

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [X] Form 5558 [] automatic extension... E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here...

Part II Basic Plan Information—enter all requested information

1a Name of plan: DANA NON-UNION RETIREE VEBA TRUST
1b Three-digit plan number (PN): 501
1c Effective date of plan: 05/01/2007
2a Plan sponsor's name (employer, if for a single-employer plan): THE DANA NON-UNION RETIREE COMMITTEE
2b Employer Identification Number (EIN): 20-7392576
2c Plan Sponsor's telephone number: 312-641-0060
2d Business code (see instructions): 525100

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

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

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

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	1432
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	0
	6a(2)	0
	6b	1141
	6c	0
	6d	1141
	6e	
	6f	
	6g(1)	
6g(2)		
6h		
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:
4A

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

A Name of plan DANA NON-UNION RETIREE VEBA TRUST	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 THE DANA NON-UNION RETIREE COMMITTEE	D Employer Identification Number (EIN) 20-7392576

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

1 Coverage Information:

(a) Name of insurance carrier
HUMANA INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
39-1263473	73288	306067/9/85/185	1373	01/01/2024	12/31/2024

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

(a) Total amount of commissions paid 65094	(b) Total amount of fees paid 0
-------------------------------------------------------------	--------------------------------------------------

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

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
THE SEGAL CO MIDWEST INC
7701 FRANCE AVE S
SUITE 225
EDINA, MN 55435-5288

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
65094			3

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

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

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
	7c(2)	
	7c(3)	
	7c(4)	
	7c(5)	
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	7e(2)	
	7e(3)	
	7e(4)	
	(5) Total deductions	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	0

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)		
	(2) Increase (decrease) in amount due but unpaid	9a(2)		
	(3) Increase (decrease) in unearned premium reserve	9a(3)		
	(4) Earned ((1) + (2) - (3))		9a(4)	0
b	Benefit charges (1) Claims paid	9b(1)		
	(2) Increase (decrease) in claim reserves	9b(2)		
	(3) Incurred claims (add (1) and (2))		9b(3)	0
	(4) Claims charged		9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions	9c(1)(A)		
	(B) Administrative service or other fees	9c(1)(B)		
	(C) Other specific acquisition costs	9c(1)(C)		
	(D) Other expenses	9c(1)(D)		
	(E) Taxes	9c(1)(E)		
	(F) Charges for risks or other contingencies	9c(1)(F)		
	(G) Other retention charges	9c(1)(G)		
	(H) Total retention		9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
	(2) Claim reserves		9d(2)	
	(3) Other reserves		9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a		1875751
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b		

Specify nature of costs.

Part IV Provision of Information

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

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

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

<p>A Name of plan DANA NON-UNION RETIREE VEBA TRUST</p>	<p>B Three-digit plan number (PN) ▶</p>	<p>501</p>
<p>C Plan sponsor's name as shown on line 2a of Form 5500 THE DANA NON-UNION RETIREE COMMITTEE</p>	<p>D Employer Identification Number (EIN) 20-7392576</p>	

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

1 Coverage Information:

(a) Name of insurance carrier
HUMANA INSURANCE COMPANY OF NEW YORK

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
20-2888723	12634	306083/89	1	01/01/2024	12/31/2024

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

<p>(a) Total amount of commissions paid</p> <p style="color: blue;">46</p>	<p>(b) Total amount of fees paid</p> <p style="color: blue;">0</p>
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

THE SEGAL CO MIDWEST INC
7701 FRANCE AVE S
SUITE 225
EDINA, MN 55435-5288

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
46			3

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

e Type of contract: (1) individual policies (2) group deferred annuity
 (3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) deposit administration (2) immediate participation guarantee
 (3) guaranteed investment (4) other ▶

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
	7c(2)	
	7c(3)	
	7c(4)	
	7c(5)	
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	7e(2)	
	7e(3)	
	7e(4)	
	(5) Total deductions	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	0

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)		
	(2) Increase (decrease) in amount due but unpaid	9a(2)		
	(3) Increase (decrease) in unearned premium reserve	9a(3)		
	(4) Earned ((1) + (2) - (3))		9a(4)	0
b	Benefit charges (1) Claims paid	9b(1)		
	(2) Increase (decrease) in claim reserves	9b(2)		
	(3) Incurred claims (add (1) and (2))		9b(3)	0
	(4) Claims charged		9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions	9c(1)(A)		
	(B) Administrative service or other fees	9c(1)(B)		
	(C) Other specific acquisition costs	9c(1)(C)		
	(D) Other expenses	9c(1)(D)		
	(E) Taxes	9c(1)(E)		
	(F) Charges for risks or other contingencies	9c(1)(F)		
	(G) Other retention charges	9c(1)(G)		
	(H) Total retention		9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
	(2) Claim reserves		9d(2)	
	(3) Other reserves		9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a		531
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b		

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE 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 DANA NON-UNION RETIREE VEBA TRUST	B Three-digit plan number (PN) ▶	501
C Plan sponsor's name as shown on line 2a of Form 5500 THE DANA NON-UNION RETIREE COMMITTEE	D Employer Identification Number (EIN) 20-7392576	

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)

COMPREHENSIVE BENEFITS

11-3056825

(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?
12 13 50	NONE	299655	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)

MYCIO WEALTH PARTNERS LLC

20-2611371

(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?
16 27 28 51 70 50	NONE	115270	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)

BDO USA, P.C.

13-5381590

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	38667	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

DICKINSON-WRIGHT PLCC

38-1364333

(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?
29 50	NONE	30338	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)

DONNA DOYLE

20-7392576

(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?
20 50	TRUSTEE	12000	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)

JOHN BLACK

20-7392576

(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?
20 50	TRUSTEE	8000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

TIMOTHY ZORN

20-7392576

(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?
20 50	TRUSTEE	8000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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 DANA NON-UNION RETIREE VEBA TRUST	B Three-digit plan number (PN) ▶ 501
C Plan sponsor's name as shown on line 2a of Form 5500 THE DANA NON-UNION RETIREE COMMITTEE	D Employer Identification Number (EIN) 20-7392576

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

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	742648	1095680
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	91057	117021
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1547149	875907
(2) U.S. Government securities	1c(2)	5983918	5980862
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	6196042	6105949
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	2456065	2287041
(5) Partnership/joint venture interests	1c(5)	1161	0
(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)	24889472	23419981
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	60445	78175

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	41967957	39960616
Liabilities			
g Benefit claims payable.....	1g	1277445	1054192
h Operating payables.....	1h	2423	28171
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	1279868	1082363
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	40688089	38878253

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)	1221542	
(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)		1221542
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	515898	
(B) U.S. Government securities.....	2b(1)(B)	398427	
(C) Corporate debt instruments.....	2b(1)(C)	113767	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	4262	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1032354
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	43303	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	318059	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		361362
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	12074899	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	10647197	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		1427702
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-1263668	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-1263668

		(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)		1995950
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		4775242

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)	1868965	
(3) Other	2e(3)	4096034	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		5964999
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)	299655	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	38667	
(5) Investment advisory and investment management fees	2i(5)	115270	
(6) Bank or trust company trustee/custodial fees	2i(6)	28000	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)	30338	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	108149	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		620079
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6585078

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-1809836
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: **BDO USA, P.C.**

(2) EIN: **13-5381590**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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

Dana Non-Union Retiree VEBA Trust

Financial Statements
and Supplemental Schedules
Years Ended December 31, 2024 and 2023

The report accompanying these financial statements was issued by BDO USA, P.C., a Virginia professional corporation, and the U.S. member of BDO International Limited, a UK company limited by guarantee.



