selects an immediate or deferred benefit under Plan provisions. The Plan also provides for payments, under certain conditions, relating to the disability or death of the participant.

Participants who terminate employment before rendering five years of service forfeit the right to receive the portion of their accumulated plan benefits attributable to the Employer's contributions.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

Pension Benefits – Bargaining Unit Employee Participants

During 2003, all eligible employees in the Plan were terminated by the Employer, resulting in a partial Plan termination. As a result, all accumulated benefits of the affected employees became fully vested as of their employment termination date. Prior to January 1, 2003, if employees terminated before rendering five years of service, they forfeited the right to receive the portion of their accumulated plan benefits attributable to the Employer's contributions.

A participant shall have the right to retire on the later of the date the participant reaches age 65 or completes five years of service. The amount of retirement benefit, payable monthly, is computed as follows:

A. Special Initial Pension

The Special Initial Pension is a one-time special pension payment made in lieu of the participant's first three months of pension payments and is equal to 520 times the amount of the participant's basic hourly rate of pay in effect immediately prior to his retirement date. It is payable as of the first day of the month following a participant's retirement or termination.

B. Regular Pension

The Regular Pension is a monthly retirement benefit payable to participants who were in the employment of the Employer on or after August 1, 1998, in accordance with the applicable provisions of the Plan, as summarized below:

1. \$13.00 per month multiplied by the first 15 years of continuous service for the first 15 years of service prior to January 1, 1988; plus
2. \$14.00 per month multiplied by the 16th through the 30th years of continuous service prior to January 1, 1988; plus
3. \$15.00 per month multiplied by each year of continuous service over 30 years prior to January 1, 1988; plus
4. a) if employed on or after September 1, 2002, \$24.00 per month multiplied by the number of years of continuous service after December 31, 1987; or
b) for participants who terminated before September 1, 2002, \$23.00 per month multiplied by the number of years of continuous service after December 31, 1987.

Participants may elect to receive early retirement benefits after age 55 and the completion of ten years of service or after the completion of 30 years of service regardless of age. In such event, the participant's vested benefit shall be reduced, depending on the form of payment option selected, for each month that the benefit commencement date precedes his normal retirement date. The Plan also provides for payments, under certain conditions, relating to the disability or death of the participant.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

Death and Disability Benefits

In the event of a participant's death before his benefits commence, the benefit will be paid to his beneficiary based on the provisions of the Plan document.

A participant who is permanently disabled will receive at age 65 his accrued benefit based on his average monthly compensation and credited service as if he had been employed to normal retirement age with the same monthly compensation as he was earning at the time he became disabled.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

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

Administrative Fees

Fees paid to the Plan's actuary, recordkeeper, U.S. Bank National Association (the "Trustee"), and insurance premiums paid to the Pension Benefit Guaranty Corporation ("PBGC") are paid out of Plan assets. Investment related expenses are included in the net appreciation in fair value of investments. The Employer may elect to pay certain administrative costs of the Plan.

Investment Valuation and Income Recognition

Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan determines the valuation policies utilizing information provided by the investment advisors and Trustee. See Note 5 for discussion of fair value measurements.

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

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, attributable, under the Plan's provisions, to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or their beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries.

Benefits under the Plan are calculated based on Plan provisions. Benefits payable under all circumstances (retirement, death, disability and termination of employment) are included to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided through annuity contracts excluded from Plan assets are also excluded from accumulated plan benefits.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

The actuarial present value of accumulated plan benefits is calculated by applying actuarial assumptions to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment. The present value of vested benefits (benefits to which participants are entitled regardless of future service with the Employer) and non-vested benefits (benefits which may be reasonably expected to be paid to participants for services already rendered) was calculated by the Plan's consulting actuary as of January 1, 2024. Had the valuation been performed as of December 31, 2023, there would be no material differences.

The more significant assumptions underlying the actuarial computations are as follows:

Interest rate	7.00%
Mortality	Pri-2012 Total Dataset Morality Table
Normal retirement	Age 65 and completion of 5 years of service or attained age, if greater

The foregoing actuarial assumptions are based on the presumption that the Plan would continue. As discussed in the Events Occurring After Reporting Date section of Note 2, on August 27, 2025, the Board of Directors of the Plan Sponsor made the decision to terminate the Plan and anticipates that the Plan will liquidate the Plan during 2025. When a Plan terminates, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The impact on the actuarial present value of accumulated plan benefits, taking into consideration the impact of the termination decision, have not been determined at this time.

Payment of Benefits

Benefit payments are recognized in the year paid.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Accordingly, actual results could differ from those estimates.

Events Occurring After Reporting Date

The Plan has evaluated events and transactions that occurred between December 31, 2024 and November 3, 2025, the date the financial statements were available to be issued, for possible recognition or disclosure in the financial statements.

On August 27, 2025, the Board of Directors of the Plan Sponsor elected to terminate the plan effective October 31, 2025. On August 29, 2025, the Employer notified participants of its intentions to terminate. Upon termination, all assets remaining in the Plan will be distributed to the participants subject to the applicable requirements of ERISA and in accordance with the provisions of the plan document.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

On September 19, 2025, an application was filed with the Internal Revenue Service (IRS) for an advance determination as to whether the Plan meets the qualification requirements of section 401 of the Internal Revenue Code of 1986, with respect to the Plan's termination. Participants were notified on October 3, 2025 that an election on distribution method needs to be made by November 20, 2025.

NOTE 3 - FUNDING POLICY

The Employer's funding policy is to contribute for each Plan year the amount required by ERISA to meet the minimum funding standard.

The Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA (see Note 6 and Note 8).

NOTE 4 - INFORMATION CERTIFIED BY THE TRUSTEE

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplementary information, including investments held at December 31, 2024 and 2023, and investment income for the years ended December 31, 2024 and 2023, was obtained by management and agreed to or derived from information certified by U.S. Bank National Association, the Trustee of the Plan.

NOTE 5 - FAIR VALUE MEASUREMENTS

The Plan classifies its investments based on a hierarchy consisting of: Level 1 (valued using quoted prices from active markets for identical assets), Level 2 (not traded on an active market but for which observable market inputs are readily available), and Level 3 (valued based on significant unobservable inputs). The asset's 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 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:

Short-term investments (money market fund, exchange traded funds, and mutual funds)- These investments are valued at the closing price reported on the active market on which the individual funds are traded.

Fixed income investments (U.S. government issues, corporate issues, and municipal issues) - Securities for which quotations are readily available in active markets are valued at the most recent quote in the principal market in which such securities are normally traded. These investments also include securities valued on the basis of information provided by pricing services that employ valuation matrices that may incorporate both broker/dealer-supplied valuations as well as valuation models reflecting such factors as benchmark yields, reported trades, broker/dealer quotes, bid/offer data and other relevant elements.

There have been no changes in the valuation methodologies used at December 31, 2024 and 2023.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

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 Administrator believes the valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table sets forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>2024</u>				
Money market funds	\$ 13,788,297	\$ -	\$ -	\$ 13,788,297
Exchange traded funds	6,699,218	-	-	6,699,218
Mutual funds	-	11,275,981	-	11,275,981
U.S. government bonds	988,539	664,700	-	1,653,239
Corporate bonds	-	2,845,793	-	2,845,793
Municipal bonds	-	792,889	-	792,889
Investments at fair value	<u>\$ 21,476,054</u>	<u>\$ 15,579,363</u>	<u>\$ -</u>	<u>\$ 37,055,417</u>
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>2023</u>				
Money market funds	\$ 4,232,374	\$ -	\$ -	\$ 4,232,374
Exchange traded funds	4,998,182	-	-	4,998,182
Mutual funds	-	20,002,631	-	20,002,631
U.S. government bonds	2,314,441	1,705,679	-	4,020,120
Corporate bonds	-	1,467,097	-	1,467,097
Municipal bonds	-	518,021	-	518,021
Investments at fair value	<u>\$ 11,544,997</u>	<u>\$ 23,693,428</u>	<u>\$ -</u>	<u>\$ 35,238,425</u>

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

NOTE 6 - PLAN TERMINATION AND GOING CONCERN

In the event the Plan terminates, participants will become 100% vested in their pension benefits and the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

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

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. For Plan terminations occurring during 2024, that ceiling is \$7,108 per month. The ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or Plan termination (whichever comes later). For younger annuitants or those who elect to receive their benefits in some form more valuable than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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

As disclosed in Note 2, on August 27, 2025, the Board of Directors of the Plan Sponsor made the decision to terminate the Plan effective October 31, 2025. These circumstances indicate the Plan is not a going concern. The financial statements do not include any adjustments that might be necessary upon termination.

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

NOTE 7 - TRANSACTIONS WITH PARTIES-IN-INTEREST

Parties-in-interest are defined under United States Department of Labor Regulations as any fiduciary of the Plan, any party rendering service to the Plan, the Employer and certain others. The Plan pays Trustee fees. These transactions qualify as party-in-interest. These transactions are covered by exemptions from the prohibited transactions provisions of ERISA and the Internal Revenue Code (the "Code").

Certain administrative functions of the Plan are performed by officers of employees of the Employer. No such officer or employee received compensation from the Plan.

The Plan incurs expenses related to general administration and recordkeeping. These expenses and certain professional fees are also exempt transactions.

NOTE 8 - RISKS AND UNCERTAINTIES

The Plan invests in various securities that are exposed to risks such as interest rate, market and credit risk. Because of 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 those changes could materially affect the amounts reported in the Plan's financial statements.

