

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

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

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>LAERDAL MEDICAL CORPORATION</u></p> <p><u>167 MYERS CORNERS ROAD</u> <u>WAPPINGERS FALLS, NY 12590-8840</u></p>	<p>1c Effective date of plan <u>11/01/1976</u></p> <p>2b Employer Identification Number (EIN) <u>13-2587752</u></p> <p>2c Plan Sponsor's telephone number <u>845-297-7770</u></p> <p>2d Business code (see instructions) <u>423990</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/16/2025	PATRICIA GOODWIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/16/2025	PATRICIA GOODWIN
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor PATRICIA GOODWIN 167 MYERS CORNERS ROAD WAPPINGERS FALLS, NY 12590-8840	3b Administrator's EIN 13-2587752 3c Administrator's telephone number 845-297-7770
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4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
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5 Total number of participants at the beginning of the plan year	5	271
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6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year	6a(1)	185
a(2) Total number of active participants at the end of the plan year	6a(2)	174
b Retired or separated participants receiving benefits	6b	13
c Other retired or separated participants entitled to future benefits	6c	69
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	256
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	3
f Total. Add lines 6d and 6e	6f	259
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 1A 1C

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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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>LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION 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>LAERDAL MEDICAL CORPORATION</u>	D Employer Identification Number (EIN) <u>13-2587752</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 checked="" type="checkbox"/> 101-500 <input 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>11383115</u>
	b Actuarial value	2b	<u>11212753</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>16</u>	<u>1174838</u>
	b For terminated vested participants	<u>70</u>	<u>797299</u>
	c For active participants	<u>185</u>	<u>9662461</u>
	d Total	<u>271</u>	<u>11634598</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>5.24 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>875984</u>
	b Expected plan-related expenses	6b	<u>95925</u>
	c Target normal cost	6c	<u>971909</u>

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

SIGN HERE <u>CHRISTOPHER JONES</u> Signature of actuary <u>USI CONSULTING GROUP</u> Type or print name of actuary <u>600 THIRD AVENUE</u> <u>3RD FLOOR</u> <u>NEW YORK, NY 10016</u> Firm name Address of the firm	<u>06/23/2025</u> Date <u>23-06984</u> Most recent enrollment number <u>212-878-0455</u> Telephone number (including area code)
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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: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code) **21b** 0

22 Weighted average retirement age **22** 65

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	
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	971909
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2326669	240737
b Waiver amortization installment		

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	1212646
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement	0	1212646
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	1171585

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

a Total (excess, if any, of line 37 over line 36)	38a	1171585
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	1171585

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 LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LAERDAL MEDICAL CORPORATION	D Employer Identification Number (EIN) 13-2587752	

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

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

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

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

MERRILL LYNCH,PIERCE,FENNER & SMITH

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 33	BROKERAGE	97334	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BANK OF AMERICA

94-1687665

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21	TRUSTEE	10424	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 LAERDAL MEDICAL CORPORATION	D Employer Identification Number (EIN) 13-2587752

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

		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	7438	8207
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1255000	1250000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	25094	28613
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	732635	847426
(2) U.S. Government securities	1c(2)	1316308	2064373
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	13768	12881
(B) Common	1c(4)(B)	6013122	5785487
(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)	1197039	1742619
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	835347	753637

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	11395751	12493243
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	11395751	12493243

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)	1250000	
(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)		1250000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	36848	
(B) U.S. Government securities.....	2b(1)(B)	78159	
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		115007
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	988	
(B) Common stock.....	2b(2)(B)	72743	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	89946	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	10208790	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	9819331	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	730306	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		24162
c Other income	2c		31205
d Total income. Add all income amounts in column (b) and enter total.....	2d		2703816

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1493591	
(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)		1493591
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)	97257	
(6) Bank or trust company trustee/custodial fees	2i(6)	15476	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		112733
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1606324

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1097492
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: PKF O'CONNOR DAVIES LLP

(2) EIN: 27-1728945

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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 539323.

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>LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION 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>LAERDAL MEDICAL CORPORATION</u>	D Employer Identification Number (EIN) <u>13-2587752</u>	

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

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

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

1	
---	--

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 94-1687665

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	12
---	----

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 _____.

**Laerdal Medical Corporation
Employees' Pension Plan**

Financial Statements

December 31, 2024 and 2023

Independent Auditors' Report

The Board of Directors of Laerdal Medical Corporation Employees' Pension Plan

Opinion

We have audited the accompanying financial statements of the Laerdal Medical Corporation Employees' Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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 auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

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

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of: (1) Schedule H, Part IV, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024 and (2) Schedule H, Part IV, 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 are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules are fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

PKF O'Connor Davies, LLP

July 14, 2025

**Laerdal Medical Corporation
Employees' Pension Plan**

Statements of Net Assets Available for Benefits

	December 31,	
	2024	2023
ASSETS		
Investments, at Fair Value		
Money market funds and interest bearing cash	\$ 847,426	\$ 732,635
Corporate and U.S. government securities	2,064,373	1,316,308
Common stocks	5,785,487	6,013,122
Preferred stock	12,881	13,768
Real estate investment trusts	753,637	835,347
Mutual funds	<u>1,742,619</u>	<u>1,197,039</u>
Total Investments	<u>11,206,423</u>	<u>10,108,219</u>
Receivables		
Employer contributions	1,250,000	1,255,000
Accrued interest	<u>28,613</u>	<u>25,094</u>
Total Receivables	<u>1,278,613</u>	<u>1,280,094</u>
Non-interest bearing cash	<u>8,207</u>	<u>7,438</u>
Total Assets	12,493,243	11,395,751
LIABILITIES		
	-	-
Net Assets Available For Benefits	<u>\$ 12,493,243</u>	<u>\$ 11,395,751</u>

See notes to financial statements

**Laerdal Medical Corporation
Employees' Pension Plan**

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31,	
	2024	2023
ADDITIONS		
Employer contributions	<u>\$ 1,250,000</u>	<u>\$ 1,255,000</u>
Investment Income		
Net appreciation in fair value of investments	1,175,132	1,589,199
Interest and dividends	<u>278,684</u>	<u>220,397</u>
Total Investment Income	<u>1,453,816</u>	<u>1,809,596</u>
Total Additions	<u>2,703,816</u>	<u>3,064,596</u>
DEDUCTIONS		
Benefits paid to participants	1,493,591	899,497
Administrative expenses	<u>112,733</u>	<u>95,925</u>
Total Deductions	<u>1,606,324</u>	<u>995,422</u>
Net Increase	1,097,492	2,069,174
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>11,395,751</u>	<u>9,326,577</u>
End of year	<u>\$ 12,493,243</u>	<u>\$ 11,395,751</u>

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements
December 31, 2024 and 2023

1. Description of Plan

The following brief description of the Laerdal Medical Corporation Employees' Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the plan agreement for more complete information.

General

The Plan is a noncontributory defined benefit plan covering substantially all employees of Laerdal Medical Corporation (the "Company" or "Employer"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Pension Benefits

Eligible employees automatically participate in the Plan on January 1 or July 1 after having attained the age of 21 and completing 1,000 hours of service within twelve months of the employee's hire date or any plan year beginning after the year in which the employee was hired. Employees hired after December 31, 2018 are not eligible to participate in the Plan. The Plan provides defined benefits to participants who retire at age 65 after at least three years of participation, based on their years of service, age and the average of the highest three consecutive calendar years of total salary. Benefits are also available at early retirement after age 55 with at least three years participation. Participants hired on or prior to January 1, 2008 became vested in accordance with a graded scale which results in full vesting after they had completed three years of continuous service. Participants hired after January 1, 2008 are not vested until after three years of continuous service, after which they are fully vested. Pension payments are made as either annuities or a lump sum payment. The Plan provides a death benefit for employees equal to the lump sum value of the accrued benefit.

2. Summary of Significant Accounting Policies

Basis of Accounting and Use of Estimates

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP"), which requires management of the Plan to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Fair Value Measurements

The Plan follows U.S. GAAP guidance on Fair Value Measurements which defines fair value and establishes a fair value hierarchy organized into three levels based upon the input assumptions used in pricing assets. Level 1 inputs have the highest reliability and are related to assets with unadjusted quoted prices in active markets. Level 2 inputs relate to assets with other than quoted prices in active markets which may include quoted prices for similar assets or liabilities or other inputs which can be corroborated by observable market data. Level 3 inputs are unobservable and are used to the extent that observable inputs do not exist.

**Laerdal Medical Corporation
Employees' Pension Plan**

Notes to Financial Statements
December 31, 2024 and 2023

2. Summary of Significant Accounting Policies *(continued)*

Investment Valuation and Income Recognition

Investments are reported at fair value. Common stocks, preferred stocks, real estate investment trusts, corporate bonds, and U.S. government securities that are traded on a national securities exchange are valued at the last reported sales price on the last business day of the plan year; investments traded in the over-the-counter market and listed securities for which no sale was reported on that date are valued at the average of the last reported bid and asked prices. The mutual funds and money market fund are valued at the daily closing price as reported by the fund. These funds held by the Plan are open-end funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price and are deemed actively traded. The interest-bearing cash is an insured savings account, which is valued at amortized cost, which approximates fair value.