Dana Non-Union Retiree VEBA Trust

Financial Statements and Supplemental Schedules
Years Ended December 31, 2024 and 2023

Dana Non-Union Retiree VEBA Trust

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Independent Auditor's Report

The Administrative Board
Dana Non-Union Retiree VEBA Trust
Hauppauge, New York

Opinion

We have audited the financial statements of Dana Non-Union Retiree VEBA Trust (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements 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 (GAAP).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our 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 GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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

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



Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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 Schedule Required by ERISA and Other Supplemental Schedule

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. The supplemental schedules of general and administrative expenses for the years ended December 31, 2024 and 2023 are presented for additional analysis and are also not required part of the financial statements. 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 GAAS.

In forming our opinion on the supplemental Schedule of Assets (Held at End of Year), we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying supplemental Schedule of Assets (Held at End of Year) and the supplemental schedule of administrative general and administrative expenses are fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content of supplemental Schedule of Assets (Held at End of Year) is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

BDO USA, P.C.

August 18, 2025

Dana Non-Union Retiree VEBA Trust
Statements of Net Assets Available for Benefits

<i>December 31,</i>	2024	2023
Assets		
Investments, at fair value:		
Mutual funds	\$ 13,502,349	\$ 14,350,202
Exchange-traded funds	9,917,632	10,539,270
Corporate bonds	6,105,949	6,196,042
Common stocks	2,287,041	2,456,065
U.S. government obligations	5,980,862	5,983,918
Hedge fund	-	1,161
Interest-bearing cash	875,907	1,547,149
Municipal obligation	78,175	60,445
Total Investments, at fair value	38,747,915	41,134,252
Cash	1,095,680	742,648
Accrued interest	77,709	77,709
Prepaid expenses	39,312	13,348
Total Assets	39,960,616	41,967,957
Liabilities		
Accrued expenses and other liabilities	28,171	2,423
Net Assets Available for Benefits	\$ 39,932,445	\$ 41,965,534

See the accompanying notes to financial statements.

Dana Non-Union Retiree VEBA Trust

Statements of Changes in Net Assets Available for Benefits

<i>Year ended December 31,</i>	2024	2023
Participant Contributions	\$ 1,221,542	\$ 1,282,580
Investment Income		
Interest and dividends	1,393,716	1,158,128
Net appreciation in fair value of investments	2,159,984	4,248,829
	3,553,700	5,406,957
Less: investment expenses	115,270	102,849
Net Investment Income	3,438,430	5,304,108
Cost of Benefits		
Major medical:		
Medical benefits	4,319,007	3,319,215
Premium reimbursements	280	4,831
Administration fees	279,788	310,643
Prescription drugs	1,868,965	1,915,997
Total Cost of Benefits	6,468,040	5,550,686
General and Administrative Expenses	225,021	209,623
Net (Decrease) Increase	(2,033,089)	826,379
Net Assets Available for Benefits, beginning of year	41,965,534	41,139,155
Net Assets Available for Benefits, end of year	\$ 39,932,445	\$ 41,965,534

See the accompanying notes to financial statements.

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

1. Description of the Plan

The following description of the Dana Non-Union Retiree VEBA Trust (the Plan) is provided for general information purposes only. Participants should refer to the Plan documents for a complete description of the Plan's provisions.

General

The Plan was established on May 1, 2007 to provide certain medical and prescription drug benefits to eligible non-union retired employees, surviving spouses, and dependents of the Dana Corporation (Dana). The Plan was established as a Voluntary Employee Benefits Association (VEBA) and is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Plan Funding

The Plan was initially funded through a VEBA Trust (the Trust), established by the Dana Non-Union Retiree Committee with monies obtained solely from Dana pursuant to a Stipulation and Agreed Order (the Order) between Dana and the Official Committee of Non-Union Retirees. The Order provided, in part, that Dana was to pay a total of \$78,800,000 to the Trust, of which \$25,000,000 was received in 2007 and the remainder in 2008. The Dana Non-Union Retiree Committee appointed the Administrative Board (the Board) to act collectively as Plan Administrator of the Plan.

The Plan also is funded by participant contributions in amounts as determined by the Board based upon coverage and years of service (service-based credits), as defined in the Plan document. All contributions are used exclusively to provide benefits to eligible participants, and to pay all expenses incurred with respect to the operation of the Plan.

Eligibility

Individuals are eligible to participate in the Plan if all of the following conditions are met: (a) were a former employee of Dana; (b) while working at Dana, were not represented in the Order by a labor organization; and (c) were receiving or were eligible to receive non-pension retiree benefits from Dana as of March 31, 2007.

Plan Benefits

The Plan pays for covered major medical and prescription drug claims (subject to applicable deductibles, co-payments, and other limitations and restrictions). The Plan provides varying forms of coverage for Medicare and non-Medicare eligible participants. Non-Medicare eligible participants must purchase individual health care insurance, pay the premiums, and then file for reimbursement from the Plan. Medical benefits are self-insured, and prescription drug benefits are fully-insured.

Administration

The Board has the responsibility and authority to manage the Plan. In that regard, the Board has engaged the services of a third-party administrator, Comprehensive Benefits (CB), to provide administrative services to the Plan for which CB is compensated on a monthly basis. CB manages, evaluates, and pays self-insured medical benefit claims for participants.

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

The Board also has engaged Humana Insurance Company to provide prescription drug coverage for all Medicare eligible participants. Commissions related to the prescription drug coverage in the amount of \$65,140 and \$77,350 were used to offset actuarial fees for the years ended December 31, 2024 and 2023, respectively.

Benefits are recorded when paid. Amounts for claims in the current year that were not paid as of year-end are included in total benefit obligations.

2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared using the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (GAAP) requires the Plan's management to make estimates and assumptions that affect the reported amounts of assets, liabilities, benefit obligations and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

Cash

Cash deposits with financial institutions are denominated in U.S. dollars. Deposits may exceed the amounts insured by the Federal Deposit Insurance Corporation in the U.S.

Concentration of Credit Risk

The Plan maintains accounts at a high-quality financial institution. While the Plan attempts to limit any financial exposure, its deposit balances may, at times, exceed federally insured limits. The Plan has not experienced any losses on such accounts.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion on fair value measurements.

Net appreciation or depreciation in fair value of investments includes realized gains or losses on investments sold and unrealized gains or losses on investments held. Unrealized gains or losses on investments represent the difference between the market value and cost of investments at the end of the year and at the beginning of the year.

Purchases and sales of securities are recorded on a trade-date basis. Dividend income is recorded on the ex-dividend date. Interest income is recorded on the accrual basis.

Payment of Benefits

Benefits are recorded when paid.

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

3. Plan Benefit Obligations

Estimated Future Benefits for Postretirement Benefit Obligations

The amount reported as the postretirement benefit obligation represents the actuarial present value of those estimated future benefits that are attributed by the terms of the Plan to participants as of the date of the financial statements. The obligations represent the amounts that are to be funded by contributions from the Plan participants and from existing Plan assets.

The actuarial present value of the expected postretirement benefit obligation is determined by the Plan's actuary and is the amount that results from applying actuarial assumptions to historical claims-cost data to estimate future annual incurred claims costs per participant and to adjust such estimates for the time value of money (through discounts for interest) and the probability of payment (by means of decrements, such as those for death or withdrawal) between the valuation date and the expected date of payment.

Plan obligations for claims incurred but not reported are estimated by the Plan's actuary in accordance with accepted actuarial principles based on claims data provided by CB. The amounts are paid by the Plan only if claims are submitted and approved for payment.