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

At December 31, 2024 and 2023, the Plan had a concentration of investments in one and five funds, which represented approximately 37% and 63% of total investments, respectively.

NOTE 9 - TAX STATUS

The Plan Sponsor received its latest determination letter from the Internal Revenue Service ("IRS") on October 16, 2015, on the amended and restated document which was effective January 1, 2015. In that letter, the IRS stated that the Plan, as then designed, was in accordance with the applicable requirements of the Code. The Plan has not applied for a separate determination letter.

The Plan administrator and the Plan's tax counsel believe the Plan is designed and has been operated in compliance with the applicable requirement of the Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax asset or liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS.

SUPPLEMENTAL SCHEDULES

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	MONEY MARKET FUNDS: First American Funds	Government Obligations Fund	\$ 13,788,297	\$ 13,788,297
	EXCHANGE TRADED FUNDS:			
	Ishares	Russell Midcap Value Index Fund	\$ 548,706	\$ 1,003,420
	Ishares	Russell Midcap Growth Index Fund	280,918	1,012,986
	JP Morgan	JP Morgan Equity Premium Income ETF	915,033	920,480
	Vanguard	Vanguard Small-Cap Growth ETF	840,595	1,120,240
	Vanguard	Vanguard Small-Cap Value ETF	815,368	990,900
	Janus Henderson	AAA CLO ETF	1,309,287	1,305,783
	Janus Henderson	Securitized ETF	155,190	155,430
	PIMCO	Enhanced Low Duration Active ETF	190,640	189,980
	TOTAL EXCHANGE TRADED FUNDS		<u>5,055,738</u>	<u>6,699,218</u>
	MUTUAL FUNDS:			
	Artisan	Artisan International Value Fund	\$ 1,465,743	\$ 1,965,268
	Hartford Mutual Funds, Inc.	Hartford Dividend and Growth Fund Class F	2,314,044	2,921,151
	JP Morgan	JP Morgan Large Cap Growth Fund	1,114,216	1,944,802
	Vanguard	Vanguard Institutional Index Fund	807,007	2,158,076
	PIMCO	PIMCO Income Fund Institutional Class	2,293,992	2,286,684
	TOTAL MUTUAL FUNDS		<u>7,995,003</u>	<u>11,275,981</u>
	U.S. GOVERNMENT BONDS:			
	Federal Farm Credit Banks	Domestic bond, due 4/2/2040, 3.490%, face value \$100,000	\$ 88,890	\$ 81,744
	Federal Farm Credit Banks	Domestic bond, due 10/15/2049, 2.625%, face value \$250,000	168,266	161,013
	Federal Farm Credit Banks	Domestic bond, due 3/7/2039, 2.750%, face value \$30,000	23,339	23,260
	Federal Farm Credit Banks	Domestic bond, due 4/20/2038, 5.350%, face value \$100,000	100,314	100,371
	Federal Farm Credit Banks	Domestic bond, due 5/08/2043, 5.840%, face value \$250,000	250,000	247,830
	Federal Farm Credit Banks	Domestic bond, due 10/04/2038, 5.660%, face value \$50,000	49,799	50,482

(continued on next page)

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	U.S. GOVERNMENT BONDS (continued):			
	U.S. Treasury	Domestic bond, due 2/15/2029, 3.500%, face value \$200,000	197,736	175,302
	U.S. Treasury	Domestic bond, due 5/15/2044, 3.375%, face value \$100,000	92,457	81,047
	U.S. Treasury	Domestic bond, due 2/15/2045, 2.500%, face value \$450,000	365,878	312,219
	U.S. Treasury	Domestic bond, due 11/15/2042, 4.000%, face value \$300,000	296,999	269,934
	U.S. Treasury	Domestic bond, due 12/31/2025, 4.250%, face value \$150,000	150,053	150,038
	TOTAL U.S. GOVERNMENT BONDS		<u>1,783,732</u>	<u>1,653,239</u>
	CORPORATE BONDS:			
	Atria Group	Subordinated corporate bond, due 9/16/2046, 3.875%, face value \$100,000	\$ 76,959	\$ 72,478
	CVS Caremark	Subordinated corporate bond, due 6/1/2063, 6.000%, face value \$150,000	149,973	136,806
	Church Dwight	Subordinated corporate bond, due 8/01/2047, 3.950%, face value \$175,000	147,254	134,972
	Church Dwight	Subordinated corporate bond, due 6/15/2052, 5.000%, face value \$200,000	187,979	180,864
	Clorox Company	Subordinated corporate bond, due 5/1/2032, 4.600%, face value \$150,000	152,302	146,658
	Duke Energy	Subordinated corporate bond, due 8/15/2047, 3.950%, face value \$50,000	39,377	37,204
	Duke Energy	Subordinated corporate bond, due 8/15/2052, 5.000%, face value \$50,000	45,577	43,635
	Duke Energy	Subordinated corporate bond, due 6/01/2045, 3.750%, face value \$50,000	40,603	38,263
	Ebay Inc	Subordinated corporate bond, due 7/15/2042, 4.000%, face value \$50,000	41,065	39,758
	Ecolab Inc	Subordinated corporate bond, due 11/1/2046, 3.700%, face value \$95,000	72,892	69,855
	Ecolab Inc	Subordinated corporate bond, due 8/15/2050, 2.125%, face value \$250,000	153,953	133,980
	Federal Home	Subordinated corporate bond, due 3/30/2033, 5.290%, face value \$100,000	101,844	100,721
	Gatx Corporation	Subordinated corporate bond, due 6/1/2051, 3.100%, face value \$200,000	127,139	126,344
	General Mills	Subordinated corporate bond, due 2/1/2051, 3.000%, face value \$200,000	136,915	126,542
	Home Depot	Subordinated corporate bond, due 6/25/2064, 5.400%, face value \$100,000	100,415	95,854
	Intel Corporation	Subordinated corporate bond, due 8/12/2041, 2.800%, face value \$100,000	68,708	63,788
	JP Morgan	Subordinated corporate bond, due 2/1/2044, 4.850%, face value \$250,000	239,325	230,078
	Kimberly Clark Corporation	Subordinated corporate bond, due 7/30/2046 3.200%, face value \$125,000	89,770	88,114
	Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$375,000	261,719	253,129
	Oracle Corporation	Subordinated corporate bond, due 4/01/2050, 3.600%, face value \$100,000	70,810	70,061
	Oracle Corporation	Subordinated corporate bond, due 7/15/2040, 5.375%, face value \$150,000	155,021	144,425
	Phillip Morris International	Subordinated corporate bond, due 11/17/2032, 5.750%, face value \$50,000	52,096	51,413
	Smucker J M Company	Subordinated corporate bond, due 11/15/2053, 6.500%, face value \$150,000	174,315	160,905
	Southern Gas Company	Subordinated corporate bond, due 5/30/2047, 4.400%, face value \$150,000	126,456	122,933
	Sysco Corporation	Subordinated corporate bond, due 7/15/2026, 3.300%, face value \$150,000	147,245	146,897
	Xcel Energy Inc	Subordinated corporate bond, due 9/15/2041, 4.800%, face value \$35,000	30,993	30,119
	TOTAL CORPORATE BONDS		<u>2,990,706</u>	<u>2,845,793</u>

(continued on next page)

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	MUNICIPAL ISSUES:			
	Bexar County Texas	Domestic bond, due 6/15/2040, 2.156%, face value \$250,000	\$ 174,103	\$ 166,770
	Dallas Texas	Domestic bond, due 10/01/2042, 2.822%, face value \$35,000	26,103	24,752
	New York State	Domestic bond, due 3/15/2027, 1.538%, face value \$15,000	14,002	14,081
	Oregon State	Domestic bond, due 8/1/2053, 5.152%, face value \$225,000	225,533	216,992
	Virginia State	Domestic bond, due 7/1/2038, 5.830%, face value \$75,000	75,000	75,261
	Virginia State	Domestic bond, due 10/1/2044, 5.750%, face value \$100,000	99,696	98,167
	Virginia State	Domestic bond, due 10/1/2054, 5.903%, face value \$200,000	202,234	196,866
	TOTAL MUNICIPAL BONDS		816,671	792,889
	TOTAL INVESTMENTS		<u>\$ 32,430,147</u>	<u>\$ 37,055,417</u>