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Expenses

Certain administrative expenses of the Plan are paid by the Plan. The Company pays all costs associated with general consulting and financial statement preparation, and individual estimated benefit calculations that are not related to an actual termination of employment.

Subsequent Events Evaluation by Management

Management has evaluated subsequent events for disclosure and/or recognition in the financial statements through the date that the financial statements were available to be issued, which date is July 14, 2025.

3. Funding Policy

The Company contributes such amounts as are necessary on an actuarial basis to provide the Plan with assets sufficient to meet the benefits to be paid to the Plan's participants. For the years ended December 31, 2024 and 2023, the Plan has met the minimum funding requirements of ERISA.

**Laerdal Medical Corporation
Employees' Pension Plan**

Notes to Financial Statements
December 31, 2024 and 2023

4. Actuarial Present Value of Accumulated Plan Benefits

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

Benefits under the Plan are based on employee's compensation, age and credited service, as defined. Benefits payable under the provisions of the Plan are included in the actuarial present value of accumulated plan benefits to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by USI Consulting Group, the Plan's independent actuarial firm, and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death or retirement) between the valuation date and the expected date of payment.

The significant actuarial assumptions underlying the actuarial present value of accumulated Plan benefits as of December 31, 2023 were as follows:

Discount assumption	7.00%
Effective interest rate	5.24%
Mortality	Pri-2012 Total Dataset Mortality Table with MP-2021 Scaling
Salary projection	3% per annum

There were no changes in significant actuarial assumptions from the prior year valuation except for the following: (a) the discount assumption changed from 6.50% to 7.00%; and (b) the effective interest rate changed from 5.34% to 5.24%.

The forgoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

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

The actuarial present value of accumulated plan benefits at December 31, 2023 is as follows:

Actuarial Present Value of Accumulated Plan Benefits

Vested Benefits

Participants currently receiving payments	\$ 1,030,042
Participants entitled to deferred benefits	641,132
Other participants	<u>7,761,665</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u>\$ 9,432,839</u>

**Laerdal Medical Corporation
Employees' Pension Plan**

Notes to Financial Statements
December 31, 2024 and 2023

4. Actuarial Present Value of Accumulated Plan Benefits (continued)

The changes in actuarial present value of accumulated plan benefits for the year ended December 31, 2023 is as follows:

Actuarial present value of accumulated plan benefits at December 31, 2022	<u>\$ 9,336,008</u>
Increase (Decrease) During the Year Attributable to:	
Interest due to the decrease in the discount period	578,067
Benefits paid	(899,497)
Assumption changes	(619,628)
Benefits accumulated	<u>1,037,889</u>
Net Increase	<u>96,831</u>
Actuarial Present Value of Accumulated Plan Benefits at December 31, 2023	<u>\$ 9,432,839</u>

5. Investments

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

	2024		
	Level 1	Level 2	Total
Money market funds and interest bearing cash	\$ 838,903	\$ 8,523	\$ 847,426
Corporate and U.S. government securities	771,649	1,292,724	2,064,373
Preferred stock	12,881	-	12,881
Common stocks	5,785,487	-	5,785,487
Real estate investment trusts	753,637	-	753,637
Mutual funds	<u>1,742,619</u>	<u>-</u>	<u>1,742,619</u>
	<u>\$ 9,905,176</u>	<u>\$ 1,301,247</u>	<u>\$ 11,206,423</u>
	2023		
	Level 1	Level 2	Total
Money market funds and interest bearing cash	\$ 598,237	\$ 134,398	\$ 732,635
Corporate and U.S. government securities	370,170	946,138	1,316,308
Preferred stock	13,768	-	13,768
Common stocks	6,013,122	-	6,013,122
Real estate investment trusts	835,347	-	835,347
Mutual funds	<u>1,197,039</u>	<u>-</u>	<u>1,197,039</u>
	<u>\$ 9,027,683</u>	<u>\$ 1,080,536</u>	<u>\$ 10,108,219</u>

**Laerdal Medical Corporation
Employees' Pension Plan**

Notes to Financial Statements
December 31, 2024 and 2023

6. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event of termination of the Plan, the rights of all persons to accrued retirement income to the date of termination to the extent then funded, shall become non-forfeitable.

7. Party-in-Interest Transactions

Certain Plan investments are managed by Bank of America, N.A. Bank of America, N.A. is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions under ERISA. Fees paid by the Plan to the trustee amounted to \$112,733 and \$95,925 for the years ending December 31, 2024 and 2023.

8. Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Company by letter dated December 6, 2017 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The plan administrator believes that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC. Therefore, they believe the Plan is qualified and the related trust is tax exempt.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine examinations by taxing jurisdictions; however, there are currently no examinations for any tax periods in progress.

9. Risks and Uncertainties

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

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

Global and domestic economic uncertainty has resulted in significant volatility in financial markets. This volatility has affected, and may continue to affect, the value of the Plan's net assets available for benefits. The effects of economic and market conditions subsequent to December 31, 2024 are not reflected in these financial statements and future effects on the Plan's net assets available for benefits cannot be predicted.

* * * * *

**Laerdal Medical Corporation
Employees' Pension Plan**

Supplemental Schedules

December 31, 2024

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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 AND INTEREST				
BEARING CASH				
		SHARES / UNITS		
	BlackRock Liquidity Fund T-Fund	16,700	\$ 16,700	\$ 16,700
	BLF FedFund Cash Reserve	822,203	822,203	822,203
*	ISA Bank of America	8,523	8,523	8,523
	Total Money Market Fund and Interest Bearing Cash		<u>847,426</u>	<u>847,426</u>
CORPORATE AND U.S. GOVERNMENT				
SECURITIES				
	FHLMC RA 5391	3%; 2051	87,014	85,842
	FHLMC SD 1087	3.5%; 2052	789	781
	FHLMC SD 3478	2.5%; 2052	12,185	12,045
	FHLMC SD 4583	3.5%; 2053	17,462	17,058
	FHLMC SD 6653	3.5%; 2053	5,288	5,242
	FHLMC SD 8157	3%; 2051	10,070	8,129
	FHLMC SD 8168	3%; 2051	23,402	18,951
	FHLMC SD 8179	3%; 2051	13,786	11,224
	FHLMC SD 8190	3%; 2052	15,389	12,583
	FHLMC SD 8196	3.5%; 2052	13,734	11,687
	FHLMC SD 8213	3%; 2052	5,179	5,121
	FHLMC SD 8220	3%; 2052	22,308	20,701
	FHLMC SD 8221	3.5%; 2052	32,579	30,415
	FHLMC SD 8227	4%; 2052	17,653	16,601
	FHLMC SD 8243	3.5%; 2052	2,372	2,360
	FHLMC SD 8244	4%; 2052	6,561	6,454
	FHLMC SD 8258	5%; 2052	5,903	5,723
	FHLMC SD 8264	3.5%; 2052	15,428	14,960
	FHLMC SD 8299	5%; 2053	1,717	1,724
	FHLMC SD 8316	5.5%; 2053	860	845
	FHLMC SD 8342	5.5%; 2053	9,662	9,628
	FHLMC SD 8344	6.5%; 2053	4,790	4,779
	FHLMC SD 8347	4.5%; 2053	21,200	21,107
	FHLMC SD 8360	4.5%; 2053	51,691	51,315
	FHLMC SD 8363	6%; 2053	876	853
	FHLMC SD 8384	6%; 2053	8,359	8,327
	FHLMC SD 8393	4.5%; 2054	901	894
	FHLMC SD 8438	5.5%; 2054	13,019	12,872
	FHLMC SD 8468	5%; 2054	5,792	5,695
	FHLMC SD 8469	5.5%; 2054	6,817	6,728
	FHLMC SD 8473	4.5%; 2054	7,606	7,482
	FHLMC SD 8487	4%; 2054	2,792	2,732
	FHLMC SB 1057	5%; 2038	830	822
	FHLMC SB 1215	6%; 2039	21,676	21,527
	Brought forward		<u>465,690</u>	<u>443,207</u>