The following table presents the components of the Plan's benefit obligations:

<i>December 31,</i>	2024	2023
Health claims currently payable and estimated health claims incurred but not reported	\$ 1,054,192	\$ 1,277,445
Postretirement benefit obligations:		
Current retirees, beneficiaries, and dependents	29,277,169	31,473,486
Other participants fully eligible for benefits	41,794	123,781
Total Postretirement Benefit Obligations	29,318,963	31,597,267
Plan's Total Benefit Obligations	\$ 30,373,155	\$ 32,874,712

The following table presents the changes in the Plan's benefit obligations:

<i>Year ended December 31,</i>	2024	2023
Amounts Currently Payable		
Balance, beginning of year	\$ 1,277,445	\$ 1,018,557
Claims reported and approved for payment	6,244,507	5,804,743
Claims paid	(6,467,760)	(5,545,855)
Balance, end of year	\$ 1,054,192	\$ 1,277,445

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

<i>Year ended December 31,</i>	2024	2023
Postretirement Benefit Obligations		
Balance , beginning of year	\$ 31,597,267	\$ 34,385,560
Benefits earned net of benefits paid	(3,214,424)	(3,203,192)
Actuarial experience gain	(17,254)	(1,056,974)
Changes in actuarial assumptions	(362,213)	413,212
Plan amendment	1,315,587	1,058,661
Balance , end of year	\$ 29,318,963	\$ 31,597,267

The Plan is a benefit plan using service-based credits. There are no medical costs valued and, therefore, no trend rates applied.

Effective January 1, 2024, the benefit payable was increased from \$8.72 to \$9.04 per month for each year of service for Medicare eligible participants. Effective January 1, 2025, the benefit payable was increased from \$9.04 to \$9.49 per month for each year of service for Medicare eligible participants. The impact of the Plan amendment was included in the Plan's postretirement benefit obligations as of December 31, 2024.

The following were other significant assumptions used in the valuations as of December 31, 2024 and 2023:

Discount rate	5.15% for 2024 and 4.85% for 2023
Postretirement mortality rates	Pri-2012 Healthy Retiree White Collar Headcount-Weighted Mortality Table, projected forward generationally from 2021 with 105% of the MP-2021 improvement scale for salaried retirees and the Pri-2012 Healthy Retiree Blue Collar Headcount-Weighted Mortality Table, projected forward generationally from 2021 with 105% of the MP-2021 improvement scale for hourly retirees.
Administrative expenses	Administrative expenses were assumed to be \$125 per participant with a minimum total of \$150,000 per year.
Benefit credits	\$9.04 per month per year of service for Medicare eligible participants for 2024 \$13.08 per month per year of service for Medicare eligible participants for 2023

The foregoing 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 the postretirement benefit obligations.

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 (the Act) provides a federal subsidy to sponsors of retiree health care benefit plans that provide a prescription drug benefit to Medicare-eligible retirees. Because it has elected to purchase coverage through a fully insured Medicare approved prescription drug program, the Plan is not eligible for this benefit.

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

4. Fair Value Measurements

The Plan follows the provisions of Accounting Standards Codification (ASC) 820, *Fair Value Measurement*. ASC 820 establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under ASC 820 are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets.
- Quoted prices for identical or similar assets or liabilities in inactive markets.
- Inputs other than quoted prices that are observable for the asset or liability.
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

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

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

Mutual Funds, Exchange-Traded Funds, and Common Stocks - Mutual funds, exchange-traded funds, and common stocks are traded on a national securities exchange and are valued at the last reported sales price on the last business day of the Plan's year by the custodian.

Interest-Bearing Cash - Interest-bearing cash are cash equivalents that are valued at cost plus accrued interest, which approximates fair value.

Corporate Bonds, U.S. Government Obligations, and Municipal Obligations - Corporate bonds, U.S. government obligations, and municipal obligations are valued using evaluated pricing methods.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

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

December 31, 2024

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 13,502,349	\$ -	\$ -	\$ 13,502,349
Exchange-traded funds	9,917,632	-	-	9,917,632
Corporate bonds	-	6,105,949	-	6,105,949
Common stocks	2,287,041	-	-	2,287,041
U.S. government obligations	-	5,980,862	-	5,980,862
Interest-bearing cash	-	875,907	-	875,907
Municipal obligation	-	78,175	-	78,175
Total	\$ 25,707,022	\$ 13,040,893	\$ -	\$ 38,747,915

December 31, 2023

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 14,350,202	\$ -	\$ -	\$ 14,350,202
Exchange-traded funds	10,539,270	-	-	10,539,270
Corporate bonds	-	6,196,042	-	6,196,042
Common stocks	2,456,065	-	-	2,456,065
U.S. government obligations	-	5,983,918	-	5,983,918
Interest-bearing cash	-	1,547,149	-	1,547,149
Municipal obligation	-	60,445	-	60,445
Total Investments, at fair value	\$ 27,345,537	\$ 13,787,554	\$ -	41,133,091
Hedge fund measured at NAV*				1,161
Total				\$ 41,134,252

* Investments measured at fair value using the NAV per share (or its equivalent) practical expedient are not categorized in the fair value hierarchy. The fair value amounts presented in the preceding tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Fair Value of Investments Calculated at NAV

In 2014, the Plan invests in the Private Advisors Hedged Equity Fund (QP), Ltd. (the Fund). The Fund is an exempted investment company, which was formed on December 16, 2003 under the laws of the Cayman Islands. On July 1, 2009, the Fund contributed all of its assets and liabilities to the Private Advisors Hedged Equity Master Fund, Ltd. (the Master Fund) in exchange for an interest in the Master Fund. The Fund invests all of its assets through a master-feeder structure in the Master Fund, an investment company that has the same investment objectives as the Fund. The objective is to seek long-term capital appreciation above historical equity returns, over a full market cycle, with volatility that is lower than that of the equity market and returns that demonstrate a low correlation to both the equity and fixed income markets. The Fund offers quarterly redemptions at

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

March 31, June 30, September 30, and December 31 with 65 days written notice prior to the effective date. There is a one-year lock-up period from initial investment. There were no unfunded commitments as of December 31, 2024 and 2023. The NAV was \$0 and \$1,161, respectively, as of December 31, 2024 and 2023.

5. Tax Status

The Trust funding the Plan has received an exemption letter from the Internal Revenue Service (IRS), dated September 10, 2008, stating that the Trust is tax-exempt under the provisions of Section 501(c)(9) of the Internal Revenue Code (the Code) as a VEBA. The Plan and Trust are required to operate in conformity with the Code to maintain the tax-exempt status of the Trust. The Plan Administrator believes that the Plan is designed and being operated in compliance with the applicable requirements of the Code and, therefore, the related trust is tax exempt.

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 audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

6. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for plan benefits per the financial statements to Form 5500:

<i>December 31,</i>	2024	2023
Net Assets Available for Benefits , per financial statements	\$ 39,932,445	\$ 41,965,534
Health claims currently payable and estimated health claims incurred but not reported	(1,054,192)	(1,277,445)
Net Assets Available for Benefits , per Form 5500	\$ 38,878,253	\$ 40,688,089

The following is a reconciliation of benefits paid per the financial statements to Form 5500:

Year ended December 31, 2024

Costs of benefits	\$ 6,468,040
Less: benefit administration fees	(279,788)
Benefits Paid , per financial statements	6,188,252
Add: amounts currently payable at December 31, 2024	1,054,192
Less: amounts currently payable at December 31, 2023	(1,277,445)
Benefits Paid , per Form 5500	\$ 5,964,999

Dana Non-Union Retiree VEBA Trust

Notes to Financial Statements

7. Party-in-Interest Transactions

Certain Plan assets are managed by the custodian, Charles Schwab Bank. Any activities involving these assets are performed in the open market at fair value and qualify as party-in-interest transactions. As described in Notes 1 and 2, the Plan has several arrangements with service providers. Such transactions, while considered party-in-interest transactions under ERISA regulations, are permitted under the provisions of the Plan and are specifically exempt from the prohibition of party-in-interest transactions under ERISA.

8. Plan Termination

Although it has not expressed any intent to do so, the Board has the right to terminate the Plan in whole or in part after determining that termination is in the best interest of the Plan participants. The Board reserves the right to terminate, suspend, withdraw, amend, or modify the Plan and Plan benefits in whole or in part at any time, subject to the applicable provisions of ERISA and the Trust agreement.

In the event that the Plan is discontinued, the Board will use the remaining assets of the Plan to provide benefits, pay administration expenses, and carry out the purpose of the Plan in an equitable manner pursuant to the provisions of the Trust agreement until the Plan assets have been disbursed.