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
<i>Single transactions, exceeding 5% of value:</i>								
Artisan	Artisan International Value Fund	\$ -	\$ 1,882,801	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 4,600,000	\$ -	\$ -	\$ -	\$ 4,600,000	\$ 4,600,000	\$ -
First American Funds	First American Government Obligations Fund	\$ 7,333,133	\$ -	\$ -	\$ -	\$ 7,333,133	\$ 7,333,133	\$ -
Vanguard	Vanguard Institutional Index Fund	\$ -	\$ 2,000,000	\$ -	\$ -	\$ 790,520	\$ 2,000,000	\$ 1,209,480
<i>Series of transactions with same broker exceeds 5% of value:</i>								
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 349,970	\$ -	\$ -	\$ -	\$ 349,970	\$ 349,970	\$ -
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 237,114	\$ -	\$ -	\$ -	\$ 237,114	\$ 237,114	\$ -
Ishares	Ishares Russell Mid Cap ETF	\$ -	\$ 951,831	\$ -	\$ -	\$ 352,783	\$ 951,831	\$ 599,048
Alerian	Alerian MLP ETF	\$ -	\$ 344,262	\$ -	\$ -	\$ 302,037	\$ 344,262	\$ 42,225
US Treasury	Domestic bond, due 4/30/2024, 2.250%, face value \$50,000	\$ -	\$ 49,632	\$ -	\$ -	\$ 49,714	\$ 49,632	\$ (82)
Federal Farm Credit Banks	Domestic bond, due 10/15/2049, 2.625%, face value \$250,000	\$ 166,760	\$ -	\$ -	\$ -	\$ 166,760	\$ 166,760	\$ -
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$125,000	\$ -	\$ 114,860	\$ -	\$ -	\$ 119,184	\$ 114,860	\$ (4,324)
Federal Farm Credit Banks	Domestic bond, due 3/7/2039, 2.750%, face value \$30,000	\$ 23,064	\$ -	\$ -	\$ -	\$ 23,064	\$ 23,064	\$ -
Xcel Energy Inc	Subordinated corporate bond, due 9/15/2041, 4.800%, face value \$35,000	\$ 30,876	\$ -	\$ -	\$ -	\$ 30,876	\$ 30,876	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 7/30/2046 3.200%, face value \$125,000	\$ 89,229	\$ -	\$ -	\$ -	\$ 89,229	\$ 89,229	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 11/1/2028 3.950%, face value \$100,000	\$ -	\$ 96,231	\$ -	\$ -	\$ 99,241	\$ 96,231	\$ (3,010)
US Treasury	Domestic bond, due 11/1/2028, 3.950%, face value \$100,000	\$ -	\$ 103,224	\$ -	\$ -	\$ 107,565	\$ 103,224	\$ (4,341)
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$75,000	\$ -	\$ 67,020	\$ -	\$ -	\$ 71,639	\$ 67,020	\$ (4,619)
Ecolab Inc	Subordinated corporate bond, due 1/15/2028 5.250%, face value \$100,000	\$ -	\$ 100,797	\$ -	\$ -	\$ 102,777	\$ 100,797	\$ (1,980)
Gatx Corporation	Subordinated corporate bond, due 6/1/2051, 3.100%, face value \$200,000	\$ 126,490	\$ -	\$ -	\$ -	\$ 126,490	\$ 126,490	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$250,000	\$ 171,275	\$ -	\$ -	\$ -	\$ 171,275	\$ 171,275	\$ -
Home Depot	Subordinated corporate bond, due 6/25/2064, 5.400%, face value \$100,000	\$ 100,420	\$ -	\$ -	\$ -	\$ 100,420	\$ 100,420	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$125,000	\$ 89,505	\$ -	\$ -	\$ -	\$ 89,505	\$ 89,505	\$ -
Oracle Corporation	Subordinated corporate bond, due 7/15/2040, 5.375%, face value \$150,000	\$ 155,070	\$ -	\$ -	\$ -	\$ 155,070	\$ 155,070	\$ -
Ecolab Inc	Subordinated corporate bond, due 8/15/2050, 2.125%, face value \$250,000	\$ 153,398	\$ -	\$ -	\$ -	\$ 153,398	\$ 153,398	\$ -
Smucker J M Company	Subordinated corporate bond, due 11/15/2053, 6.500%, face value \$150,000	\$ 174,405	\$ -	\$ -	\$ -	\$ 174,405	\$ 174,405	\$ -
Clorox Company	Subordinated corporate bond, due 5/1/2032, 4.600%, face value \$150,000	\$ 152,372	\$ -	\$ -	\$ -	\$ 152,372	\$ 152,372	\$ -
Intel Corporation	Subordinated corporate bond, due 8/12/2041, 2.800%, face value \$100,000	\$ 68,450	\$ -	\$ -	\$ -	\$ 68,450	\$ 68,450	\$ -
General Mills	Subordinated corporate bond, due 2/1/2051, 3.000%, face value \$200,000	\$ 136,648	\$ -	\$ -	\$ -	\$ 136,648	\$ 136,648	\$ -
CVS Caremark	Subordinated corporate bond, due 6/1/2063, 6.000%, face value \$150,000	\$ 149,955	\$ -	\$ -	\$ -	\$ 149,955	\$ 149,955	\$ -
Atlria Group	Subordinated corporate bond, due 9/16/2046, 3.875%, face value \$100,000	\$ 76,840	\$ -	\$ -	\$ -	\$ 76,840	\$ 76,840	\$ -
US Treasury	Domestic bond, due 5/15/2051, 2.375%, face value \$500,000	\$ -	\$ 337,590	\$ -	\$ -	\$ 381,209	\$ 337,590	\$ (43,619)
US Treasury	Domestic bond, due 8/15/2045, 2.875%, face value \$500,000	\$ -	\$ 391,290	\$ -	\$ -	\$ 426,394	\$ 391,290	\$ (35,104)
US Treasury	Domestic bond, due 12/31/2025, 4.250%, face value \$150,000	\$ 150,056	\$ -	\$ -	\$ -	\$ 150,056	\$ 150,056	\$ -
Sysco Corporation	Subordinated corporate bond, due 7/15/2026, 3.300%, face value \$150,000	\$ 146,925	\$ -	\$ -	\$ -	\$ 146,925	\$ 146,925	\$ -
Ecolab Inc	Subordinated corporate bond, due 11/1/2046, 3.700%, face value \$95,000	\$ 72,807	\$ -	\$ -	\$ -	\$ 72,807	\$ 72,807	\$ -
US Treasury	Domestic bond, due 2/15/2053, 3.500%, face value \$290,000	\$ -	\$ 245,007	\$ -	\$ -	\$ 278,015	\$ 245,007	\$ (33,008)
<i>Series of transactions involving securities of the same issue:</i>								
Artisan	Artisan International Value Fund	\$ 101,174	\$ -	\$ -	\$ -	\$ 101,174	\$ 101,174	\$ -
Artisan	Artisan International Value Fund	\$ -	\$ 1,310,817	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 13,330,790	\$ -	\$ -	\$ -	\$ 13,330,790	\$ 13,330,790	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 3,805,281	\$ -	\$ -	\$ 3,805,281	\$ 3,805,281	\$ -
First American Funds	First American Government Obligations Fund	\$ 2,276,153	\$ -	\$ -	\$ -	\$ 2,276,153	\$ 2,276,153	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 2,245,736	\$ -	\$ -	\$ 2,245,736	\$ 2,245,736	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ 323,567	\$ -	\$ -	\$ -	\$ 323,567	\$ 323,567	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ -	\$ 2,500,000	\$ -	\$ -	\$ 1,733,987	\$ 2,500,000	\$ 766,013
JP Morgan	JP Morgan Large Cap Growth Fund	\$ -	\$ 3,100,000	\$ -	\$ -	\$ 1,885,784	\$ 3,100,000	\$ 1,214,216
Vanguard	Vanguard Institutional Index Fund	\$ 99,856	\$ -	\$ -	\$ -	\$ 99,856	\$ 99,856	\$ -
Vanguard	Vanguard Institutional Index Fund	\$ -	\$ 4,500,000	\$ -	\$ -	\$ 1,698,785	\$ 4,500,000	\$ 2,801,215

ATTACHMENT TO FORM 5500

SCHEDULE SB, LINE 26 – SCHEDULE OF ACTIVE PARTICIPANT DATA

Plan Name: Nyrstar Clarksville Inc. Salaried Employees' Pension Plan
 EIN: 52-1056429
 PN: 001
 Plan Year: January 1, 2024 – December 31, 2024

Attained Age	Years of Credited Service									
	Under 1	1 – 4	5 – 9	10 – 14	15 – 19	20 – 24	25 – 29	30 – 34	35 – 39	Over 39
Under 25										
25 – 29										
30 – 34		1								
35 – 39		1								
40 – 44		4	2							
45 – 49		1	3	1						
50 – 54		6	4							
55 – 59		2	2	2						
60 – 64		2	3	1	2		3	1		
65 – 69		1	1				1	4		
Over 69			1		1			1		
Total	0	18	16	4	3	0	4	6	0	0

Schedule SB, Part V – Statement of Actuarial Assumptions and Methods

Minimum Funding Annual Interest Rates	24-month segment rates averaged through the end of August 2023 and published in September 2023 (as prescribed by IRC 430) and adjusted to reflect ARPA: <ul style="list-style-type: none"> • Segment 1 (0 – 5 years) 4.75% • Segment 2 (5 to 20 years) 4.87% • Segment 3 (more than 20 years) 5.59% • Effective Interest Rate 5.06%
Maximum Deductible Annual Interest Rates	24-month segment rates averaged through the end of August 2023 and published in September 2023 (as prescribed by IRC 430) as follows: <ul style="list-style-type: none"> • Segment 1 (0 – 5 years) 3.62% • Segment 2 (5 to 20 years) 4.46% • Segment 3 (more than 20 years) 4.52% • Effective Interest Rate 4.41%
Annual Expected Return on Assets	Interest Rate for developing Actuarial Value of Assets; limited to third segment rate 5.74% Rationale: as selected by the Plan Sponsor
PBGC and LDROM Annual Interest Rates	Segment Rates published in January 2024 using the Standard Method (as prescribed by IRC 430) as follows: <ul style="list-style-type: none"> • Segment 1 (0 – 5 years) 5.01% • Segment 2 (5 to 20 years) 5.13% • Segment 3 (more than 20 years) 5.15% • Effective Interest Rate 5.12%
ASC 960 Discount Rate	Discount Rate 7.00% Rationale: as selected by the Plan Sponsor
Salary Scale	Not applicable
Mortality	Funding: IRS Mortality for Funding as provided in Document Number 2023-23267 ASC 960-20: Pri-2012 Total Dataset Mortality Table with generational mortality improvement projected after year 2012 using Scale MP-2021. Rationale: as selected by Plan Sponsor to align with IAS 19 results.



Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan
 Schedule SB, Part V – Statement of Actuarial Assumptions and Methods
 EIN: 52-1056429 PN: 001 Plan Year End: 12-31-2024

Withdrawal Rates (per
1,000 lives)

Salaried

Age	Male and Female (1st year select)	Male and Female (2nd year select)	Male and Female (ultimate)
15	168.40	70.00	66.90
20	171.00	70.40	52.80
25	171.20	70.10	43.20
30	169.20	69.70	35.60
35	164.70	68.70	29.90
40	158.50	66.70	25.70
45	149.80	64.00	22.20
50	138.50	61.50	19.20
55	125.30	58.10	17.30
60	109.70	53.00	15.70
>=65	0.00	0.00	0.00

Hourly

Age	Male and Female (1st year select)	Male and Female (2nd year select)	Male and Female (ultimate)
15	167.00	69.00	65.00
20	170.00	69.00	51.00
25	170.00	69.00	42.00
30	168.00	68.00	34.00
35	163.00	67.00	28.00
40	156.00	65.00	23.00
45	145.00	63.00	18.00
50	128.00	60.00	9.00
55	104.00	57.00	0.00
60	99.00	52.00	5.00
>=65	0.00	0.00	0.00

Bargaining – Not applicable. No active participants.



Disability Rates (per
1,000 lives)

Hourly

<u>Age</u>	<u>Male and Female</u>
15	1.00
20	1.00
25	1.00
30	1.00
35	1.00
40	2.40
45	4.90
50	10.10
55	21.30
60	32.70
>=65	0.00

Salaried and Bargaining – None assumed

Recovery/Death Rate
for ASC 960 – 1965
Railroad Retirement
System (per 1,000
lives)

Hourly

<u>Age</u>	<u>Male and Female</u>	<u>Age</u>	<u>Male and Female</u>
15	0.00	55	49.00
20	26.00	60	62.00
25	26.00	65	73.00
30	26.00	70	89.00
35	26.00	75	106.00
40	26.00	80	144.00
45	27.00	85	236.00
50	31.00	90	455.00
55	49.00	>=95	1000.00

Salaried and Bargaining – None assumed



Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan
 Schedule SB, Part V – Statement of Actuarial Assumptions and Methods
 EIN: 52-1056429 PN: 001 Plan Year End: 12-31-2024

Rates of Retirement Participants are assumed to retire as soon as eligible according to the withdrawal rates with the remainder retiring at age 65.

Commencement Dates and Forms of Payment Retiring or terminating participants are assumed to elect the following forms of payment at age 65.

<u>Salaried - Form of Payment</u>	<u>Rate of Election</u>
Single Life Annuity	15.00%
Joint and 50% Survivor Annuity	50.00%
Joint and 100% Survivor Annuity	35.00%
<u>Hourly - Form of Payment</u>	<u>Rate of Election</u>
Single Life Annuity	50.00%
Joint and 50% Survivor Annuity	10.00%
Joint and 100% Survivor Annuity	40.00%
<u>Bargaining - Form of Payment</u>	<u>Rate of Election</u>
Single Life Annuity	30.00%
Joint and 50% Survivor Annuity	25.00%
Joint and 100% Survivor Annuity	45.00%

Inactive participants who are entitled to future benefits are assumed to follow the same assumptions as above.

Percentage Married **Salaried** - 85% of participants are assumed to be married with husbands assumed to be 4 years older than wives.

Bargaining and Hourly - 75% of participants are assumed to be married with husbands assumed to be 3 years older than wives.

Maximum Limitations The maximum annual benefit limitation and the annual compensation limit are assumed to remain at their current levels.

Provision for Expenses The expected non-investment related expenses expected to be paid from plan assets for the upcoming year were included in the Target Normal Cost for Minimum Required Contribution purposes.

Standing Elections The client has not signed an election that provides for the automatic use of the Carryover Balance and/or Prefunding Balance if necessary to meet the minimum funding requirement.

Employees Valued Only participants as of the valuation date were valued.

ASOP 51 Assumptions No additional assumptions made.



Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.

ASC 960-20: Market Value of Assets plus, any contributions for prior plan years that will be made in this plan year.

Funding Method

Pure Unit Credit

The actuarial liabilities shown in this report are determined using software purchased from an outside vendor which was developed for this purpose. Certain information is entered into this model in order to generate the liabilities. These inputs include economic and non-economic assumptions, plan provisions, and census information. We rely on the coding within the software to value the liabilities using the actuarial methods and assumptions selected. Both the input to and the output from the model is checked for accuracy and reviewed for reasonableness.

Changes in Assumptions and Methods since the Last Actuarial Valuation

The interest rates used for determining the prior plan year's funding target were 4.75%, 5.00% and 5.74%. These rates were updated to the rates required for the current plan year.

The mortality table for the funding target was changed as required under PPA '06.

The explicit assumption for plan expenses was changed from \$250,000 to \$195,000.

Justification for Changes in Actuarial Assumptions

The change in assumption for plan expenses was made to reflect actual experience.

All other assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status.



NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
<i>Single transactions, exceeding 5% of value:</i>								
Artisan	Artisan International Value Fund	\$ -	\$ 1,882,801	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 4,600,000	\$ -	\$ -	\$ -	\$ 4,600,000	\$ 4,600,000	\$ -
First American Funds	First American Government Obligations Fund	\$ 7,333,133	\$ -	\$ -	\$ -	\$ 7,333,133	\$ 7,333,133	\$ -
Vanguard	Vanguard Institutional Index Func	\$ -	\$ 2,000,000	\$ -	\$ -	\$ 790,520	\$ 2,000,000	\$ 1,209,480
<i>Series of transactions with same broker exceeds 5% of value:</i>								
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 349,970	\$ -	\$ -	\$ -	\$ 349,970	\$ 349,970	\$ -
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 237,114	\$ -	\$ -	\$ -	\$ 237,114	\$ 237,114	\$ -
Ishares	Ishares Russell Mid Cap ETF	\$ -	\$ 951,831	\$ -	\$ -	\$ 352,783	\$ 951,831	\$ 599,048
Alerian	Alerian MLP ETF	\$ -	\$ 344,262	\$ -	\$ -	\$ 302,037	\$ 344,262	\$ 42,225
US Treasury	Domestic bond, due 4/30/2024, 2.250%, face value \$50,000	\$ -	\$ 49,632	\$ -	\$ -	\$ 49,714	\$ 49,632	\$ (82)
Federal Farm Credit Banks	Domestic bond, due 10/15/2049, 2.625%, face value \$250,000	\$ 166,760	\$ -	\$ -	\$ -	\$ 166,760	\$ 166,760	\$ -
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$125,000	\$ -	\$ 114,860	\$ -	\$ -	\$ 119,184	\$ 114,860	\$ (4,324)
Federal Farm Credit Banks	Domestic bond, due 3/7/2039, 2.750%, face value \$30,000	\$ 23,064	\$ -	\$ -	\$ -	\$ 23,064	\$ 23,064	\$ -
Xcel Energy Inc	Subordinated corporate bond, due 9/15/2041, 4.800%, face value \$35,000	\$ 30,876	\$ -	\$ -	\$ -	\$ 30,876	\$ 30,876	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 7/30/2046 3.200%, face value \$125,000	\$ 89,229	\$ -	\$ -	\$ -	\$ 89,229	\$ 89,229	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 11/1/2028 3.950%, face value \$100,000	\$ -	\$ 96,231	\$ -	\$ -	\$ 99,241	\$ 96,231	\$ (3,010)
US Treasury	Domestic bond, due 11/1/2028, 3.950%, face value \$100,000	\$ -	\$ 103,224	\$ -	\$ -	\$ 107,565	\$ 103,224	\$ (4,341)
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$75,000	\$ -	\$ 67,020	\$ -	\$ -	\$ 71,639	\$ 67,020	\$ (4,619)
Ecolab Inc	Subordinated corporate bond, due 1/15/2028 5.250%, face value \$100,000	\$ -	\$ 100,797	\$ -	\$ -	\$ 102,777	\$ 100,797	\$ (1,980)
Gatx Corporation	Subordinated corporate bond, due 6/1/2051, 3.100%, face value \$200,000	\$ 126,490	\$ -	\$ -	\$ -	\$ 126,490	\$ 126,490	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$250,000	\$ 171,275	\$ -	\$ -	\$ -	\$ 171,275	\$ 171,275	\$ -
Home Depot	Subordinated corporate bond, due 6/25/2064, 5.400%, face value \$100,000	\$ 100,420	\$ -	\$ -	\$ -	\$ 100,420	\$ 100,420	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$125,000	\$ 89,505	\$ -	\$ -	\$ -	\$ 89,505	\$ 89,505	\$ -
Oracle Corporation	Subordinated corporate bond, due 7/15/2040, 5.375%, face value \$150,000	\$ 155,070	\$ -	\$ -	\$ -	\$ 155,070	\$ 155,070	\$ -
Ecolab Inc	Subordinated corporate bond, due 8/15/2050, 2.125%, face value \$250,000	\$ 153,398	\$ -	\$ -	\$ -	\$ 153,398	\$ 153,398	\$ -
Smucker J M Company	Subordinated corporate bond, due 11/15/2053, 6.500%, face value \$150,000	\$ 174,405	\$ -	\$ -	\$ -	\$ 174,405	\$ 174,405	\$ -
Clorox Company	Subordinated corporate bond, due 5/1/2032, 4.600%, face value \$150,000	\$ 152,372	\$ -	\$ -	\$ -	\$ 152,372	\$ 152,372	\$ -
Intel Corporation	Subordinated corporate bond, due 8/12/2041, 2.800%, face value \$100,000	\$ 68,450	\$ -	\$ -	\$ -	\$ 68,450	\$ 68,450	\$ -
General Mills	Subordinated corporate bond, due 2/1/2051, 3.000%, face value \$200,000	\$ 136,648	\$ -	\$ -	\$ -	\$ 136,648	\$ 136,648	\$ -
CVS Caremark	Subordinated corporate bond, due 6/1/2063, 6.000%, face value \$150,000	\$ 149,955	\$ -	\$ -	\$ -	\$ 149,955	\$ 149,955	\$ -
Atlria Group	Subordinated corporate bond, due 9/16/2046, 3.875%, face value \$100,000	\$ 76,840	\$ -	\$ -	\$ -	\$ 76,840	\$ 76,840	\$ -
US Treasury	Domestic bond, due 5/15/2051, 2.375%, face value \$500,000	\$ -	\$ 337,590	\$ -	\$ -	\$ 381,209	\$ 337,590	\$ (43,619)
US Treasury	Domestic bond, due 8/15/2045, 2.875%, face value \$500,000	\$ -	\$ 391,290	\$ -	\$ -	\$ 426,394	\$ 391,290	\$ (35,104)
US Treasury	Domestic bond, due 12/31/2025, 4.250%, face value \$150,000	\$ 150,056	\$ -	\$ -	\$ -	\$ 150,056	\$ 150,056	\$ -
Sysco Corporation	Subordinated corporate bond, due 7/15/2026, 3.300%, face value \$150,000	\$ 146,925	\$ -	\$ -	\$ -	\$ 146,925	\$ 146,925	\$ -
Ecolab Inc	Subordinated corporate bond, due 11/1/2046, 3.700%, face value \$95,000	\$ 72,807	\$ -	\$ -	\$ -	\$ 72,807	\$ 72,807	\$ -
US Treasury	Domestic bond, due 2/15/2053, 3.500%, face value \$290,000	\$ -	\$ 245,007	\$ -	\$ -	\$ 278,015	\$ 245,007	\$ (33,008)
<i>Series of transactions involving securities of the same issue:</i>								
Artisan	Artisan International Value Fund	\$ 101,174	\$ -	\$ -	\$ -	\$ 101,174	\$ 101,174	\$ -
Artisan	Artisan International Value Fund	\$ -	\$ 1,310,817	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 13,330,790	\$ -	\$ -	\$ -	\$ 13,330,790	\$ 13,330,790	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 3,805,281	\$ -	\$ -	\$ 3,805,281	\$ 3,805,281	\$ -
First American Funds	First American Government Obligations Fund	\$ 2,276,153	\$ -	\$ -	\$ -	\$ 2,276,153	\$ 2,276,153	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 2,245,736	\$ -	\$ -	\$ 2,245,736	\$ 2,245,736	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ 323,567	\$ -	\$ -	\$ -	\$ 323,567	\$ 323,567	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ -	\$ 2,500,000	\$ -	\$ -	\$ 1,733,987	\$ 2,500,000	\$ 766,013
JP Morgan	JP Morgan Large Cap Growth Fund	\$ -	\$ 3,100,000	\$ -	\$ -	\$ 1,885,784	\$ 3,100,000	\$ 1,214,216
Vanguard	Vanguard Institutional Index Func	\$ 99,856	\$ -	\$ -	\$ -	\$ 99,856	\$ 99,856	\$ -
Vanguard	Vanguard Institutional Index Func	\$ -	\$ 4,500,000	\$ -	\$ -	\$ 1,698,785	\$ 4,500,000	\$ 2,801,215