See independent auditors' report

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 465,690	\$ 443,207
	FHLMC SB 8132	2%; 2036	9,330	9,253
	FHLMC SB 8243	5%; 2038	2,964	2,939
	FHLMC SB 8272	5%; 2038	4,749	4,702
	FHLMC SB 8328	5.5%; 2039	36,104	35,455
	FHLMC SB 8353	5.5%; 2040	10,138	10,066
	FNMA PCB3586	3%; 2052	789	751
	FNMA PFM7599	3.5%; 2051	1,014	702
	FNMA PFS3497	3.5%; 2052	1,658	1,585
	FNMA PFS4928	3.5%; 2050	1,646	1,584
	FNMA PFS5387	2.5%; 2052	778	762
	FNMA PFS5452	3.5%; 2053	58,970	58,326
	FNMA PFS6256	3.5%; 2052	25,705	25,575
	FNMA PFS6631	2.5%; 2052	197,154	194,935
	FNMA PFS7751	4%; 2053	885	880
	FNMA PFS7879	2.5%; 2052	5,512	5,492
	FNMA PFS8852	2.5%; 2052	18,739	18,303
	FNMA PFS8874	3%; 2052	13,673	13,337
	FNMA PFS9366	2.5%; 2052	5,728	5,659
	FNMA PMA4468	3.5%; 2051	23,598	19,498
	FNMA PMA4565	3.5%; 2052	2,367	2,046
	FNMA PMA4579	3%; 2052	1,533	1,429
	FNMA PMA4599	3%; 2052	2,295	2,200
	FNMA PMA4654	3.5%; 2052	809	770
	FNMA PMA4731	3.5%; 2052	1,664	1,571
	FNMA PMA4737	5%; 2052	4,144	3,904
	FNMA PMA4782	3.5%; 2052	20,265	19,812
	FNMA PMA4783	4%; 2052	11,353	11,228
	FNMA PMA4869	5.5%; 2053	24,618	23,853
	FNMA PMA4918	5%; 2053	30,487	30,228
	FNMA PMA5087	5.5%; 2038	2,310	2,285
	FNMA PMA5107	5.5%; 2053	27,900	27,803
	FNMA PMA5139	6%; 2053	22,575	22,492
	FNMA PMA5164	5%; 2053	907	899
	FNMA PMA5294	5%; 2054	14,813	14,777
	FNMA PMA5300	5.5%; 2039	4,580	4,572
	FNMA PMA5389	6%; 2054	5,514	5,477
	FNMA PMA5425	5.5%; 2039	7,750	7,630
	FNMA PMA5446	6.5%; 2054	17,097	16,950
	FNMA PMA5448	5%; 2039	905	893
	FNMA PMA5507	5%; 2039	11,108	11,062
	GNM PMA7883M	3.5%; 2052	<u>17,866</u>	<u>16,401</u>
	Brought forward		1,117,684	1,081,293

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 1,117,684	\$ 1,081,293
	GNM PMA7939M	4%; 2052	31,552	29,472
	GNM PMA7989M	3.5%; 2052	5,930	5,918
	GNM PMA8149M	3.5%; 2052	11,622	11,326
	GNM PMA8150M	4%; 2052	4,130	3,933
	GNM PMA8151M	4.5%; 2052	4,292	3,983
	GNM PMA8346M	4%; 2052	25,321	24,927
	GNM PMA8347M	4.5%; 2052	6,008	5,733
	GNM PMA8425M	3.5%; 2052	829	788
	GNM PMA8426M	4%; 2052	1,623	1,617
	GNM PMA8492M	6%; 2052	8,938	8,831
	GNM PMA8726M	5.50%; 2053	11,556	11,355
	GNM PMA9015M	4.5%; 2053	46,486	46,026
	GNM PMA9103M	4%; 2053	12,804	12,900
	GNM PMA9104M	4.50%; 2053	890	893
	GNM PMA9106M	5.50%; 2053	3,393	3,436
	GNM PMA9107M	6%; 2053	2,990	3,021
	GNM PMA9305M	5.5%; 2053	11,368	11,349
	GNM PMA9424M	6%; 2054	3,801	3,796
	GNM PMA9489M	6%; 2054	10,933	10,949
	GNM PMA9541M	5.5%; 2054	4,494	4,523
	GNM PMA9726M	6%; 2054	992	989
	GNM PMB0024M	4.5%; 2054	5,758	5,666
	U.S.Treasury Bond	1.75%; 2041	99,597	90,654
	U.S.Treasury Bond	3%; 2052	78,436	69,594
	U.S.Treasury Note	4%; 2028	264,101	266,555
	U.S.Treasury Note	3.625%; 2029	107,659	106,507
	U.S.Treasury Note	4.00%; 2034	86,960	84,248
	U.S.Treasury Note	2.75%; 2027	<u>152,237</u>	<u>154,091</u>
	Total Corporate and U.S. Government Securities		<u>2,122,384</u>	<u>2,064,373</u>
	COMMON STOCKS			
	3i Group PLC	365	7,228	8,249
	ABB Ltd.	334	11,072	17,939
	Adidas AG Sponsored	105	13,011	12,786
	AerCap Holdings	416	24,637	39,811
	AES Corp.	2996	40,246	38,559
	AIA Group Ltd.	408	16,192	11,759
	Air Liquide ADR	478	12,619	15,416
	Alibaba Group Holding	194	23,314	16,449
	Allison Transmission Holdings Inc.	391	19,094	42,251
	Alphabet Inc. CI A	391	<u>17,020</u>	<u>74,016</u>
	Brought forward		184,433	277,235

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 184,433	\$ 277,235
	Alphabet Inc. CI C	343	7,074	65,321
	Amazon Com Inc.	649	37,352	142,384
	Amphenol Corp. CI A	486	14,150	33,753
	AON PLC	64	16,473	22,986
	AptarGroup Inc.	170	24,960	26,707
	Armstrong World Inds Inc.	306	29,807	43,247
	Autodesk Inc.	210	13,339	62,070
	ASML Holdings NV NY Reg	22	20,346	15,248
	ASM International - NY Reg	20	7,169	11,383
	Avantor Inc.	2478	53,561	52,212
	Baker Hughes Co.	836	24,146	34,293
	Ball Corp.	470	31,975	25,911
	Bank Mandiri Tbk	762	7,143	10,508
	Barrick Gold Corp.	2,348	39,105	36,394
	Bath and Body Works Inc.	1,167	41,158	45,245
	Baxter International Inc.	1,264	41,916	36,858
	BellRing Brands Inc.	220	6,072	16,575
	Berkshire Hathaway Inc.	83	24,556	37,622
	Block Inc.	271	28,350	23,032
	Boeing Co.	550	93,672	97,350
	Boyd Gaming Corp.	155	6,549	11,244
	Bristol-Myers Squibb Co.	733	38,990	41,459
	Brown Forman Corp.	238	16,173	9,039
	Bruker Corp.	459	37,250	26,907
	Bureau Veritas SA	301	16,097	18,144
	Caesars Entertainment Inc.	248	9,942	8,288
	Capital One Financial Corp.	328	30,574	58,489
	Capgemini	505	19,840	16,392
	CBRE Group	272	23,491	35,711
	CF Inds Holdings Inc.	418	33,603	35,664
	Check Point Software Tech	254	42,194	47,422
	Churchill Downs Inc.	262	31,456	34,988
	Chubb Ltd.	37	8,166	10,223
	CIE Financiere Richemont	719	9,486	10,914
	Cincinnati Financial Corp.	166	13,232	23,854
	Citi Group Inc.	599	41,320	42,164
	Compass Group PLC	654	13,974	21,968
	Continental AG ADR	968	8,166	6,399
	Copart Inc.	568	14,518	32,598
	Coterra Energy Inc.	2030	<u>51,298</u>	<u>51,846</u>
	Brought forward		1,213,076	1,660,047

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 1,213,076	\$ 1,660,047
	CRH PLC	76	6,298	7,032
	Croda International PLC Shares	387	10,554	8,115
	CSX Corp.	1179	42,529	38,046
	DBS Group Holdings	103	6,663	13,188
	Deere & Co.	30	3,131	12,711
	Diploma PLC	32	7,352	6,830
	Disco Corporation	229	6,525	6,085
	Disney Walt Co.	952	100,988	106,005
	Dollar Tree Inc.	301	27,703	22,557
	Engie	924	12,911	14,640
	Enn Energy Holdings Ltd.	324	19,539	9,217
	Entegris Inc.	378	22,934	37,445
	Eog Resources Inc.	267	34,862	32,729
	Epiroc Aktiebolag-unsp ADR	549	10,348	9,531
	Expeditors International Wash Inc.	210	9,934	23,262
	Experian PLC	258	10,526	11,024
	Factset Resh Systems Inc.	54	7,687	25,935
	Fanuc Ltd	1018	14,315	13,275
	Fedex Corp.	131	29,647	36,854
	Flex Ltd.	1046	6,949	40,156
	Fidelity National Info	959	53,789	77,458
	Galaxy Entertainment	437	10,268	9,173
	General Motors Co.	673	27,234	35,851
	GE Healthcare	423	32,671	33,070
	Gildan Activewear Inc.	292	12,509	13,739
	Grupo Fin. Banorte	388	12,851	12,455
	Henkel AG & Co. KGaA	414	7,433	9,058
	Hexagon AB	528	5,250	4,998
	Hologic Inc.	609	45,963	43,903
	HOYA Corp.	104	10,887	12,896
	ICICI Bank Ltd.	606	11,007	18,095
	ICON PLC	52	11,847	10,905
	Illumina Inc.	158	37,471	21,114
	IMCD Group	176	12,030	13,072
	Incyte Corp.	584	38,812	40,337
	Intuitive Surgical Inc.	63	11,120	32,883
	ING GP	606	7,815	9,496
	James Hardie Industries	296	11,451	9,120
	KBC Group	360	12,127	13,885
	Keysight Technologies	172	<u>27,177</u>	<u>27,628</u>
	Brought forward		2,004,183	2,583,820