9. Risks and Uncertainties

The Plan invests in various investment securities. Due to various risks (e.g., interest rate, market, credit) associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in the values of investments will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

As of December 31, 2024 and 2023, there were \$4,614,298 and \$4,844,204 of investments held, which individually accounted for more than 10% of total investments, respectively. See the supplemental Schedule of Assets (Held at End of Year) for a complete listing of investments held at December 31, 2024.

The actuarial present value of benefit obligations is reported based on certain assumptions pertaining to interest rates, mortality rates, and participant demographics (service-based credits), all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

10. Subsequent Events

For purposes of determining the effect of subsequent events on these financial statements, the Plan has evaluated events subsequent to December 31, 2024 and through August 18, 2025, the date the financial statements were available to be issued.

ERISA-Required Supplemental Schedule

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value		Cost	Current Value
	<u>Units</u>			
Mutual Funds				
DIMENSIONAL FUND ADVISORS		DFA US SMALL CAP PORT		
	23,214	INSTL	\$ 747,113	\$ 1,135,861
DODGE & COX HARBOR CAPITAL	29,605	DODGE & COX INTL STOCK FD HARBOR CAPITAL	1,204,146	1,477,291
	20,544	APPRECIATION FUND RTRMT	1,770,209	2,344,722
HARDING LOEVNER		HARDING LOEVNER INTL		
	59,370	EQUITY	1,179,500	1,455,168
JP MORGAN JP MORGAN	22,132	JP MORGAN HEDGED EQTY FD JP MORGAN HEDGED EQUITY 2	513,334	733,009
	76,342	CL I	1,138,893	1,416,138
SCHWAB VANGUARD	1,000,850	GOVT MONEY FU ULTRA VANGUARD HI-YIELD CORP FD	1,000,850	1,000,850
	425,378	ADMIRAL SH	2,453,207	2,305,550
VANGUARD		VANGUARD SHORT-TERM		
	158,464	INVST GRADE ADM	1,670,962	1,633,760
Total Mutual Funds			11,678,214	13,502,349
Exchange-Traded Funds				
ISHARES		ISHARES CORE MSCI		
	25,542	EMERGING ETF	1,442,080	1,333,803
ISHARES	36,731	ISHARES MSCI EAFE	2,232,374	2,777,231
ISHARES	14,323	ISHARES RUSSELL 1000	1,335,067	4,614,298
ISHARES	5,396	ISHARES RUSSELL 2000	845,558	1,192,300
Total Exchange-Traded Funds			5,855,079	9,917,632
	<u>Units</u>	<u>Rate (%)</u>	<u>Maturity</u>	
Corporate Bonds				
AON PLC	20,000	4.450	05/24/43	16,861
ACE INA HLDGS	25,000	6.700	05/15/36	33,325
AFLAC INC	55,000	3.600	04/01/30	54,265
AFLAC INC	20,000	6.450	08/15/40	29,886
ALABAMA PWR CO	45,000	5.500	03/15/41	51,712
ALLSTATE CORPORAT	40,000	4.500	06/15/43	52,804
ALTRIA GROUP, INC	65,000	4.800	02/14/29	77,675
AMERICAN EXPRESS	45,000	8.150	03/19/38	58,259
AMERICREDIT AUTO	179,876	5.750	02/18/28	179,868
AMGEN IN	25,000	4.200	02/22/52	25,646
ANGLESEA FUNDING	25,000	5.400	06/01/53	24,564
APPALACHIAN POWER	55,000	6.700	07/29/05	78,641
ARCHER-DANIELS-	25,000	4.016	04/16/43	29,479
AT&T IN	20,000	5.150	11/15/46	25,913
AT&T IN	55,000	1.650	02/01/28	50,830
BANK AMER CORP	35,000	3.970	03/05/29	38,832
BANK OF AMERICA C VA	30,000	4.680	02/04/33	25,772

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			(d) Cost	(e) Current Value
Identity of Issuer, Borrower, Lessor, or Similar Party		Units	Rate (%)	Maturity		
Corporate Bonds (continued)						
BANK OF AMERICA C VA		175,000	3.559	04/23/27	\$ 191,204	\$ 172,111
BANKS 2024-5YR104.8		130,000	4.830	10/15/57	131,298	130,095
BRISTOL MYERS SQU		22,000	6.800	11/15/26	27,411	22,859
BRISTOL-MYERS S		30,000	5.875	11/15/36	39,037	31,040
BROADCOM IN		40,000	4.750	04/15/29	46,914	39,689
BURLINGTON NO		40,000	6.150	05/01/37	52,078	42,772
CAMPBELL SOUP C		40,000	3.125	04/24/50	28,068	25,673
CAPITAL ONE FINL VA		45,000	3.273	03/01/30	44,689	41,535
CAPITAL ONE FINL COR		35,000	5.817	02/01/34	32,904	35,128
CARMAX AUTO OWNER T		120,000	6.000	07/17/28	123,033	122,136
CINTAS CORPORATIO		55,000	3.700	04/01/27	52,676	53,947
CITIGROUP INC		120,000	3.790	03/17/33	114,151	107,834
CITIGROUP INC		25,000	6.625	01/15/28	31,345	26,240
COMCAST CORP		25,000	3.400	04/01/30	28,933	23,227
COMCAST CORP		70,000	4.150	10/15/28	76,525	68,279
CONOCOPHILLIPS CO		35,000	4.300	11/15/44	38,120	29,136
CONSOLIDATED EDIS		55,000	5.500	12/01/39	61,108	54,649
CSX CORP		40,000	6.150	05/01/37	50,696	42,409
CVS HEALTH CORP		25,000	5.050	03/25/48	27,793	20,460
DIAGEO CAPITAL		50,000	5.875	09/30/36	71,454	52,651
DUKE ENERGY FLA LLC		75,000	3.200	1/15/2027	71,980	72,962
DUKE ENERGY PROGR		15,000	6.300	04/01/38	21,684	15,981
ATON CORP		40,000	7.650	11/15/29	56,727	45,039
MERSON ELECTRI		65,000	6.125	04/15/39	72,015	68,841
NTERPRISE PRODU		20,000	6.650	10/15/34	28,997	21,726
NTERPRISE PRODUC		15,000	5.100	02/15/45	13,328	13,779
OG RESOURCES, IN		65,000	5.100	01/15/36	65,955	62,990
QUITABLE COS INC		30,000	7.000	04/01/28	37,966	31,657
RP OPERATING LIM		15,000	4.500	07/01/44	19,347	12,896
RP OPERATING LIMIT		15,000	3.000	07/01/29	15,878	13,964
EDEX CORPORATION		35,000	5.100	01/15/44	40,083	31,868
IFTH THIRD BANC		55,000	2.550	03/15/29	55,181	52,238
ISERV, IN		75,000	4.200	10/01/28	86,132	72,858
GENERAL MILLS INC		40,000	4.000	04/17/25	40,170	39,872
GENUINE PARTS CO		40,000	2.750	02/01/32	37,893	33,678
GOLDMAN SACHS GR		90,000	3.850	01/26/27	96,389	88,397
GOLDMAN SACHS GROUP		30,000	3.814	04/23/29	32,981	28,831
GOLDMAN SACHS INTER		40,000	3.690	02/24/33	37,881	34,317
HARLEY-DAVIDSON		125,000	5.370	03/15/29	124,994	126,396
HONEYWELL INTER		50,000	4.875	09/01/29	50,101	50,293
JP MORGAN CHASE BANK		60,000	3.509	01/23/29	65,865	57,335