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

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

A Name of plan NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF NYRSTAR CLARKSVILLE INC.	D Employer Identification Number (EIN) 52-1056429	
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	35,324,326	
b Actuarial value	2b	36,551,732	
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	476	24,859,465	24,859,465
b For terminated vested participants	193	3,541,623	3,541,623
c For active participants	51	2,177,910	2,208,166
d Total	720	30,578,998	30,609,254
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	5.06%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	195,000	
c Target normal cost	6c	195,000	

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	Noel Whitehurst Signature of actuary	<u>10/15/2025</u> Date
	NOEL WHITEHURST Type or print name of actuary	<u>2308164</u> Most recent enrollment number
	USI CONSULTING GROUP Firm name	<u>629-895-7862</u> Telephone number (including area code)
	5301 VIRGINIA WAY, SUITE 400 BRENTWOOD TN 37027 Address of the firm	

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost				
21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	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 195,000
b Excess assets, if applicable, but not greater than line 31a				31b 195,000
32 Amortization installments:	Outstanding Balance		Installment	
a Net shortfall amortization installment	0		0	
b Waiver amortization installment	0		0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount				33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....				34 0
	Carryover balance	Prefunding balance	Total balance	
35 Balances elected for use to offset funding requirement	0	0	0	
36 Additional cash requirement (line 34 minus line 35).....				36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....				37 0
38 Present value of excess contributions for current year (see instructions)				
a Total (excess, if any, of line 37 over line 36)				38a 0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances				38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....				39 0
40 Unpaid minimum required contributions for all years				40 0

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

Nyrstar Clarksville Inc. Salaried Employees' Retirement Plan
 EIN: 52-1056429 PN: 001 Plan Year End: 12-31-2024
 Schedule SB, Line 22 – Description of Weighted Average Retirement Age

The weighted average retirement age is determined as follows:

Age	Rate of Retirement	Population Remaining	Lives Retiring	Age x Lives
55	1.73%	100,000	1,730	95,150
56	1.69%	98,270	1,661	93,016
57	1.65%	96,609	1,594	90,858
58	1.63%	95,015	1,549	89,842
59	1.60%	93,466	1,495	88,205
60	1.57%	91,971	1,444	86,640
61	1.54%	90,527	1,394	85,034
62	1.51%	89,133	1,346	83,452
63	1.37%	87,787	1,203	75,789
64	1.26%	86,584	1,091	69,824
65	100.00%	85,493	85,493	5,557,045
Total	100.00%	n/a	100,000	6,414,855

Weighted average retirement age = 6,414,855 / 100,000 = 64.14855

Schedule SB, Part V – Summary of Principal Plan Provisions

Plan Sponsor	Nyrstar Clarksville Inc.
EIN/PN	52-1056429/001
Effective Date	April 30, 1984; amended and restated effective January 1, 2020. Effective 12/31/2021, the Nyrstar Clarksville Inc. Hourly Employees' Pension Plan ("Hourly") and the Pension Plan of Savage Zinc, Inc. for Bargaining Unit Employees ("Bargaining") were fully merged into the Salaried plan.
Plan Year	The 12-month period beginning each January 1.
Optional Methods of Benefit Payment	Subject to the applicable plan conditions, a participant may select an optional method of benefit payment, in lieu of the prescribed life income, which is actuarially equivalent. The purpose of the optional method is to permit the guarantee of a continued life income to a surviving beneficiary after the death of a participant (for example, 100% of the participant's actuarially reduced retirement income from the plan). However, if no option is elected and the participant is married at the date his benefit commences, the monthly benefit will automatically be paid in the form of a 50% joint and survivor annuity or 100% joint and survivor annuity, depending on their benefit group (Hourly, Bargaining, Salaried).
Contributions by the Employer	The employer contributes actuarially determined amounts to finance the plan benefits; participating employees do not contribute toward the cost of the plan.
Investment of Plan Funds	The assets of the pension plan are invested by the trustee in accordance with the terms of the trust agreement.



Salaried Employees

Eligibility Each employee is eligible to become a participant in the plan upon completion of a year of service during which he completed 1,000 hours of service. Notwithstanding the foregoing, no employee will be eligible to become a participant after January 31, 2009.

Accrual and Vesting Service Service credited for accrual and vesting purposes means the period of time between the participant's date of hire and the time he terminates employment. The plan was frozen effective January 31, 2009. As such, no service is credited for accruals after January 31, 2009. Service continues to accrue for vesting purposes.

Compensation of a Participant For plan purposes, compensation means the total cash compensation, and working allowances, but excludes bonuses and overtime for exempt employees.

Normal Retirement Condition
The normal retirement date of a participant is later of the participant's 65th birthday and the fifth anniversary of his plan participation.

Benefit

The participant's normal retirement benefit, which is payable monthly for life, is computed as follows:

- (1) 1.5% of average monthly earnings multiplied by total years of service not exceeding 40,
Less
1.25% of monthly primary insurance amount (social security benefit) multiplied by total years of service not exceeding 40.
- (2) However, the participant's monthly normal retirement benefit is never less than:
1.25% of monthly primary insurance amount (social security benefit) multiplied by total years of service not exceeding 40.