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 2,004,183	\$ 2,583,820
	Kroger Co.	689	32,988	42,132
	Kinder Morgan Inc.	1,235	22,562	33,839
	Lamb Weston Holdings Inc.	305	22,874	20,383
	Lennar Corp.	216	22,075	29,456
	Lennox International Inc.	60	13,505	36,558
	Li Ning Co., Ltd	147	17,852	7,616
	London Stock Exchange	383	10,406	13,669
	M&T Bank Corp.	181	28,876	34,030
	Match Group Inc.	621	20,479	20,313
	Merck and Co. Inc.	339	10,522	9,706
	Meta Platforms Inc.	286	29,354	167,456
	Microsoft Corp.	223	14,799	93,995
	Mitsui Fudosan Co. Ltd	327	9,212	7,835
	Mizuho Financial Group Inc.	3340	13,586	16,333
	Moelis and Company	466	16,566	34,428
	Monster Beverage Corp.	961	17,599	50,510
	MTU Aero Engines AG	127	14,613	21,041
	Nestle SA	404	33,427	33,007
	Netflix Com Inc.	147	46,538	131,024
	Newmarket Corp.	43	19,734	22,719
	Nike Inc.	256	19,334	19,372
	Notori Holdings Co. Ltd.	1106	14,355	13,095
	Nomura Research Institute Ltd. ADR	380	10,268	11,164
	Novartis AG ADR	218	13,220	21,214
	Novo Nordisk AS ADR	662	37,564	56,945
	Nvidia Corp.	1575	23,070	211,507
	NXP Semiconductors NV	246	44,029	51,131
	Old Dominion Freight Line Inc.	115	9,740	20,286
	Oracle Corp.	644	37,251	107,316
	Organon And Co.	2552	55,269	38,076
	Otis Worldwide Corp.	348	23,921	32,228
	PACS Group Inc.	146	5,570	1,914
	PayPal Holdings, Inc.	780	65,381	66,573
	Pernod Ricard Sa ADR	404	12,737	9,082
	Perrigo Co.	1376	42,830	35,377
	Piraeus Financial Holdings	3922	16,029	15,492
	Pool Corp.	82	26,704	27,957
	Post Holdings Inc.	285	17,727	32,621
	Pub SVC Enterprise Group	298	20,807	25,178
	Puma SE ADR	1644	<u>7,802</u>	<u>7,447</u>
	Brought forward		2,925,358	4,213,845

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 2,925,358	\$ 4,213,845
	PVH Corp.	466	39,715	49,280
	Qualcomm Inc.	206	13,975	31,646
	Regeneron Pharmaceuticals	50	23,178	35,617
	Recruit Holdings Co. Ltd	785	5,108	10,966
	Renesas Electronics Corp.	1102	7,994	6,970
	RELX PLC	665	19,054	30,204
	Roche Holding Ltd ADR	854	33,567	29,788
	RyanAir Holdings PLC	360	14,374	15,692
	SAP SE	55	7,803	13,542
	SalesForce Inc.	217	34,190	72,550
	Sampo PLC	610	14,131	12,346
	SEI Investments Co.	317	9,629	26,146
	Shin-ETSU Chemical	494	9,979	8,161
	Shopify, Inc. CL A	511	29,165	54,335
	Siemens AG	138	13,214	13,342
	Siemens Healthineers ADR	444	10,918	11,682
	Skyworks Solutions	301	34,078	26,693
	Southwest Airlines Co.	1,236	40,422	41,554
	Starbucks Corp.	358	24,717	32,668
	Steris PLC	138	24,029	28,367
	Suncor Energy Inc.	456	12,686	16,270
	Suzuki Motor Corp.	254	10,762	11,438
	Taiwan Semiconductors MFG Ltd ADR	242	22,721	47,793
	Techtronic Industries	193	12,607	12,663
	Telekomunikasi Indonesia	382	8,887	6,284
	Tempur Sealy International Inc.	560	28,060	31,746
	Tencent Holdings Ltd.	526	31,451	27,973
	Tesla Inc.	516	106,221	208,381
	Thales S.A. ADR	489	13,368	13,971
	Teva Pharmaceutical Industries Ltd	2,430	22,329	53,557
	Tokyo Electron Ltd Shares	146	13,031	11,021
	Thermo Fisher Scientific Inc.	50	27,084	26,011
	UniFirst Corp.	124	26,812	21,214
	Unilever PLC	582	31,922	32,998
	Universal Music Group	1,072	12,716	13,678
	Vertex Pharmaceuticals Inc.	127	27,446	51,142
	Visa Inc. CL A	350	22,327	110,613
	Vistra Corp.	270	6,195	37,224
	Vulcan Materials Co.	118	16,644	30,352
	Wells Fargo & Co.	823	35,459	57,808
	Brought forward		3,823,326	5,587,531

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 3,823,326	\$ 5,587,531
	Weyerhaeuser Co	990	31,888	27,869
	Willis Towers Watson Plc	158	35,390	49,492
	Workday Inc.	75	10,796	19,352
	Waters Corp.	78	22,024	28,936
	Yum Brands Inc.	144	9,013	19,319
	Yum China Holdings Inc.	190	7,409	9,152
	Zimmer Biomet Holdings	415	<u>43,879</u>	<u>43,836</u>
	Total Common Stocks		<u>3,983,725</u>	<u>5,785,487</u>
	PREFERRED STOCK			
	ITAU Unibanco Banco	2,597	<u>13,687</u>	<u>12,881</u>
	REAL ESTATE INVESTMENT TRUSTS			
	Agree Realty Corp.	103	7,712	7,256
	American Homes 4 Rent	323	11,181	12,087
	American Tower Corp.	411	82,982	75,382
	Americold Realty TR	438	13,172	9,373
	Avalonbay Community Inc.	37	8,315	8,139
	Crown Castle International Corp.	683	79,617	61,989
	Digital Realty Trust, Inc.	334	41,495	59,228
	Equinix Inc.	41	28,603	38,658
	Equity Lifestyles Properties Inc.	116	7,604	7,726
	Essex Property Trust, Inc.	82	18,960	23,406
	Extra Space Storage Inc.	132	18,515	19,747
	Healthcare Trust of America Inc.	951	20,538	16,119
	HighWoods Properties Inc.	351	13,317	10,734
	Host Hotels & Resorts Inc.	617	10,383	10,810
	Invitation Homes Inc.	933	35,580	29,828
	IRON Mountain REIT Inc.	254	15,587	26,698
	Kimco Realty Corp.	564	10,576	13,215
	Lamar Advertising Co. A	65	8,308	7,913
	Lineage Inc.	68	5,623	3,983
	Omega Healthcare Inv.	506	18,469	19,152
	Prologis Inc.	465	38,295	49,151
	Public Storage, Inc.	86	24,360	25,752
	Realty Income	240	14,311	12,818
	SBA Communications Corp.	30	7,172	6,114
	Simon Property Group	297	29,135	51,146
	Sun Communities Inc.	261	37,570	32,095
	UDR Inc.	384	<u>16,300</u>	<u>16,669</u>
	Brought forward		623,680	655,188

See independent auditors' report

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 623,680	\$ 655,188
	VICI Properties	842	25,466	24,595
	Welltower Inc.	586	<u>47,476</u>	<u>73,854</u>
	Total Real Estate Investment Trusts		<u>696,622</u>	<u>753,637</u>
	MUTUAL FUNDS			
	Cohen & Steers Low Duration Fund	62,787	584,518	592,080
	Lord Abbett Short Duration Income Fund	149,246	585,062	576,088
	Neuberger Berman Strategic Income Fund	58,143	<u>610,721</u>	<u>574,451</u>
	Total Mutual Funds		<u>1,780,301</u>	<u>1,742,619</u>
	Total Investments		<u>\$ 9,444,145</u>	<u>\$ 11,206,423</u>

* - Denotes a party-in-interest as defined by ERISA.