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Corporate Bonds (continued)						
JPMORGAN CHASE	25,000	2.963	01/25/33	\$ 23,304	\$ 21,619	
JPMORGAN CHASE	140,000	2.950	10/01/26	148,368	136,399	
INCOLN NATIONA	75,000	3.625	12/12/26	76,208	73,521	
MARKEL CORP	50,000	3.500	11/01/27	45,907	48,157	
MARKEL CORPORATION	35,000	5.000	03/30/43	33,471	30,766	
MCDONALD'S CORP	30,000	5.150	09/09/52	29,715	27,304	
MCKESSON CORP	60,000	5.100	07/15/33	60,416	59,510	
METLIFE, IN	30,000	5.000	07/15/52	30,367	27,011	
MONDELEZ INTERNL	34,000	7.000	08/11/37	37,389	37,399	
MORGAN STANLEY	45,000	3.772	01/24/29	49,850	43,371	
MORGAN STANLEY	115,000	3.875	01/27/26	123,089	114,141	
MORGAN STANLEY	20,000	4.450	02/13/32	19,278	16,331	
MORGAN STANLEY	55,000	1.593	05/04/27	55,615	52,723	
MORGAN STANLEY	100,000	2.780	02/13/32	106,847	96,118	
MORGAN STANLEY C	215,929	3.540	12/17/48	211,303	213,699	
NISSAN AUTO RECE	150,000	5.930	03/15/28	152,835	152,130	
NORFOLK & WESTER	30,000	7.050	05/01/37	36,547	33,235	
NUTRIEN LT	15,000	5.400	06/21/34	15,048	14,912	
NUTRIEN LT	25,000	5.800	03/27/53	25,123	24,626	
NUTRIEN LTD.	30,000	4.200	04/01/29	34,036	29,079	
ONEOK, IN	65,000	3.250	06/01/30	58,147	58,945	
ORACLE CORPORATI	80,000	2.950	05/15/25	78,848	79,442	
PARKER HANNIFIN	45,000	6.250	05/15/38	57,839	48,099	
PFIZER IN	20,000	7.200	03/15/39	32,620	23,151	
PFIZER INCORPORA	20,000	5.950	04/01/37	21,661	20,840	
PHILLIPS 66	40,000	5.875	05/01/42	44,414	39,724	
PNC FINANCIAL SR	30,000	3.150	05/19/27	32,237	28,856	
PNC FINL SVCS GR	60,000	2.550	2030	59,963	53,326	
PNC FINL SVCS GROUP	35,000	6.037	10/28/33	35,031	36,196	
PRUDENTIAL FINL	10,000	6.625	12/01/37	14,939	10,941	
RPM INTERNL IN	40,000	4.550	03/01/29	37,606	39,203	
SHELL FIN US IN	20,000	4.375	05/11/45	24,118	16,728	
SPECTRA ENERGY P	25,000	5.950	09/25/43	29,978	24,722	
STRYKER CORP	45,000	1.950	2030	44,679	38,574	
SYSCO CORP	30,000	4.450	3/15/2048	33,399	24,418	
T-MOBILE USA IN	55,000	4.375	04/15/40	57,973	47,486	
TAMPA ELECTRIC C	50,000	6.150	05/15/37	72,126	51,735	
TARGA RESOURCES P	80,000	5.500	03/01/30	78,414	80,160	
THE CHARLES SCHW	70,000	3.250	05/22/29	62,249	65,283	
THE CHARLES SCHWA VA	45,000	6.136	08/24/34	42,107	47,112	
THE HARTFORD FI	15,000	6.625	03/30/40	16,600	16,037	
THE HARTFORD FINL	25,000	2.800	08/19/29	24,911	22,786	
THE KRAFT HEINZ	40,000	4.875	10/01/49	35,707	34,302	
THE KROGER CO.	40,000	6.900	2038	58,183	43,924	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Corporate Bonds (continued)						
THE WALT DISNEY	10,000	7.625	2028	\$ 14,573	\$ 11,021	
THOMSON CORP	55,000	5.500	08/15/35	55,597	55,019	
TOYOTA AUTO RECE	270,000	5.010	02/15/29	271,601	272,708	
TRUIST FINL CORP VA	60,000	5.420	01/26/29	58,376	59,632	
TRUIST FINL CORP VA	30,000	5.830	10/28/33	30,680	31,047	
UNION PACIFIC C	30,000	6.625	02/01/29	33,526	32,134	
UNITED PARCEL	55,000	8.375	04/01/30	81,504	61,704	
UNITED TECH CORP	35,000	5.700	04/15/40	45,958	34,998	
US BANKCORP	85,000	5.850	10/21/33	84,297	86,707	
VERIZON COMMS	30,000	4.400	11/01/34	33,269	27,798	
VERIZON COMMUN!	25,000	3.875	03/01/52	18,116	18,466	
VERIZON COMMUNIC	20,000	2.550	03/21/31	20,016	17,232	
VIRGINIA ELEC &	50,000	8.875	11/15/38	77,334	65,193	
WEC ENERGY GROUP	35,000	4.300	10/15/48	37,304	28,729	
WELLS FARGO & CO VA	35,000	4.611	04/25/53	32,983	29,346	
WELLS FARGO & COM VA	40,000	3.584	05/22/28	42,741	38,583	
WELLS FARGO BK NA	65,000	3.000	10/23/26	62,105	63,052	
WESTLAKE CHEMICAL	15,000	3.600	08/15/26	16,278	14,640	
WESTLAKE CHEMICAL C	25,000	5.000	08/15/46	31,825	21,751	
WILLIAMS PARTNER	25,000	4.850	03/01/48	30,922	21,240	
WISCONSIN P&L	45,000	6.375	08/15/37	58,314	48,152	
Total Corporate Bonds				6,701,100	6,105,949	
Common Stocks						
ABBOTT LABORATORIES	255			24,443	28,843	
ABBVIE INC	268			44,953	47,624	
ALLEGION PUBLIC LTD CO F	88			9,785	11,500	
ALPHABET INC.	344			30,300	65,119	
ALTIMAR ACQUISITION	1,218			21,469	28,331	
AMERICAN EXPRESS CO	138			22,979	40,957	
AMGEN INCORPORATED	99			25,117	25,803	
AON PLC	87			27,223	31,247	
APPLIED MATERIALS	106			9,544	17,239	
ASTRAZENECA PLC	266			17,563	17,428	
AUTONATION INC	127			19,227	21,570	
AUTOZONE INC	10			10,631	32,020	
BOOKING HOLDINGS INC	3			6,117	14,905	
BUILDERS FIRSTSOURCE INC	86			14,352	12,292	
CANADIAN NATURAL RES	620			7,362	19,139	
CENCORA INC	175			23,858	39,319	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party		Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value
		Units	Rate (%)	Maturity		
Common Stocks (continued)						
CENOVUS ENERGY INC		1,457			\$ 23,396	\$ 22,074
CENTERPOINT ENERGY INC		775			19,196	24,591
CHUBB LTD		54			7,439	14,920
CIGNA CORP		17			4,756	4,694
COCA COLA EUROPEAN PARTNERS		182			7,537	13,979
CONOCOPHILLIPS		334			25,310	33,123
CORPAY INC		95			24,521	32,150
CRH PUBLIC LIMITED C		431			21,300	39,876
DEERE & CO		42			10,404	17,795
DELL TECHNOLOGIES		186			9,476	21,435
DELTA AIR LINES INC		402			23,857	24,321
DIAMONDBACK ENERGY		232			41,742	38,009
DISCOVER FINANCIAL SVCS		238			32,411	41,229
EMERSON ELECTRIC CO		209			22,857	25,901
FIDELITY NATL INFORMATION SVCS		483			34,715	39,012
FIRSTENERGY CORP		671			27,201	26,692
FLEXTRONICS INTL LTD		813			23,257	31,211
FORTIVE CORPORATION		321			21,345	24,075
GALLAGHER ARTHUR J & co		48			8,926	13,625
GENERAL DYNAMICS CORP		91			17,040	23,978
GOLDMAN SACHS GROUP INC		33			8,921	18,896
HEWLETT PACKARD ENTERPRISE C		776			16,773	16,568
HOLOGIC INC		254			19,834	18,311
HOME DEPOT INC		64			22,226	24,895
HONEYWELL INTERNATIONAL		228			46,611	51,503
HUMANA INC		18			4,581	4,567
HUNTINGTON BANCSHS		2,101			27,662	34,183
INTERCONTINENTAL EXCHANGE INC.		106			10,851	15,795
J P MORGAN CHASE & CO		479			54,367	114,821
JACOBS SOLUTIONS INC		184			24,692	24,586
JOHNSON & JOHNSON		32			4,620	4,628
KBR INC		204			13,345	11,818
KENVUE INC		1,409			31,060	30,082
KEYSIGHT TECHNOLOGIES		142			21,872	22,809
KINROSS GOLD CORP NEW		1,782			14,906	16,519
LEIDOS HOLDINGS INC		175			16,795	25,211
LENNAR CORP CLASS A		133			21,166	18,137