NJZ Minimum

In the event an employee was a participant in The Pension Plan of the New Jersey Zinc Company on December 31, 1978, his monthly normal retirement benefit is never less than the greater of (1) and (2) as follows:

- (1) 1.0% of average monthly earnings, not in excess of the integration level plus 1.25% of average monthly earnings in excess of the integration level, multiplied by total years of service. For this purpose, the integration level for a participant may be determined from the following table:



Salaried Employees

<u>Calendar Year of the Member's 65th Birthday</u>	<u>Amount</u>
1973 or before	\$488
1974	511
1975	536
1976	571
1977	605
1978	639
1979	657
1980	673
1981	688
1982	702
1983	714
1984	726
1985	736
1986	746
1987	755
1988	763
1989	771
1990	779
1991	785
1992	792
1993	798
1994	804
1995	821
1996	838
1997	855
1998	872
1999	890
2000	907
2001	924
2002	937
2003	950
2004	960
2005	970
2006	980
2007	990
2008	997
2009 and later	1,000



Salaried Employees

- (2) 1.5% of average monthly earnings, not in excess of \$650, multiplied by total years of service.

Marquette Minimum

In the event an employee was a participant in the Marquette Company Retirement Plan for Salaried Employees on December 31, 1978, his monthly normal retirement benefit is never less than the greater of (1) and (2) as follows:

- (1) 1.8% of average monthly earnings less 2% of monthly social security benefit, multiplied by years of service not in excess of 25 years.
- (2) the maximum of .9% of average monthly earnings multiplied by total years of service, and \$15.50 multiplied by total years of service.

Early Retirement

Condition

A participant may retire early after he has attained age 55 and completed 10 years of service. In the event an employee was a participant in the Marquette Company Retirement Plan for Salaried Employees on December 31, 1978, he may retire early after he has attained age 55 and completed 5 years of service.

Benefit

The deferred benefit commencing at normal retirement age is computed as in Normal Retirement above, but is based on service as of his date of termination.

Upon request to the retirement committee, the participant's benefit may commence at any time after his termination of employment. If the benefit is to commence before his normal retirement age, in most cases the deferred benefit is reduced to reflect the fact that commencement of benefit payments precedes his normal retirement age.

Postponed Retirement

Condition

A participant may postpone retirement beyond his normal retirement age.

Benefit

The participant's postponed retirement benefit which commences on the first day of the first month after retirement is computed as in the same manner as in Normal Retirement but is based on service and average earnings as of his actual retirement date.



Salaried Employees

Disability Retirement

Condition

In the event an active participant becomes disabled and continues to be disabled until age 65, he will be entitled to a disability retirement benefit commencing at age 65. However, a participant who becomes disabled before completing 10 years of service is eligible to receive such a disability benefit only if he is entitled to benefits under the employer's insurance plan.

Benefit

The deferral benefit, commencing at 65, is computed in the same manner as the normal retirement benefit described in Normal Retirement above. For this purpose, the disabled participant is treated as if he continued to earn service until age 65.

Death Before Retirement

Condition

In the event of the death of a participant after:

- (1) he completes 5 years of service, and while still actively employed by the employer, or
- (2) after termination of service and before retirement benefits commence, if he is eligible for a deferred retirement benefit,

a monthly survivorship benefit shall be payable to the participant's surviving spouse.

Benefit

The monthly benefit, payable on the first day of the calendar month following the later of the participant's death and the date he would have attained age 55 and continuing for the lifetime of the surviving spouse, is determined as the amount the surviving spouse would have received if the participant had retired and elected a 100% joint and survivor annuity on the day before his death.

Termination of Employment After 5 Years of Vesting Service

If a participant terminates his employment after completion of 5 or more years of vesting service, he is entitled to a deferred vested benefit to commence at his normal retirement date. The amount of the benefit is determined in the same manner as the deferred benefit in Early Retirement above but is based on service as of his date of termination.

Other Termination of Employment

If employment is otherwise terminated before retirement, no benefits are provided under the plan.



Bargaining Employees

Eligibility Each employee is eligible to become a participant in the plan on the day he is hired.

Accrual and Vesting Service Service credited for accrual and vesting purposes means the period of time between the participant's date of hire and the time he terminates employment.

Normal Retirement Condition:
The normal retirement date of a participant is the later of the participant's 65th birthday and the date he completes 5 years of continuous service.

Benefit:
The participant's normal retirement benefit, which is payable monthly for life, is computed as follows:

(i) an amount determined for the first 15 years of a participant's service earned prior to January 1, 1988 that is equal to \$13.00 per month multiplied by the number of those years, plus

(ii) an amount determined for the 16th through the 30th years of a participant's service earned prior to January 1, 1988 that is equal to \$14.00 per month multiplied by the number of those years, plus

(iii) an amount determined for the years of a participant's service earned prior to January 1, 1988 in excess of 30 years that is equal to \$15.00 per month multiplied by the number of those years, plus

(iv) \$24.00 per month multiplied by the number of years of a participant's service earned after December 31, 1987. This benefit is effective for participants who are employed on or after January 1, 2000.

This monthly benefit commences on the first day of the fourth month following the participant's normal retirement date. In addition, the participant will be paid a single sum benefit as of his normal retirement date in the amount of \$520 times the amount of his basic hourly rate of pay in effect immediately prior to his retirement date.



Bargaining Employees

Early Retirement

Condition:

A participant may retire early after he has attained age 55 and completed 10 years of continuous service or after he has completed 30 years of continuous service.

Benefit:

The benefit, which commences immediately upon early retirement, is computed as in Normal Retirement above, but is based on service as of his date of termination. In the event the participant has less than 30 years of service, his benefit shall be reduced by 1/2 of 1% for each month by which his early retirement date precedes his normal retirement date.

Postponed Retirement

Condition:

A participant may postpone retirement beyond his normal retirement age.

Benefit:

The participant's postponed retirement benefit which commences on the first day of the first month after retirement is computed as in the same manner as in Normal Retirement above but is based on service as of his actual retirement date.

Disability

Condition:

A participant who is permanently disabled may retire provided he has completed 10 years of continuous service.

Benefit:

The participant's disability retirement benefit commences on the first day of the seventh month following the date he becomes disabled. The amount of such benefit is determined in the same manner as in Normal Retirement above, but is based on service as of his date of retirement. If the participant is not eligible to receive social security benefits, he will receive an additional \$300 monthly supplemental benefit. The supplemental disability retirement benefit ceases upon the earlier of the participant's normal retirement date and the date he recovers from disability.

Death Before Retirement

Condition:

In the event of the death of a participant after:

- (1) he completes 5 years of vesting service, and while still actively employed by the employer, or



Bargaining Employees

(2) after termination of service and before retirement benefits commence, if he is eligible for a deferred retirement benefit;

a monthly survivorship benefit shall be payable to the participant's surviving spouse.

Benefit

The monthly benefit, payable on the first day of the calendar month following the later of the participant's death and the date he would have been eligible to receive an early retirement benefit, and continuing for the lifetime of the surviving spouse, is determined as the amount the surviving spouse would have received if the participant had retired and elected a 50% joint and survivor annuity commencing immediately on the day before his death.

Termination of Employment After 5 Years of Vesting Service

If a participant terminates his employment after completion of 5 or more years of vesting service, he is entitled to a deferred vested benefit to commence at his normal retirement date. The amount of the benefit is determined in the same manner as in Normal Retirement (i), (ii), (iii) and (iv) above, but is based on service as of his date of termination. The monthly benefit commences upon his 65th birthday. A participant who terminates service and is entitled to a benefit in accordance with this paragraph is not eligible for the single sum benefit described in Normal Retirement.

Prior Plan Benefits

Until August 1, 1984, participants were covered by the prior plan sponsored by Gulf + Western. Benefits accrued as of August 1, 1984 will be paid by the prior plan as participants become eligible. Benefits from the current plan, sponsored by Nyrstar Clarksville Inc., will be reduced by prior plan benefits.

Other Termination of Employment

If employment is otherwise terminated before retirement, no benefits are provided under the plan.



Hourly Employees

Eligibility Each hourly, non-union employee is eligible to become a participant in the plan on the day he is hired. Notwithstanding the foregoing, no employee hired after January 31, 2009 will be eligible to participate in the plan.

Accrual and Vesting Service Service credited for accrual and vesting purposes means the period of time between the participant's date of hire and the time he terminates employment. The plan was frozen effective January 31, 2009. As such, no service is credited for accruals after January 31, 2009. Service continues to accrue for vesting purposes.

This benefit is effective for participants who are employed on or after January 1, 2000.

Normal Retirement Condition:
The normal retirement date of a participant is the first day of the month on or after the participant's 65th birthday and his completion of five years of service.

Benefit:
The participant's normal retirement benefit, which is payable monthly for life is computed as follows:

\$14 times years of benefit service prior to January 1, 1985

plus \$24 times years of benefit service after December 31, 1984.

This benefit is effective for participants who are employed on or after January 1, 2000.

Early Retirement Benefit Condition:
A participant may retire early after he has attained age 55 and completed 10 years of service.

Benefit:
The deferred benefit, commencing at normal retirement age, is computed in the same manner as in Normal Retirement above but is based upon benefit service as of his date of retirement.

Upon request to the retirement committee, the participant's benefit may commence at any time after his termination of employment. If the benefit is to commence before his normal retirement age, the deferred benefit is reduced for each year that commencement of benefit payments precedes his normal retirement age.



Hourly Employees

Postponed Retirement

Condition:

A participant may postpone retirement beyond his normal retirement age.