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
Year Ended December 31, 2024

Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions

EIN #: 13-2587752
Plan #: 001

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain/ (Loss)
Category (i)—Single Transactions in Excess of 5% of Plan Assets						
Bank of America, N.A.	BlackRock Liquidity Fed Fund	\$ 1,543,293	\$ -	\$ 1,543,293	\$ 1,543,293	\$ -
Category (iii)—Series of Transactions in Same Security Excess of 5% of Plan Assets						
Bank of America, N.A.	BlackRock Liquidity Fed Fund	914,325	-	914,325	914,325	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	937,658	937,658	937,658	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	1,561,247	-	1,561,247	1,561,247	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	1,359,894	1,359,894	1,359,894	-

There were no category (ii) or (iv) reportable transactions during the year ended December 31, 2024.

See independent auditors' report

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 Laerdal Medical Corporation Employees' Pension Plan	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Laerdal Medical Corporation	D Employer Identification Number (EIN) 13-2587752	
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 checked="" type="checkbox"/> 101-500 <input type="checkbox"/> More than 500	

Part I Basic Information			
1 Enter the valuation date:	Month <u>1</u>	Day <u>1</u>	Year <u>2024</u>
2 Assets:			
a Market value	2a		11,383,115
b Actuarial value	2b		11,212,753
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.....	16	1,174,838	1,174,838
b For terminated vested participants.....	70	797,299	797,299
c For active participants	185	9,662,461	9,662,461
d Total.....	271	11,634,598	11,634,598
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		5.24 %
6 Target normal cost.....			
a Present value of current plan year accruals.....	6a		875,984
b Expected plan-related expenses	6b		95,925
c Target normal cost	6c		971,909

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>06/23/2025</u> Date
	<u>CHRISTOPHER JONES</u> Type or print name of actuary	<u>23-06984</u> Most recent enrollment number
	<u>USI CONSULTING GROUP</u> Firm name	<u>(212) 878-0455</u> Telephone number (including area code)
	<u>600 THIRD AVENUE 3RD FLOOR NEW YORK NY 10016</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	1,583,906
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	1,102,776
9 Amount remaining (line 7 minus line 8)	0	481,130
10 Interest on line 9 using prior year's actual return of <u>21.76%</u>	0	104,694
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1,179,385
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>5.34%</u>		4,091
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		239,964
c Total available at beginning of current plan year to add to prefunding balance		1,423,440
d Portion of (c) to be added to prefunding balance		1,333,000
12 Other reductions in balances due to elections or deemed elections	0	14,000
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	1,904,824

Part III	Funding Percentages	
14 Funding target attainment percentage.....	14	80.00%
15 Adjusted funding target attainment percentage	15	80.00%
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	80.00%
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
04/08/2025	1,250,000				
Totals ▶			18(b)	1,250,000	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	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.....	19c	1,171,585
20 Quarterly contributions and liquidity shortfalls:		
a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?.....	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year		
(1) 1st	(2) 2nd	(3) 3rd
0	0	0
(4) 4th		
0		

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

21 Discount rate:

a Segment rates:	1st segment: 4.75 %	2nd segment: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
-------------------------	------------------------	------------------------	------------------------	---

b Applicable month (enter code) **21b** 0

22 Weighted average retirement age **22** 65

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**

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	971,909
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	2,326,669	240,737
b Waiver amortization installment.....		

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

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	1,212,646
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement	0	1,212,646
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	1,171,585

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

a Total (excess, if any, of line 37 over line 36)	38a	1,171,585
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	1,171,585

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

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

COST METHOD

In accordance with PPA, the annual cost is equal to the target normal cost plus the shortfall amortization charge minus any prefunding and carryover balances.

Unit Credit method. The normal cost is the sum of the individual normal costs for active participants. The normal cost for an individual is the present value, as of the valuation date, of the participant's retirement, death, and withdrawal benefits which he is expected to accrue during the current plan year.

The actuarial accrued liability is the sum of the individual present values, for all participants, of the benefits accrued, based on service to the valuation date.

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 specific to your pension plan. 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.

ACTUARIAL ASSUMPTIONS

Interest Rate (as prescribed by PPA and modified by MAP-21, HATFA, BBA, ARPA and IJJA)

Without Adjusted Interest Rates:

Liabilities are valued using the three segment rates based on the 24-month average of the corporate bond yield curve published by the Secretary of the Treasury for the applicable month of January 2024.

With Adjusted Interest Rates:

The interest rates are the adjusted 24-month segment rates using 25-year average segment rate corridors of 95% to 105% per Funding Relief.

PBGC Premiums:

The Plan Sponsor is using the Standard Method to determine the Variable Rate Premium.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

(continued)

	Without Adjusted Interest Rates	With Adjusted Interest Rates	PBGC Premiums
Segment 1 (0 to 5 years)	4.37%	4.75%	5.01%
Segment 2 (5 to 20 years)	4.96%	4.96%	5.13%
Segment 3 (20+ years)	4.95%	5.59%	5.15%
Effective Rate	4.94%	5.24%	5.14%

Mortality Assumption Non-Disabled – 2024 Optional Combined Mortality Table provided in IRC Regulation §1.430(h)(3)-1(e)

Disabled – 2024 Optional Combined Mortality Table provided in IRC Regulation §1.430(h)(3)-1(e)

Salary Projection – 3.00% per annum

Social Security Wage Base Increases – 2.00% per annum

Form of Payment - 10 Year Certain and Life at Normal Retirement Date

Expense Load - \$95,925 is included in the Target Normal Cost to reflect anticipated administrative expenses to be paid from the Plan Trust.

Retirement Age – 65

Cost of Living Increase – N/A

Withdrawal Rates – T-5 – See withdrawal rates in table below

Disability Rates – 50% of the 1955 UAW rates

Pre-retirement Decrement Rates

Age	Withdrawal		Disability	
	Unisex		Male	Female
20	7.938%		0.015%	0.020%
25	7.724%		0.015%	0.025%
30	7.222%		0.020%	0.030%
35	6.276%		0.025%	0.040%
40	5.150%		0.035%	0.050%
45	3.975%		0.050%	0.075%
50	2.563%		0.090%	0.130%
55	0.939%		0.180%	0.245%
60	0.090%		0.450%	0.605%

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

(continued)

Credit Balances – Excess contributions plus interest for the 2023 plan year in the amount of \$1,333,000 were elected to be added to the prefunding balance.
The voluntary/deemed reduction of the funding standard carryover balance was \$0.
The voluntary reduction of the prefunding balance was \$14,000.

Expected Return on Assets for FASB ASC 960 and Asset Smoothing –
Effective January 1, 2023: 6.50%
Effective January 1, 2024: 7.00%

RATIONALE FOR ASSUMPTIONS

1. Prescribed Assumptions: The Interest Rates and Mortality Assumptions are prescribed by the IRS and/or Plan Sponsor elections.
2. The Retirement, Withdrawal, and Disability Assumptions were chosen based on reasonable assumptions for Plans of this size and demographic.
3. The Expected Return on Plan Assets and the Salary Projection assumptions were chosen based on guidance from the Investment Advisor and Plan Sponsor, respectively.

ASSET VALUATION

The actuarial value of plan assets is developed as the 3-year average of the plan assets based on the market value of assets as of the valuation date and the "adjusted value" of market assets for each of the two immediately preceding valuation dates. The adjusted value of assets at each preceding valuation date is equal to the market value of assets on such valuation date plus the net cash flow amount (including expected earnings on investments) for each following year up to the current valuation date. In this way, one third of the investment gain or loss over the preceding twelve months is recognized in plan assets immediately, and the other two thirds is deferred. Valuation assets are further limited to a 10% corridor around market value.

ATTRIBUTION PARAMETERS

Attribution parameters determine how growth in the benefit formula is allocated to years of service.

Accrual rate proration, by component – This method attributes the benefit separately for each component of the benefit formula, based on the credited service. If there are no accrual definitions in the benefit formula, then the entire projected benefit is assigned to past service (and considered fully accrued as of the valuation date). This results in "natural" or "direct differencing" attribution.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

(continued)

ACCRUED AND VESTED BENEFITS

Vested benefits are based on the plan document's vesting schedule based on years of service. Please refer to the Summary of Plan Provisions section of this report for requirements for particular benefits.

Disability and death benefits (other than the qualified pre-retirement survivor annuity) are not treated as vested benefits for liability calculation purposes.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Summary of Plan Provisions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

SUMMARY OF PLAN PROVISIONS

Effective Date: The Effective Date of the amended Plan is November 1, 1976.
The Plan was restated effective January 1, 2013; last amended effective January 1, 2021.

Eligibility: All employees participate on the January 1st or July 1st following the attainment of age 21 and completion of 1 year of service.
The Plan is closed to new participants hired on or after January 1, 2018.

Retirement Dates:

Normal: The later of age 65 and five years of participation in the Plan.

Early: The later of age 55 and five years of participation in the Plan.