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Common Stocks (continued)						
LPL FINANCIAL HLDGS INC	136			\$ 34,666	\$ 44,405	
MGM GRAND	260			11,421	9,009	
MARATHON PETE CORP	176			10,038	24,552	
MASCO CORP	179			9,521	12,990	
MCKESSON CORPORATION	64			22,446	36,474	
MEDTRONIC PLC	58			4,696	4,633	
MICROCHIP TECHNOLOGY	320			23,502	18,352	
MICRON TECHNOLOGY INC	358			26,115	30,129	
MORGAN STANLEY	279			23,916	35,076	
NEXTERA ENERGY INC	243			17,481	17,421	
NICE SYSTEMS	90			16,251	15,286	
NORFOLK SOUTHN CORP	139			35,649	32,623	
NXP SEMICONDUCTORS	55			10,081	11,432	
OMNICOM GROUP	257			23,438	22,112	
ORACLE CORPORATION	339			37,726	56,491	
PHILIP MORRIS INTL INC	424			41,090	51,028	
PHILLIPS 66	82			10,722	9,342	
PPL CORPORATION	716			24,685	23,241	
ROBERT HALF INTL	249			16,678	17,545	
SANOFI ADR	97			4,701	4,678	
SCHLUMBERGER LTD	838			28,452	32,129	
SMURFIT WESTROCK LTD	404			18,195	21,759	
SYSCO CORP	559			43,077	42,741	
T-MOBILE US INC	110			13,418	24,280	
TECK RESOURCESLTD CL B	542			23,910	21,967	
TRIMBLE NAV LTD	238			14,515	16,817	
UBER TECHNOLOGIES IN	379			23,504	22,861	
UNITED CONTL HLDGS INC	239			19,550	23,207	
UNITED RENTALS INC	23			4,968	16,202	
UNITEDHEALTH GROUP INC	95			38,156	48,057	
US FOODS HOLDING COR	541			21,068	36,496	
WABTEC CORP	139			11,624	26,353	
WALT DISNEY CO	225			25,619	25,054	
WELLS FARGO & CO	469			21,176	32,944	
Total Common Stocks				1,793,946	2,287,041	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
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December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Face Value	Rate (%)	Maturity			
U.S. Government Obligations						
FHLMC A7-2770	\$ 6,021	5.500	-	\$ 6,408	\$ 6,074	
FHLMC A9-2470	26,688	5.000	-	28,234	26,790	
FHLMC C03920	7,059	3.500	05/01/42	7,464	6,357	
FHLMC G0-6501	37,803	4.000	04/01/41	38,244	36,081	
FHLMC GI-3833	158	4.500	05/01/25	168	158	
FHLMC Q38893	26,497	4.000	02/01/46	28,307	24,597	
FHLMC RA6910	39,996	3.500	03/01/52	37,304	35,528	
FHLMC SD1115	321,619	4.000	07/01/52	297,246	296,772	
FHLMC SD4712	298,930	4.500	12/01/52	286,922	281,234	
FHLMC SD4752	387,318	5.000	07/01/53	370,252	376,028	
FHLMC SD6541	59,818	5.000	10/01/54	58,771	57,936	
FHLMC SD8214	350,325	3.500	05/01/52	341,922	309,786	
FNMA PL AJ4894	27,634	4.000	02/01/42	29,240	25,976	
FNMA PL BE0468	38,818	3.000	10/01/46	38,763	33,367	
FNMA PL BV5584	118,650	3.500	05/01/52	116,573	106,014	
FNMA PL CB1371	382,264	2.500	08/01/51	392,794	314,522	
FNMA PL CB2610	282,351	2.000	01/01/52	271,668	221,419	
FNMA PL CB3175	95,504	3.500	03/01/52	88,729	84,807	
FNMA PL CB5534	197,388	4.500	01/01/53	187,642	185,962	
FNMA PL FM2801	149,833	3.000	03/01/50	158,242	129,607	
FNMA PL FS0348	243,312	2.000	01/01/52	232,363	192,827	
FNMA PL FS0350	310,694	2.000	01/01/52	303,053	244,947	
FNMA PL FS6058	68,160	2.500	04/01/52	49,179	56,286	
FNMA PL FS7130	373,766	5.000	01/01/54	357,268	360,764	
FNMA PL FS8486	515,929	4.500	12/01/52	493,397	485,686	
FNMA PL MA0640	14,629	4.500	2041	14,882	14,067	
GNMA MA0909	12,913	3.000	04/20/28	13,794	12,529	
GNMA MA2679	15,471	4.000	03/20/45	16,679	14,567	
GNMA PL MA7024M	131,229	2.500	12/20/35	138,503	120,932	
GNMA PL MA7283M	96,541	2.000	04/20/36	99,634	86,673	
GNMA PL 786656C	285,726	5.000	04/20/53	285,279	279,837	
US TREAS BD	490,000	2.875	05/15/43	430,270	371,022	
US TREASUR	270,000	4.000	01/31/29	267,275	266,372	
US TREASUR	405,000	4.000	01/31/31	405,845	395,381	
US TREASURY	525,000	3.625	02/15/53	454,838	426,892	
GOV NATL MTG ASSN	127,052	1.100	12/16/62	102,029	93,065	
Total U.S. Government Obligations	6,740,096			6,449,181	5,980,862	

Dana Non-Union Retiree VEBA Trust

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December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party		Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value
		<u>Rate (%)</u>				
*	Interest-Bearing Cash SCHWAB BANK SWEEP		0.450		875,907	875,907
		<u>Face Value</u>	<u>Rate (%)</u>	<u>Maturity</u>		
	Municipal Obligation NEW JERSEY ST	70,000	7.102	2041	79,325	78,175
Total Assets					\$34,432,752	\$38,747,915

* Indicates party-in-interest

Other Supplemental Schedule

Dana Non-Union Retiree VEBA Trust
Schedules of General and Administrative Expenses

<i>Year ended December 31,</i>	2024	2023
Actuarial fees, net of commissions of \$65,140 and \$77,350 for 2024 and 2023, respectively	\$ -	\$ -
Administrator fees	19,867	23,223
Legal fees	30,338	45,204
Auditing fees	38,667	39,377
Insurance	34,654	25,965
Trustee compensation	28,000	26,000
Printing and other office expenses	-	5,217
Postage and delivery	37,990	29,905
Bank fees	106	488
Processing and other fees	35,399	14,244
	\$ 255,021	\$ 209,623