Benefit:

The participant's postponed retirement benefit which commences on the first day of the first month after retirement is computed in the same manner as in Normal Retirement above but is based on his benefit service as of the date of his actual retirement. In no event is his postponed retirement benefit less than the actuarial equivalent of his normal retirement benefit.

Disability

Condition:

A participant who is permanently disabled is retired on the first day of the 13th month following his last day of work provided he has completed 10 years of service.

Benefit:

The amount of the participant's disability benefit which commences on the date he is retired is determined in the same manner as in Early Retirement above, but is based on service as of the date of retirement. Prior to his attainment of age 65, the payment of his monthly benefit is conditioned on his continued disability.

Death Before Retirement

Condition:

In the event of the death of a participant after:

- (1) he completes 5 years of service and is still actively employed by the employer, or
- (2) after termination of service and before retirement benefits commence, if he is eligible for a deferred retirement benefit;

a monthly survivorship benefit shall be payable to the participant's surviving spouse.



Hourly Employees

Benefit:

The monthly benefit for a participant who dies after completing 10 years of service is payable on the first day of the calendar month following the later of the participant's death and the date he would have attained age 55 and continuing for the lifetime of the surviving spouse. For a participant who dies after completing 5 years of service but before completing 10 years of service, the monthly benefit is payable on the later of his date of death and his normal retirement date. The benefit is determined as the amount the surviving spouse would have received if the participant had retired and elected a 100% joint and survivor annuity on the day before his death.

Termination of
Employment After 5
Years of Vesting Service

If a participant terminates his employment after completion of 5 or more years of vesting service, he is entitled to a deferred vested benefit to commence at his normal retirement date. The amount of the benefit is determined in the same manner as the deferred benefit in Early Retirement above.

Other Termination of
Employment

If employment is otherwise terminated before retirement, no benefits are provided under the plan.



NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	MONEY MARKET FUNDS: First American Funds	Government Obligations Fund	\$ 13,788,297	\$ 13,788,297
	EXCHANGE TRADED FUNDS:			
	Ishares	Russell Midcap Value Index Fund	\$ 548,706	\$ 1,003,420
	Ishares	Russell Midcap Growth Index Fund	280,918	1,012,986
	JP Morgan	JP Morgan Equity Premium Income ETF	915,033	920,480
	Vanguard	Vanguard Small-Cap Growth ETF	840,595	1,120,240
	Vanguard	Vanguard Small-Cap Value ETF	815,368	990,900
	Janus Henderson	AAA CLO ETF	1,309,287	1,305,783
	Janus Henderson	Securitized ETF	155,190	155,430
	PIMCO	Enhanced Low Duration Active ETF	190,640	189,980
	TOTAL EXCHANGE TRADED FUNDS		<u>5,055,738</u>	<u>6,699,218</u>
	MUTUAL FUNDS:			
	Artisan	Artisan International Value Fund	\$ 1,465,743	\$ 1,965,268
	Hartford Mutual Funds, Inc.	Hartford Dividend and Growth Fund Class F	2,314,044	2,921,151
	JP Morgan	JP Morgan Large Cap Growth Fund	1,114,216	1,944,802
	Vanguard	Vanguard Institutional Index Fund	807,007	2,158,076
	PIMCO	PIMCO Income Fund Institutional Class	2,293,992	2,286,684
	TOTAL MUTUAL FUNDS		<u>7,995,003</u>	<u>11,275,981</u>
	U.S. GOVERNMENT BONDS:			
	Federal Farm Credit Banks	Domestic bond, due 4/2/2040, 3.490%, face value \$100,000	\$ 88,890	\$ 81,744
	Federal Farm Credit Banks	Domestic bond, due 10/15/2049, 2.625%, face value \$250,000	168,266	161,013
	Federal Farm Credit Banks	Domestic bond, due 3/7/2039, 2.750%, face value \$30,000	23,339	23,260
	Federal Farm Credit Banks	Domestic bond, due 4/20/2038, 5.350%, face value \$100,000	100,314	100,371
	Federal Farm Credit Banks	Domestic bond, due 5/08/2043, 5.840%, face value \$250,000	250,000	247,830
	Federal Farm Credit Banks	Domestic bond, due 10/04/2038, 5.660%, face value \$50,000	49,799	50,482

(continued on next page)

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	U.S. GOVERNMENT BONDS (continued):			
	U.S. Treasury	Domestic bond, due 2/15/2029, 3.500%, face value \$200,000	197,736	175,302
	U.S. Treasury	Domestic bond, due 5/15/2044, 3.375%, face value \$100,000	92,457	81,047
	U.S. Treasury	Domestic bond, due 2/15/2045, 2.500%, face value \$450,000	365,878	312,219
	U.S. Treasury	Domestic bond, due 11/15/2042, 4.000%, face value \$300,000	296,999	269,934
	U.S. Treasury	Domestic bond, due 12/31/2025, 4.250%, face value \$150,000	150,053	150,038
	TOTAL U.S. GOVERNMENT BONDS		<u>1,783,732</u>	<u>1,653,239</u>
	CORPORATE BONDS:			
	Atria Group	Subordinated corporate bond, due 9/16/2046, 3.875%, face value \$100,000	\$ 76,959	\$ 72,478
	CVS Caremark	Subordinated corporate bond, due 6/1/2063, 6.000%, face value \$150,000	149,973	136,806
	Church Dwight	Subordinated corporate bond, due 8/01/2047, 3.950%, face value \$175,000	147,254	134,972
	Church Dwight	Subordinated corporate bond, due 6/15/2052, 5.000%, face value \$200,000	187,979	180,864
	Clorox Company	Subordinated corporate bond, due 5/1/2032, 4.600%, face value \$150,000	152,302	146,658
	Duke Energy	Subordinated corporate bond, due 8/15/2047, 3.950%, face value \$50,000	39,377	37,204
	Duke Energy	Subordinated corporate bond, due 8/15/2052, 5.000%, face value \$50,000	45,577	43,635
	Duke Energy	Subordinated corporate bond, due 6/01/2045, 3.750%, face value \$50,000	40,603	38,263
	Ebay Inc	Subordinated corporate bond, due 7/15/2042, 4.000%, face value \$50,000	41,065	39,758
	Ecolab Inc	Subordinated corporate bond, due 11/1/2046, 3.700%, face value \$95,000	72,892	69,855
	Ecolab Inc	Subordinated corporate bond, due 8/15/2050, 2.125%, face value \$250,000	153,953	133,980
	Federal Home	Subordinated corporate bond, due 3/30/2033, 5.290%, face value \$100,000	101,844	100,721
	Gatx Corporation	Subordinated corporate bond, due 6/1/2051, 3.100%, face value \$200,000	127,139	126,344
	General Mills	Subordinated corporate bond, due 2/1/2051, 3.000%, face value \$200,000	136,915	126,542
	Home Depot	Subordinated corporate bond, due 6/25/2064, 5.400%, face value \$100,000	100,415	95,854
	Intel Corporation	Subordinated corporate bond, due 8/12/2041, 2.800%, face value \$100,000	68,708	63,788
	JP Morgan	Subordinated corporate bond, due 2/1/2044, 4.850%, face value \$250,000	239,325	230,078
	Kimberly Clark Corporation	Subordinated corporate bond, due 7/30/2046 3.200%, face value \$125,000	89,770	88,114
	Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$375,000	261,719	253,129
	Oracle Corporation	Subordinated corporate bond, due 4/01/2050, 3.600%, face value \$100,000	70,810	70,061
	Oracle Corporation	Subordinated corporate bond, due 7/15/2040, 5.375%, face value \$150,000	155,021	144,425
	Phillip Morris International	Subordinated corporate bond, due 11/17/2032, 5.750%, face value \$50,000	52,096	51,413
	Smucker J M Company	Subordinated corporate bond, due 11/15/2053, 6.500%, face value \$150,000	174,315	160,905
	Southern Gas Company	Subordinated corporate bond, due 5/30/2047, 4.400%, face value \$150,000	126,456	122,933
	Sysco Corporation	Subordinated corporate bond, due 7/15/2026, 3.300%, face value \$150,000	147,245	146,897
	Xcel Energy Inc	Subordinated corporate bond, due 9/15/2041, 4.800%, face value \$35,000	30,993	30,119
	TOTAL CORPORATE BONDS		<u>2,990,706</u>	<u>2,845,793</u>

(continued on next page)

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

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

DECEMBER 31, 2024

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	MUNICIPAL ISSUES:			
	Bexar County Texas	Domestic bond, due 6/15/2040, 2.156%, face value \$250,000	\$ 174,103	\$ 166,770
	Dallas Texas	Domestic bond, due 10/01/2042, 2.822%, face value \$35,000	26,103	24,752
	New York State	Domestic bond, due 3/15/2027, 1.538%, face value \$15,000	14,002	14,081
	Oregon State	Domestic bond, due 8/1/2053, 5.152%, face value \$225,000	225,533	216,992
	Virginia State	Domestic bond, due 7/1/2038, 5.830%, face value \$75,000	75,000	75,261
	Virginia State	Domestic bond, due 10/1/2044, 5.750%, face value \$100,000	99,696	98,167
	Virginia State	Domestic bond, due 10/1/2054, 5.903%, face value \$200,000	202,234	196,866
	TOTAL MUNICIPAL BONDS		816,671	792,889
	TOTAL INVESTMENTS		<u>\$ 32,430,147</u>	<u>\$ 37,055,417</u>