Retirement Benefits:

(a) Normal Retirement

Effective January 1, 1995, the plan has been changed to provide a lump sum payment at termination. The lump sum payment is based upon the sum of a participant's accumulated percentage of their Final Average Compensation, based upon their age, for each year they are an active participant in the Plan. In addition, Participants accumulate a percentage of their Final Average Compensation in excess of the Average Social Security Wage Base, based upon their age, for each year they are an active Participant in the Plan. The chart below outlines the applicable percentage accumulated for each Year of participation based upon a participant's age. The Average Social Security Wage Base (AVSSWB) is defined as an average of the taxable wage bases over the 35 years preceding the year a Participant reaches his Social Security Retirement Age. The Social Security Retirement Age is between 65 and 67 depending on a Participant's year of birth.

<u>Age</u>	<u>Percentage of Final Average Pay</u>	<u>Percentage of Final Average Pay in Excess of the AVSSWB</u>
21 – 34	2.0%	N/A
35 – 39	3.5%	1%
40 – 44	5.0%	2%
45 – 49	6.5%	3%
50 – 54	8.0%	3%
55 – 59	10.5%	4%
60 and up	14.0%	4%

In no event will a Participant's benefit be less than his prior accrued benefit as of December 31, 1994. The prior accrued benefit provided a monthly pension equal to 34% of Final Average Compensation plus 8.8% of Final Average Compensation in excess of \$12,156, the Earnings Base.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Summary of Plan Provisions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

(continued)

The resultant amount is multiplied by a fraction where the numerator is the Participant's service at December 31, 1994, and the denominator is the Participant's total service at Normal Retirement Date, but not less than 15.

Notwithstanding the foregoing, effective August 1, 2004, the following chart shall be used in calculating the normal retirement benefit:

<u>Age</u>	<u>Percentage of Final Average Pay</u>	<u>Percentage of Final Average Pay in Excess of the AVSSWB</u>
21 – 34	0.5%	N/A
35 – 39	1.0%	1%
40 – 44	2.5%	2%
45 – 49	4.0%	3%
50 – 54	5.5%	3%
55 – 59	8.0%	4%
60 and up	11.0%	4%

Effective January 1, 2021, a participant must complete a Year of Service (1,000 hours) in order to receive a benefit accrual for the Plan Year.

(b) Final Average Compensation: Determined using the highest five consecutive calendar years of total salary. Compensation is limited to \$345,000 for the 2024 Plan Year and for all future years.

(c) Early Retirement: The early retirement benefit is the benefit the employee will have at early retirement based upon the formula outlined for normal retirement.

Termination of Employment:

Vesting: Employees who terminate on or after January 1, 2008 will be 100% vested after 3 years of service.

Employees who terminate before January 1, 2008 will be vested according to the following schedule:

<u>Years of Service</u>	<u>Vesting Percentage</u>
Less than 1	0%
1 but less than 2	20%
2 but less than 3	40%
3 but less than 4	60%
4 but less than 5	80%
5 years or more	100%

Employees hired on or after January 1, 1995 will be 100% vested after 5 years, and 0% vested before.

**Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Line 26 - Schedule of Active Participant Data**

EIN/PN: 13-2587752/001

Plan Year: 01/01/2024 - 12/31/2024

Years of Credited Service:

Attained Age	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	Total
No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.
Under 25	0	0	0	0	0	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0	0	0	0	0	0
30 to 34	0	0	9	3	0	0	0	0	0	0	12
35 to 39	0	0	8	7	1	0	0	0	0	0	16
40 to 44	0	0	4	4	10	3	0	0	0	0	21
45 to 49	0	0	14	4	8	1	1	0	0	0	28
50 to 54	0	0	8	5	9	7	6	0	1	0	36
55 to 59	0	0	4	2	7	5	6	6	0	0	30
60 to 64	0	0	1	7	7	4	5	1	2	0	27
65 to 69	0	0	1	3	4	1	4	1	0	0	14
70 & up	0	0	0	1	0	0	0	0	0	0	1
Total	0	0	49	36	46	21	22	8	3	0	185

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Line 24 – Assumptions Change
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

Effective January 1, 2024, the Actuary's Best Estimated Assumed Rate of Return has been updated to 7.00%.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Line 22 – Description of Weighted Average Retirement Age
EIN/PN: 13-2587752/001
Plan Year: 01/01/2024 – 12/31/2024

The Plan assumes that 100% of all active employees will retire at age 65.

LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN
Schedule SB, Line 32 – Schedule of Amortization Bases
EIN/PN: 13-2587752 / 001
Plan Year: 01/01/2024 – 12/31/2024

Type of Base	Present Value of Remaining Installments as of 01/01/2024	Valuation Date Base Is Established For	Number of Years Remaining	Amortization Installment Amount as of 01/01/2024
Shortfall	\$1,606,598	01/01/2021	12	\$171,989
Shortfall	\$187,350	01/01/2022	13	\$18,923
Shortfall	\$255,499	01/01/2023	14	\$24,488
Shortfall	\$277,222	01/01/2024	15	\$25,337
Total	\$2,326,669	N/A	N/A	\$240,737

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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 AND INTEREST				
BEARING CASH				
		SHARES / UNITS		
	BlackRock Liquidity Fund T-Fund	16,700	\$ 16,700	\$ 16,700
	BLF FedFund Cash Reserve	822,203	822,203	822,203
*	ISA Bank of America	8,523	8,523	8,523
	Total Money Market Fund and Interest Bearing Cash		<u>847,426</u>	<u>847,426</u>
CORPORATE AND U.S. GOVERNMENT				
SECURITIES				
	FHLMC RA 5391	3%; 2051	87,014	85,842
	FHLMC SD 1087	3.5%; 2052	789	781
	FHLMC SD 3478	2.5%; 2052	12,185	12,045
	FHLMC SD 4583	3.5%; 2053	17,462	17,058
	FHLMC SD 6653	3.5%; 2053	5,288	5,242
	FHLMC SD 8157	3%; 2051	10,070	8,129
	FHLMC SD 8168	3%; 2051	23,402	18,951
	FHLMC SD 8179	3%; 2051	13,786	11,224
	FHLMC SD 8190	3%; 2052	15,389	12,583
	FHLMC SD 8196	3.5%; 2052	13,734	11,687
	FHLMC SD 8213	3%; 2052	5,179	5,121
	FHLMC SD 8220	3%; 2052	22,308	20,701
	FHLMC SD 8221	3.5%; 2052	32,579	30,415
	FHLMC SD 8227	4%; 2052	17,653	16,601
	FHLMC SD 8243	3.5%; 2052	2,372	2,360
	FHLMC SD 8244	4%; 2052	6,561	6,454
	FHLMC SD 8258	5%; 2052	5,903	5,723
	FHLMC SD 8264	3.5%; 2052	15,428	14,960
	FHLMC SD 8299	5%; 2053	1,717	1,724
	FHLMC SD 8316	5.5%; 2053	860	845
	FHLMC SD 8342	5.5%; 2053	9,662	9,628
	FHLMC SD 8344	6.5%; 2053	4,790	4,779
	FHLMC SD 8347	4.5%; 2053	21,200	21,107
	FHLMC SD 8360	4.5%; 2053	51,691	51,315
	FHLMC SD 8363	6%; 2053	876	853
	FHLMC SD 8384	6%; 2053	8,359	8,327
	FHLMC SD 8393	4.5%; 2054	901	894
	FHLMC SD 8438	5.5%; 2054	13,019	12,872
	FHLMC SD 8468	5%; 2054	5,792	5,695
	FHLMC SD 8469	5.5%; 2054	6,817	6,728
	FHLMC SD 8473	4.5%; 2054	7,606	7,482
	FHLMC SD 8487	4%; 2054	2,792	2,732
	FHLMC SB 1057	5%; 2038	830	822
	FHLMC SB 1215	6%; 2039	21,676	21,527
	Brought forward		<u>465,690</u>	<u>443,207</u>