Dana Non-Union Retiree VEBA Trust

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Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value		Cost	Current Value
	<u>Units</u>			
Mutual Funds				
DIMENSIONAL FUND ADVISORS		DFA US SMALL CAP PORT		
	23,214	INSTL	\$ 747,113	\$ 1,135,861
DODGE & COX HARBOR CAPITAL	29,605	DODGE & COX INTL STOCK FD HARBOR CAPITAL	1,204,146	1,477,291
	20,544	APPRECIATION FUND RTRMT	1,770,209	2,344,722
HARDING LOEVNER		HARDING LOEVNER INTL		
	59,370	EQUITY	1,179,500	1,455,168
JP MORGAN	22,132	JP MORGAN HEDGED EQTY FD	513,334	733,009
JP MORGAN		JP MORGAN HEDGED EQUITY 2		
	76,342	CL I	1,138,893	1,416,138
SCHWAB	1,000,850	GOVT MONEY FU ULTRA	1,000,850	1,000,850
VANGUARD		VANGUARD HI-YIELD CORP FD		
	425,378	ADMIRAL SH	2,453,207	2,305,550
VANGUARD		VANGUARD SHORT-TERM		
	158,464	INVST GRADE ADM	1,670,962	1,633,760
Total Mutual Funds			11,678,214	13,502,349
Exchange-Traded Funds				
ISHARES		ISHARES CORE MSCI		
	25,542	EMERGING ETF	1,442,080	1,333,803
ISHARES	36,731	ISHARES MSCI EAFE	2,232,374	2,777,231
ISHARES	14,323	ISHARES RUSSELL 1000	1,335,067	4,614,298
ISHARES	5,396	ISHARES RUSSELL 2000	845,558	1,192,300
Total Exchange-Traded Funds			5,855,079	9,917,632
	<u>Units</u>	<u>Rate (%)</u>	<u>Maturity</u>	
Corporate Bonds				
AON PLC	20,000	4.450	05/24/43	16,861
ACE INA HLDGS	25,000	6.700	05/15/36	33,325
AFLAC INC	55,000	3.600	04/01/30	54,265
AFLAC INC	20,000	6.450	08/15/40	29,886
ALABAMA PWR CO	45,000	5.500	03/15/41	51,712
ALLSTATE CORPORAT	40,000	4.500	06/15/43	52,804
ALTRIA GROUP, INC	65,000	4.800	02/14/29	77,675
AMERICAN EXPRESS	45,000	8.150	03/19/38	58,259
AMERICREDIT AUTO	179,876	5.750	02/18/28	179,868
AMGEN IN	25,000	4.200	02/22/52	25,646
ANGLESEA FUNDING	25,000	5.400	06/01/53	24,564
APPALACHIAN POWER	55,000	6.700	07/29/05	78,641
ARCHER-DANIELS-	25,000	4.016	04/16/43	29,479
AT&T IN	20,000	5.150	11/15/46	25,913
AT&T IN	55,000	1.650	02/01/28	50,830
BANK AMER CORP	35,000	3.970	03/05/29	38,832
BANK OF AMERICA C VA	30,000	4.680	02/04/33	25,772

Dana Non-Union Retiree VEBA Trust

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 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			(d) Cost	(e) Current Value
Identity of Issuer, Borrower, Lessor, or Similar Party		Units	Rate (%)	Maturity		
Corporate Bonds (continued)						
BANK OF AMERICA C VA	175,000	3.559	04/23/27	\$ 191,204	\$ 172,111	
BANKS 2024-5YR104.8	130,000	4.830	10/15/57	131,298	130,095	
BRISTOL MYERS SQU	22,000	6.800	11/15/26	27,411	22,859	
BRISTOL-MYERS S	30,000	5.875	11/15/36	39,037	31,040	
BROADCOM IN	40,000	4.750	04/15/29	46,914	39,689	
BURLINGTON NO	40,000	6.150	05/01/37	52,078	42,772	
CAMPBELL SOUP C	40,000	3.125	04/24/50	28,068	25,673	
CAPITAL ONE FINL VA	45,000	3.273	03/01/30	44,689	41,535	
CAPITAL ONE FINL COR	35,000	5.817	02/01/34	32,904	35,128	
CARMAX AUTO OWNER T	120,000	6.000	07/17/28	123,033	122,136	
CINTAS CORPORATIO	55,000	3.700	04/01/27	52,676	53,947	
CITIGROUP INC	120,000	3.790	03/17/33	114,151	107,834	
CITIGROUP INC	25,000	6.625	01/15/28	31,345	26,240	
COMCAST CORP	25,000	3.400	04/01/30	28,933	23,227	
COMCAST CORP	70,000	4.150	10/15/28	76,525	68,279	
CONOCOPHILLIPS CO	35,000	4.300	11/15/44	38,120	29,136	
CONSOLIDATED EDIS	55,000	5.500	12/01/39	61,108	54,649	
CSX CORP	40,000	6.150	05/01/37	50,696	42,409	
CVS HEALTH CORP	25,000	5.050	03/25/48	27,793	20,460	
DIAGEO CAPITAL	50,000	5.875	09/30/36	71,454	52,651	
DUKE ENERGY FLA LLC	75,000	3.200	1/15/2027	71,980	72,962	
DUKE ENERGY PROGR	15,000	6.300	04/01/38	21,684	15,981	
ATON CORP	40,000	7.650	11/15/29	56,727	45,039	
MERSON ELECTRI	65,000	6.125	04/15/39	72,015	68,841	
NTERPRISE PRODU	20,000	6.650	10/15/34	28,997	21,726	
NTERPRISE PRODUC	15,000	5.100	02/15/45	13,328	13,779	
OG RESOURCES, IN	65,000	5.100	01/15/36	65,955	62,990	
QUITABLE COS INC	30,000	7.000	04/01/28	37,966	31,657	
RP OPERATING LIM	15,000	4.500	07/01/44	19,347	12,896	
RP OPERATING LIMIT	15,000	3.000	07/01/29	15,878	13,964	
EDEX CORPORATION	35,000	5.100	01/15/44	40,083	31,868	
IFTH THIRD BANC	55,000	2.550	03/15/29	55,181	52,238	
ISERV, IN	75,000	4.200	10/01/28	86,132	72,858	
GENERAL MILLS INC	40,000	4.000	04/17/25	40,170	39,872	
GENUINE PARTS CO	40,000	2.750	02/01/32	37,893	33,678	
GOLDMAN SACHS GR	90,000	3.850	01/26/27	96,389	88,397	
GOLDMAN SACHS GROUP	30,000	3.814	04/23/29	32,981	28,831	
GOLDMAN SACHS INTER	40,000	3.690	02/24/33	37,881	34,317	
HARLEY-DAVIDSON	125,000	5.370	03/15/29	124,994	126,396	
HONEYWELL INTER	50,000	4.875	09/01/29	50,101	50,293	
JP MORGAN CHASE BANK	60,000	3.509	01/23/29	65,865	57,335	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 20-7392576 Plan Number: 501