NYRSTAR CLARKSVILLE INC. SALARIED EMPLOYEES' RETIREMENT PLAN

EMPLOYER IDENTIFICATION NUMBER: 52-1056429

PLAN NUMBER: 001

SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS

FOR THE YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of asset (include interest rate and maturity in case of a loan)	(c) Purchase Price	(d) Selling Price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
<i>Single transactions, exceeding 5% of value:</i>								
Artisan	Artisan International Value Fund	\$ -	\$ 1,882,801	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 4,600,000	\$ -	\$ -	\$ -	\$ 4,600,000	\$ 4,600,000	\$ -
First American Funds	First American Government Obligations Fund	\$ 7,333,133	\$ -	\$ -	\$ -	\$ 7,333,133	\$ 7,333,133	\$ -
Vanguard	Vanguard Institutional Index Fund	\$ -	\$ 2,000,000	\$ -	\$ -	\$ 790,520	\$ 2,000,000	\$ 1,209,480
<i>Series of transactions with same broker exceeds 5% of value:</i>								
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 349,970	\$ -	\$ -	\$ -	\$ 349,970	\$ 349,970	\$ -
JP Morgan	JP Morgan Equity Premium Income ETF	\$ 237,114	\$ -	\$ -	\$ -	\$ 237,114	\$ 237,114	\$ -
Ishares	Ishares Russell Mid Cap ETF	\$ -	\$ 951,831	\$ -	\$ -	\$ 352,783	\$ 951,831	\$ 599,048
Alerian	Alerian MLP ETF	\$ -	\$ 344,262	\$ -	\$ -	\$ 302,037	\$ 344,262	\$ 42,225
US Treasury	Domestic bond, due 4/30/2024, 2.250%, face value \$50,000	\$ -	\$ 49,632	\$ -	\$ -	\$ 49,714	\$ 49,632	\$ (82)
Federal Farm Credit Banks	Domestic bond, due 10/15/2049, 2.625%, face value \$250,000	\$ 166,760	\$ -	\$ -	\$ -	\$ 166,760	\$ 166,760	\$ -
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$125,000	\$ -	\$ 114,860	\$ -	\$ -	\$ 119,184	\$ 114,860	\$ (4,324)
Federal Farm Credit Banks	Domestic bond, due 3/7/2039, 2.750%, face value \$30,000	\$ 23,064	\$ -	\$ -	\$ -	\$ 23,064	\$ 23,064	\$ -
Xcel Energy Inc	Subordinated corporate bond, due 9/15/2041, 4.800%, face value \$35,000	\$ 30,876	\$ -	\$ -	\$ -	\$ 30,876	\$ 30,876	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 7/30/2046 3.200%, face value \$125,000	\$ 89,229	\$ -	\$ -	\$ -	\$ 89,229	\$ 89,229	\$ -
Kimberly Clark Corporation	Subordinated corporate bond, due 11/1/2028 3.950%, face value \$100,000	\$ -	\$ 96,231	\$ -	\$ -	\$ 99,241	\$ 96,231	\$ (3,010)
US Treasury	Domestic bond, due 11/1/2028, 3.950%, face value \$100,000	\$ -	\$ 103,224	\$ -	\$ -	\$ 107,565	\$ 103,224	\$ (4,341)
US Treasury	Domestic bond, due 5/15/2032, 2.875%, face value \$75,000	\$ -	\$ 67,020	\$ -	\$ -	\$ 71,639	\$ 67,020	\$ (4,619)
Ecolab Inc	Subordinated corporate bond, due 1/15/2028 5.250%, face value \$100,000	\$ -	\$ 100,797	\$ -	\$ -	\$ 102,777	\$ 100,797	\$ (1,980)
Gatx Corporation	Subordinated corporate bond, due 6/1/2051, 3.100%, face value \$200,000	\$ 126,490	\$ -	\$ -	\$ -	\$ 126,490	\$ 126,490	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$250,000	\$ 171,275	\$ -	\$ -	\$ -	\$ 171,275	\$ 171,275	\$ -
Home Depot	Subordinated corporate bond, due 6/25/2064, 5.400%, face value \$100,000	\$ 100,420	\$ -	\$ -	\$ -	\$ 100,420	\$ 100,420	\$ -
Kinder Morgan	Subordinated corporate bond, due 2/15/2051, 3.600%, face value \$125,000	\$ 89,505	\$ -	\$ -	\$ -	\$ 89,505	\$ 89,505	\$ -
Oracle Corporation	Subordinated corporate bond, due 7/15/2040, 5.375%, face value \$150,000	\$ 155,070	\$ -	\$ -	\$ -	\$ 155,070	\$ 155,070	\$ -
Ecolab Inc	Subordinated corporate bond, due 8/15/2050, 2.125%, face value \$250,000	\$ 153,398	\$ -	\$ -	\$ -	\$ 153,398	\$ 153,398	\$ -
Smucker J M Company	Subordinated corporate bond, due 11/15/2053, 6.500%, face value \$150,000	\$ 174,405	\$ -	\$ -	\$ -	\$ 174,405	\$ 174,405	\$ -
Clorox Company	Subordinated corporate bond, due 5/1/2032, 4.600%, face value \$150,000	\$ 152,372	\$ -	\$ -	\$ -	\$ 152,372	\$ 152,372	\$ -
Intel Corporation	Subordinated corporate bond, due 8/12/2041, 2.800%, face value \$100,000	\$ 68,450	\$ -	\$ -	\$ -	\$ 68,450	\$ 68,450	\$ -
General Mills	Subordinated corporate bond, due 2/1/2051, 3.000%, face value \$200,000	\$ 136,648	\$ -	\$ -	\$ -	\$ 136,648	\$ 136,648	\$ -
CVS Caremark	Subordinated corporate bond, due 6/1/2063, 6.000%, face value \$150,000	\$ 149,955	\$ -	\$ -	\$ -	\$ 149,955	\$ 149,955	\$ -
Atlria Group	Subordinated corporate bond, due 9/16/2046, 3.875%, face value \$100,000	\$ 76,840	\$ -	\$ -	\$ -	\$ 76,840	\$ 76,840	\$ -
US Treasury	Domestic bond, due 5/15/2051, 2.375%, face value \$500,000	\$ -	\$ 337,590	\$ -	\$ -	\$ 381,209	\$ 337,590	\$ (43,619)
US Treasury	Domestic bond, due 8/15/2045, 2.875%, face value \$500,000	\$ -	\$ 391,290	\$ -	\$ -	\$ 426,394	\$ 391,290	\$ (35,104)
US Treasury	Domestic bond, due 12/31/2025, 4.250%, face value \$150,000	\$ 150,056	\$ -	\$ -	\$ -	\$ 150,056	\$ 150,056	\$ -
Sysco Corporation	Subordinated corporate bond, due 7/15/2026, 3.300%, face value \$150,000	\$ 146,925	\$ -	\$ -	\$ -	\$ 146,925	\$ 146,925	\$ -
Ecolab Inc	Subordinated corporate bond, due 11/1/2046, 3.700%, face value \$95,000	\$ 72,807	\$ -	\$ -	\$ -	\$ 72,807	\$ 72,807	\$ -
US Treasury	Domestic bond, due 2/15/2053, 3.500%, face value \$290,000	\$ -	\$ 245,007	\$ -	\$ -	\$ 278,015	\$ 245,007	\$ (33,008)
<i>Series of transactions involving securities of the same issue:</i>								
Artisan	Artisan International Value Fund	\$ 101,174	\$ -	\$ -	\$ -	\$ 101,174	\$ 101,174	\$ -
Artisan	Artisan International Value Fund	\$ -	\$ 1,310,817	\$ -	\$ -	\$ 1,310,817	\$ 1,882,801	\$ 571,984
First American Funds	First American Government Obligations Fund	\$ 13,330,790	\$ -	\$ -	\$ -	\$ 13,330,790	\$ 13,330,790	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 3,805,281	\$ -	\$ -	\$ 3,805,281	\$ 3,805,281	\$ -
First American Funds	First American Government Obligations Fund	\$ 2,276,153	\$ -	\$ -	\$ -	\$ 2,276,153	\$ 2,276,153	\$ -
First American Funds	First American Government Obligations Fund	\$ -	\$ 2,245,736	\$ -	\$ -	\$ 2,245,736	\$ 2,245,736	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ 323,567	\$ -	\$ -	\$ -	\$ 323,567	\$ 323,567	\$ -
Hartford	Hartford Dividend and Growth Fund	\$ -	\$ 2,500,000	\$ -	\$ -	\$ 1,733,987	\$ 2,500,000	\$ 766,013
JP Morgan	JP Morgan Large Cap Growth Fund	\$ -	\$ 3,100,000	\$ -	\$ -	\$ 1,885,784	\$ 3,100,000	\$ 1,214,216
Vanguard	Vanguard Institutional Index Fund	\$ 99,856	\$ -	\$ -	\$ -	\$ 99,856	\$ 99,856	\$ -
Vanguard	Vanguard Institutional Index Fund	\$ -	\$ 4,500,000	\$ -	\$ -	\$ 1,698,785	\$ 4,500,000	\$ 2,801,215

Nyrstar Clarksville Inc. Salaried Employees' Pension Plan
EIN: 52-1056429 PN: 001 Plan Year End: 12-31-2024
Schedule SB, Line 24 – Change in Non-Prescribed Actuarial Assumptions

The following changes were made to the actuarial assumptions effective January 1, 2024:

1. The explicit assumption for plan expenses was changed from \$250,000 to \$195,000 to reflect actual experience.