See independent auditors' report

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 465,690	\$ 443,207
	FHLMC SB 8132	2%; 2036	9,330	9,253
	FHLMC SB 8243	5%; 2038	2,964	2,939
	FHLMC SB 8272	5%; 2038	4,749	4,702
	FHLMC SB 8328	5.5%; 2039	36,104	35,455
	FHLMC SB 8353	5.5%; 2040	10,138	10,066
	FNMA PCB3586	3%; 2052	789	751
	FNMA PFM7599	3.5%; 2051	1,014	702
	FNMA PFS3497	3.5%; 2052	1,658	1,585
	FNMA PFS4928	3.5%; 2050	1,646	1,584
	FNMA PFS5387	2.5%; 2052	778	762
	FNMA PFS5452	3.5%; 2053	58,970	58,326
	FNMA PFS6256	3.5%; 2052	25,705	25,575
	FNMA PFS6631	2.5%; 2052	197,154	194,935
	FNMA PFS7751	4%; 2053	885	880
	FNMA PFS7879	2.5%; 2052	5,512	5,492
	FNMA PFS8852	2.5%; 2052	18,739	18,303
	FNMA PFS8874	3%; 2052	13,673	13,337
	FNMA PFS9366	2.5%; 2052	5,728	5,659
	FNMA PMA4468	3.5%; 2051	23,598	19,498
	FNMA PMA4565	3.5%; 2052	2,367	2,046
	FNMA PMA4579	3%; 2052	1,533	1,429
	FNMA PMA4599	3%; 2052	2,295	2,200
	FNMA PMA4654	3.5%; 2052	809	770
	FNMA PMA4731	3.5%; 2052	1,664	1,571
	FNMA PMA4737	5%; 2052	4,144	3,904
	FNMA PMA4782	3.5%; 2052	20,265	19,812
	FNMA PMA4783	4%; 2052	11,353	11,228
	FNMA PMA4869	5.5%; 2053	24,618	23,853
	FNMA PMA4918	5%; 2053	30,487	30,228
	FNMA PMA5087	5.5%; 2038	2,310	2,285
	FNMA PMA5107	5.5%; 2053	27,900	27,803
	FNMA PMA5139	6%; 2053	22,575	22,492
	FNMA PMA5164	5%; 2053	907	899
	FNMA PMA5294	5%; 2054	14,813	14,777
	FNMA PMA5300	5.5%; 2039	4,580	4,572
	FNMA PMA5389	6%; 2054	5,514	5,477
	FNMA PMA5425	5.5%; 2039	7,750	7,630
	FNMA PMA5446	6.5%; 2054	17,097	16,950
	FNMA PMA5448	5%; 2039	905	893
	FNMA PMA5507	5%; 2039	11,108	11,062
	GNM PMA7883M	3.5%; 2052	<u>17,866</u>	<u>16,401</u>
	Brought forward		1,117,684	1,081,293

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 1,117,684	\$ 1,081,293
	GNM PMA7939M	4%; 2052	31,552	29,472
	GNM PMA7989M	3.5%; 2052	5,930	5,918
	GNM PMA8149M	3.5%; 2052	11,622	11,326
	GNM PMA8150M	4%; 2052	4,130	3,933
	GNM PMA8151M	4.5%; 2052	4,292	3,983
	GNM PMA8346M	4%; 2052	25,321	24,927
	GNM PMA8347M	4.5%; 2052	6,008	5,733
	GNM PMA8425M	3.5%; 2052	829	788
	GNM PMA8426M	4%; 2052	1,623	1,617
	GNM PMA8492M	6%; 2052	8,938	8,831
	GNM PMA8726M	5.50%; 2053	11,556	11,355
	GNM PMA9015M	4.5%; 2053	46,486	46,026
	GNM PMA9103M	4%; 2053	12,804	12,900
	GNM PMA9104M	4.50%; 2053	890	893
	GNM PMA9106M	5.50%; 2053	3,393	3,436
	GNM PMA9107M	6%; 2053	2,990	3,021
	GNM PMA9305M	5.5%; 2053	11,368	11,349
	GNM PMA9424M	6%; 2054	3,801	3,796
	GNM PMA9489M	6%; 2054	10,933	10,949
	GNM PMA9541M	5.5%; 2054	4,494	4,523
	GNM PMA9726M	6%; 2054	992	989
	GNM PMB0024M	4.5%; 2054	5,758	5,666
	U.S.Treasury Bond	1.75%; 2041	99,597	90,654
	U.S.Treasury Bond	3%; 2052	78,436	69,594
	U.S.Treasury Note	4%; 2028	264,101	266,555
	U.S.Treasury Note	3.625%; 2029	107,659	106,507
	U.S.Treasury Note	4.00%; 2034	86,960	84,248
	U.S.Treasury Note	2.75%; 2027	<u>152,237</u>	<u>154,091</u>
	Total Corporate and U.S. Government Securities		<u>2,122,384</u>	<u>2,064,373</u>
	COMMON STOCKS			
	3i Group PLC	365	7,228	8,249
	ABB Ltd.	334	11,072	17,939
	Adidas AG Sponsored	105	13,011	12,786
	AerCap Holdings	416	24,637	39,811
	AES Corp.	2996	40,246	38,559
	AIA Group Ltd.	408	16,192	11,759
	Air Liquide ADR	478	12,619	15,416
	Alibaba Group Holding	194	23,314	16,449
	Allison Transmission Holdings Inc.	391	19,094	42,251
	Alphabet Inc. CI A	391	<u>17,020</u>	<u>74,016</u>
	Brought forward		184,433	277,235

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 184,433	\$ 277,235
	Alphabet Inc. CI C	343	7,074	65,321
	Amazon Com Inc.	649	37,352	142,384
	Amphenol Corp. CI A	486	14,150	33,753
	AON PLC	64	16,473	22,986
	AptarGroup Inc.	170	24,960	26,707
	Armstrong World Inds Inc.	306	29,807	43,247
	Autodesk Inc.	210	13,339	62,070
	ASML Holdings NV NY Reg	22	20,346	15,248
	ASM International - NY Reg	20	7,169	11,383
	Avantor Inc.	2478	53,561	52,212
	Baker Hughes Co.	836	24,146	34,293
	Ball Corp.	470	31,975	25,911
	Bank Mandiri Tbk	762	7,143	10,508
	Barrick Gold Corp.	2,348	39,105	36,394
	Bath and Body Works Inc.	1,167	41,158	45,245
	Baxter International Inc.	1,264	41,916	36,858
	BellRing Brands Inc.	220	6,072	16,575
	Berkshire Hathaway Inc.	83	24,556	37,622
	Block Inc.	271	28,350	23,032
	Boeing Co.	550	93,672	97,350
	Boyd Gaming Corp.	155	6,549	11,244
	Bristol-Myers Squibb Co.	733	38,990	41,459
	Brown Forman Corp.	238	16,173	9,039
	Bruker Corp.	459	37,250	26,907
	Bureau Veritas SA	301	16,097	18,144
	Caesars Entertainment Inc.	248	9,942	8,288
	Capital One Financial Corp.	328	30,574	58,489
	Capgemini	505	19,840	16,392
	CBRE Group	272	23,491	35,711
	CF Inds Holdings Inc.	418	33,603	35,664
	Check Point Software Tech	254	42,194	47,422
	Churchill Downs Inc.	262	31,456	34,988
	Chubb Ltd.	37	8,166	10,223
	CIE Financiere Richemont	719	9,486	10,914
	Cincinnati Financial Corp.	166	13,232	23,854
	Citi Group Inc.	599	41,320	42,164
	Compass Group PLC	654	13,974	21,968
	Continental AG ADR	968	8,166	6,399
	Copart Inc.	568	14,518	32,598
	Coterra Energy Inc.	2030	<u>51,298</u>	<u>51,846</u>
	Brought forward		1,213,076	1,660,047

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 1,213,076	\$ 1,660,047
	CRH PLC	76	6,298	7,032
	Croda International PLC Shares	387	10,554	8,115
	CSX Corp.	1179	42,529	38,046
	DBS Group Holdings	103	6,663	13,188
	Deere & Co.	30	3,131	12,711
	Diploma PLC	32	7,352	6,830
	Disco Corporation	229	6,525	6,085
	Disney Walt Co.	952	100,988	106,005
	Dollar Tree Inc.	301	27,703	22,557
	Engie	924	12,911	14,640
	Enn Energy Holdings Ltd.	324	19,539	9,217
	Entegris Inc.	378	22,934	37,445
	Eog Resources Inc.	267	34,862	32,729
	Epiroc Aktiebolag-unsp ADR	549	10,348	9,531
	Expeditors International Wash Inc.	210	9,934	23,262
	Experian PLC	258	10,526	11,024
	Factset Resh Systems Inc.	54	7,687	25,935
	Fanuc Ltd	1018	14,315	13,275
	Fedex Corp.	131	29,647	36,854
	Flex Ltd.	1046	6,949	40,156
	Fidelity National Info	959	53,789	77,458
	Galaxy Entertainment	437	10,268	9,173
	General Motors Co.	673	27,234	35,851
	GE Healthcare	423	32,671	33,070
	Gildan Activewear Inc.	292	12,509	13,739
	Grupo Fin. Banorte	388	12,851	12,455
	Henkel AG & Co. KGaA	414	7,433	9,058
	Hexagon AB	528	5,250	4,998
	Hologic Inc.	609	45,963	43,903
	HOYA Corp.	104	10,887	12,896
	ICICI Bank Ltd.	606	11,007	18,095
	ICON PLC	52	11,847	10,905
	Illumina Inc.	158	37,471	21,114
	IMCD Group	176	12,030	13,072
	Incyte Corp.	584	38,812	40,337
	Intuitive Surgical Inc.	63	11,120	32,883
	ING GP	606	7,815	9,496
	James Hardie Industries	296	11,451	9,120
	KBC Group	360	12,127	13,885
	Keysight Technologies	172	<u>27,177</u>	<u>27,628</u>
	Brought forward		2,004,183	2,583,820

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 2,004,183	\$ 2,583,820
	Kroger Co.	689	32,988	42,132
	Kinder Morgan Inc.	1,235	22,562	33,839
	Lamb Weston Holdings Inc.	305	22,874	20,383
	Lennar Corp.	216	22,075	29,456
	Lennox International Inc.	60	13,505	36,558
	Li Ning Co., Ltd	147	17,852	7,616
	London Stock Exchange	383	10,406	13,669
	M&T Bank Corp.	181	28,876	34,030
	Match Group Inc.	621	20,479	20,313
	Merck and Co. Inc.	339	10,522	9,706
	Meta Platforms Inc.	286	29,354	167,456
	Microsoft Corp.	223	14,799	93,995
	Mitsui Fudosan Co. Ltd	327	9,212	7,835
	Mizuho Financial Group Inc.	3340	13,586	16,333
	Moelis and Company	466	16,566	34,428
	Monster Beverage Corp.	961	17,599	50,510
	MTU Aero Engines AG	127	14,613	21,041
	Nestle SA	404	33,427	33,007
	Netflix Com Inc.	147	46,538	131,024
	Newmarket Corp.	43	19,734	22,719
	Nike Inc.	256	19,334	19,372
	Notori Holdings Co. Ltd.	1106	14,355	13,095
	Nomura Research Institute Ltd. ADR	380	10,268	11,164
	Novartis AG ADR	218	13,220	21,214
	Novo Nordisk AS ADR	662	37,564	56,945
	Nvidia Corp.	1575	23,070	211,507
	NXP Semiconductors NV	246	44,029	51,131
	Old Dominion Freight Line Inc.	115	9,740	20,286
	Oracle Corp.	644	37,251	107,316
	Organon And Co.	2552	55,269	38,076
	Otis Worldwide Corp.	348	23,921	32,228
	PACS Group Inc.	146	5,570	1,914
	PayPal Holdings, Inc.	780	65,381	66,573
	Pernod Ricard Sa ADR	404	12,737	9,082
	Perrigo Co.	1376	42,830	35,377
	Piraeus Financial Holdings	3922	16,029	15,492
	Pool Corp.	82	26,704	27,957
	Post Holdings Inc.	285	17,727	32,621
	Pub SVC Enterprise Group	298	20,807	25,178
	Puma SE ADR	1644	<u>7,802</u>	<u>7,447</u>
	Brought forward		2,925,358	4,213,845

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 2,925,358	\$ 4,213,845
	PVH Corp.	466	39,715	49,280
	Qualcomm Inc.	206	13,975	31,646
	Regeneron Pharmaceuticals	50	23,178	35,617
	Recruit Holdings Co. Ltd	785	5,108	10,966
	Renesas Electronics Corp.	1102	7,994	6,970
	RELX PLC	665	19,054	30,204
	Roche Holding Ltd ADR	854	33,567	29,788
	RyanAir Holdings PLC	360	14,374	15,692
	SAP SE	55	7,803	13,542
	SalesForce Inc.	217	34,190	72,550
	Sampo PLC	610	14,131	12,346
	SEI Investments Co.	317	9,629	26,146
	Shin-ETSU Chemical	494	9,979	8,161
	Shopify, Inc. CL A	511	29,165	54,335
	Siemens AG	138	13,214	13,342
	Siemens Healthineers ADR	444	10,918	11,682
	Skyworks Solutions	301	34,078	26,693
	Southwest Airlines Co.	1,236	40,422	41,554
	Starbucks Corp.	358	24,717	32,668
	Steris PLC	138	24,029	28,367
	Suncor Energy Inc.	456	12,686	16,270
	Suzuki Motor Corp.	254	10,762	11,438
	Taiwan Semiconductors MFG Ltd ADR	242	22,721	47,793
	Techtronic Industries	193	12,607	12,663
	Telekomunikasi Indonesia	382	8,887	6,284
	Tempur Sealy International Inc.	560	28,060	31,746
	Tencent Holdings Ltd.	526	31,451	27,973
	Tesla Inc.	516	106,221	208,381
	Thales S.A. ADR	489	13,368	13,971
	Teva Pharmaceutical Industries Ltd	2,430	22,329	53,557
	Tokyo Electron Ltd Shares	146	13,031	11,021
	Thermo Fisher Scientific Inc.	50	27,084	26,011
	UniFirst Corp.	124	26,812	21,214
	Unilever PLC	582	31,922	32,998
	Universal Music Group	1,072	12,716	13,678
	Vertex Pharmaceuticals Inc.	127	27,446	51,142
	Visa Inc. CL A	350	22,327	110,613
	Vistra Corp.	270	6,195	37,224
	Vulcan Materials Co.	118	16,644	30,352
	Wells Fargo & Co.	823	35,459	57,808
	Brought forward		3,823,326	5,587,531

See independent auditors' report

Laerdal Medical Corporation
Employees' Pension Plan

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 3,823,326	\$ 5,587,531
	Weyerhaeuser Co	990	31,888	27,869
	Willis Towers Watson Plc	158	35,390	49,492
	Workday Inc.	75	10,796	19,352
	Waters Corp.	78	22,024	28,936
	Yum Brands Inc.	144	9,013	19,319
	Yum China Holdings Inc.	190	7,409	9,152
	Zimmer Biomet Holdings	415	<u>43,879</u>	<u>43,836</u>
	Total Common Stocks		<u>3,983,725</u>	<u>5,785,487</u>
	PREFERRED STOCK			
	ITAU Unibanco Banco	2,597	<u>13,687</u>	<u>12,881</u>
	REAL ESTATE INVESTMENT TRUSTS			
	Agree Realty Corp.	103	7,712	7,256
	American Homes 4 Rent	323	11,181	12,087
	American Tower Corp.	411	82,982	75,382
	Americold Realty TR	438	13,172	9,373
	Avalonbay Community Inc.	37	8,315	8,139
	Crown Castle International Corp.	683	79,617	61,989
	Digital Realty Trust, Inc.	334	41,495	59,228
	Equinix Inc.	41	28,603	38,658
	Equity Lifestyles Properties Inc.	116	7,604	7,726
	Essex Property Trust, Inc.	82	18,960	23,406
	Extra Space Storage Inc.	132	18,515	19,747
	Healthcare Trust of America Inc.	951	20,538	16,119
	HighWoods Properties Inc.	351	13,317	10,734
	Host Hotels & Resorts Inc.	617	10,383	10,810
	Invitation Homes Inc.	933	35,580	29,828
	IRON Mountain REIT Inc.	254	15,587	26,698
	Kimco Realty Corp.	564	10,576	13,215
	Lamar Advertising Co. A	65	8,308	7,913
	Lineage Inc.	68	5,623	3,983
	Omega Healthcare Inv.	506	18,469	19,152
	Prologis Inc.	465	38,295	49,151
	Public Storage, Inc.	86	24,360	25,752
	Realty Income	240	14,311	12,818
	SBA Communications Corp.	30	7,172	6,114
	Simon Property Group	297	29,135	51,146
	Sun Communities Inc.	261	37,570	32,095
	UDR Inc.	384	<u>16,300</u>	<u>16,669</u>
	Brought forward		623,680	655,188

See independent auditors' report

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
December 31, 2024

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

EIN #: 13-2587752
Plan #: 001

(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
	Carried forward	SHARES / UNITS	\$ 623,680	\$ 655,188
	VICI Properties	842	25,466	24,595
	Welltower Inc.	586	<u>47,476</u>	<u>73,854</u>
	Total Real Estate Investment Trusts		<u>696,622</u>	<u>753,637</u>
	MUTUAL FUNDS			
	Cohen & Steers Low Duration Fund	62,787	584,518	592,080
	Lord Abbett Short Duration Income Fund	149,246	585,062	576,088
	Neuberger Berman Strategic Income Fund	58,143	<u>610,721</u>	<u>574,451</u>
	Total Mutual Funds		<u>1,780,301</u>	<u>1,742,619</u>
	Total Investments		<u>\$ 9,444,145</u>	<u>\$ 11,206,423</u>

* - Denotes a party-in-interest as defined by ERISA.

**Laerdal Medical Corporation
Employees' Pension Plan**

Schedule Pursuant to Department of Labor Requirements
Year Ended December 31, 2024

Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions

EIN #: 13-2587752
Plan #: 001

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain/ (Loss)
Category (i)—Single Transactions in Excess of 5% of Plan Assets						
Bank of America, N.A.	BlackRock Liquidity Fed Fund	\$ 1,543,293	\$ -	\$ 1,543,293	\$ 1,543,293	\$ -
Category (iii)—Series of Transactions in Same Security Excess of 5% of Plan Assets						
Bank of America, N.A.	BlackRock Liquidity Fed Fund	914,325	-	914,325	914,325	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	937,658	937,658	937,658	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	1,561,247	-	1,561,247	1,561,247	-
Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	1,359,894	1,359,894	1,359,894	-

There were no category (ii) or (iv) reportable transactions during the year ended December 31, 2024.

See independent auditors' report