December 31, 2024

(a)	(b)	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			(d) Cost	(e) Current Value
Identity of Issuer, Borrower, Lessor, or Similar Party		Units	Rate (%)	Maturity		
Corporate Bonds (continued)						
JPMORGAN CHASE	25,000	2.963	01/25/33	\$ 23,304	\$ 21,619	
JPMORGAN CHASE	140,000	2.950	10/01/26	148,368	136,399	
INCOLN NATIONA	75,000	3.625	12/12/26	76,208	73,521	
MARKEL CORP	50,000	3.500	11/01/27	45,907	48,157	
MARKEL CORPORATION	35,000	5.000	03/30/43	33,471	30,766	
MCDONALD'S CORP	30,000	5.150	09/09/52	29,715	27,304	
MCKESSON CORP	60,000	5.100	07/15/33	60,416	59,510	
METLIFE, IN	30,000	5.000	07/15/52	30,367	27,011	
MONDELEZ INTERNL	34,000	7.000	08/11/37	37,389	37,399	
MORGAN STANLEY	45,000	3.772	01/24/29	49,850	43,371	
MORGAN STANLEY	115,000	3.875	01/27/26	123,089	114,141	
MORGAN STANLEY	20,000	4.450	02/13/32	19,278	16,331	
MORGAN STANLEY	55,000	1.593	05/04/27	55,615	52,723	
MORGAN STANLEY	100,000	2.780	02/13/32	106,847	96,118	
MORGAN STANLEY C	215,929	3.540	12/17/48	211,303	213,699	
NISSAN AUTO RECE	150,000	5.930	03/15/28	152,835	152,130	
NORFOLK & WESTER	30,000	7.050	05/01/37	36,547	33,235	
NUTRIEN LT	15,000	5.400	06/21/34	15,048	14,912	
NUTRIEN LT	25,000	5.800	03/27/53	25,123	24,626	
NUTRIEN LTD.	30,000	4.200	04/01/29	34,036	29,079	
ONEOK, IN	65,000	3.250	06/01/30	58,147	58,945	
ORACLE CORPORATI	80,000	2.950	05/15/25	78,848	79,442	
PARKER HANNIFIN	45,000	6.250	05/15/38	57,839	48,099	
PFIZER IN	20,000	7.200	03/15/39	32,620	23,151	
PFIZER INCORPORA	20,000	5.950	04/01/37	21,661	20,840	
PHILLIPS 66	40,000	5.875	05/01/42	44,414	39,724	
PNC FINANCIAL SR	30,000	3.150	05/19/27	32,237	28,856	
PNC FINL SVCS GR	60,000	2.550	2030	59,963	53,326	
PNC FINL SVCS GROUP	35,000	6.037	10/28/33	35,031	36,196	
PRUDENTIAL FINL	10,000	6.625	12/01/37	14,939	10,941	
RPM INTERNL IN	40,000	4.550	03/01/29	37,606	39,203	
SHELL FIN US IN	20,000	4.375	05/11/45	24,118	16,728	
SPECTRA ENERGY P	25,000	5.950	09/25/43	29,978	24,722	
STRYKER CORP	45,000	1.950	2030	44,679	38,574	
SYSCO CORP	30,000	4.450	3/15/2048	33,399	24,418	
T-MOBILE USA IN	55,000	4.375	04/15/40	57,973	47,486	
TAMPA ELECTRIC C	50,000	6.150	05/15/37	72,126	51,735	
TARGA RESOURCES P	80,000	5.500	03/01/30	78,414	80,160	
THE CHARLES SCHW	70,000	3.250	05/22/29	62,249	65,283	
THE CHARLES SCHWA VA	45,000	6.136	08/24/34	42,107	47,112	
THE HARTFORD FI	15,000	6.625	03/30/40	16,600	16,037	
THE HARTFORD FINL	25,000	2.800	08/19/29	24,911	22,786	
THE KRAFT HEINZ	40,000	4.875	10/01/49	35,707	34,302	
THE KROGER CO.	40,000	6.900	2038	58,183	43,924	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
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(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Corporate Bonds (continued)						
THE WALT DISNEY	10,000	7.625	2028	\$ 14,573	\$ 11,021	
THOMSON CORP	55,000	5.500	08/15/35	55,597	55,019	
TOYOTA AUTO RECE	270,000	5.010	02/15/29	271,601	272,708	
TRUIST FINL CORP VA	60,000	5.420	01/26/29	58,376	59,632	
TRUIST FINL CORP VA	30,000	5.830	10/28/33	30,680	31,047	
UNION PACIFIC C	30,000	6.625	02/01/29	33,526	32,134	
UNITED PARCEL	55,000	8.375	04/01/30	81,504	61,704	
UNITED TECH CORP	35,000	5.700	04/15/40	45,958	34,998	
US BANKCORP	85,000	5.850	10/21/33	84,297	86,707	
VERIZON COMMS	30,000	4.400	11/01/34	33,269	27,798	
VERIZON COMMUN!	25,000	3.875	03/01/52	18,116	18,466	
VERIZON COMMUNIC	20,000	2.550	03/21/31	20,016	17,232	
VIRGINIA ELEC &	50,000	8.875	11/15/38	77,334	65,193	
WEC ENERGY GROUP	35,000	4.300	10/15/48	37,304	28,729	
WELLS FARGO & CO VA	35,000	4.611	04/25/53	32,983	29,346	
WELLS FARGO & COM VA	40,000	3.584	05/22/28	42,741	38,583	
WELLS FARGO BK NA	65,000	3.000	10/23/26	62,105	63,052	
WESTLAKE CHEMICAL	15,000	3.600	08/15/26	16,278	14,640	
WESTLAKE CHEMICAL C	25,000	5.000	08/15/46	31,825	21,751	
WILLIAMS PARTNER	25,000	4.850	03/01/48	30,922	21,240	
WISCONSIN P&L	45,000	6.375	08/15/37	58,314	48,152	
Total Corporate Bonds				6,701,100	6,105,949	
Common Stocks						
ABBOTT LABORATORIES	255			24,443	28,843	
ABBVIE INC	268			44,953	47,624	
ALLEGION PUBLIC LTD CO F	88			9,785	11,500	
ALPHABET INC.	344			30,300	65,119	
ALTIMAR ACQUISITION	1,218			21,469	28,331	
AMERICAN EXPRESS CO	138			22,979	40,957	
AMGEN INCORPORATED	99			25,117	25,803	
AON PLC	87			27,223	31,247	
APPLIED MATERIALS	106			9,544	17,239	
ASTRAZENECA PLC	266			17,563	17,428	
AUTONATION INC	127			19,227	21,570	
AUTOZONE INC	10			10,631	32,020	
BOOKING HOLDINGS INC	3			6,117	14,905	
BUILDERS FIRSTSOURCE INC	86			14,352	12,292	
CANADIAN NATURAL RES	620			7,362	19,139	
CENCORA INC	175			23,858	39,319	

Dana Non-Union Retiree VEBA Trust

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December 31, 2024

(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Common Stocks (continued)						
CENOVUS ENERGY INC	1,457			\$ 23,396	\$ 22,074	
CENTERPOINT ENERGY INC	775			19,196	24,591	
CHUBB LTD	54			7,439	14,920	
CIGNA CORP	17			4,756	4,694	
COCA COLA EUROPEAN PARTNERS	182			7,537	13,979	
CONOCOPHILLIPS	334			25,310	33,123	
CORPAY INC	95			24,521	32,150	
CRH PUBLIC LIMITED C	431			21,300	39,876	
DEERE & CO	42			10,404	17,795	
DELL TECHNOLOGIES	186			9,476	21,435	
DELTA AIR LINES INC	402			23,857	24,321	
DIAMONDBACK ENERGY	232			41,742	38,009	
DISCOVER FINANCIAL SVCS	238			32,411	41,229	
EMERSON ELECTRIC CO	209			22,857	25,901	
FIDELITY NATL INFORMATION SVCS	483			34,715	39,012	
FIRSTENERGY CORP	671			27,201	26,692	
FLEXTRONICS INTL LTD	813			23,257	31,211	
FORTIVE CORPORATION	321			21,345	24,075	
GALLAGHER ARTHUR J & co	48			8,926	13,625	
GENERAL DYNAMICS CORP	91			17,040	23,978	
GOLDMAN SACHS GROUP INC	33			8,921	18,896	
HEWLETT PACKARD ENTERPRISE C	776			16,773	16,568	
HOLOGIC INC	254			19,834	18,311	
HOME DEPOT INC	64			22,226	24,895	
HONEYWELL INTERNATIONAL	228			46,611	51,503	
HUMANA INC	18			4,581	4,567	
HUNTINGTON BANCSHS	2,101			27,662	34,183	
INTERCONTINENTAL EXCHANGE INC.	106			10,851	15,795	
J P MORGAN CHASE & CO	479			54,367	114,821	
JACOBS SOLUTIONS INC	184			24,692	24,586	
JOHNSON & JOHNSON	32			4,620	4,628	
KBR INC	204			13,345	11,818	
KENVUE INC	1,409			31,060	30,082	
KEYSIGHT TECHNOLOGIES	142			21,872	22,809	
KINROSS GOLD CORP NEW	1,782			14,906	16,519	
LEIDOS HOLDINGS INC	175			16,795	25,211	
LENNAR CORP CLASS A	133			21,166	18,137	

Dana Non-Union Retiree VEBA Trust

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
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(a)	(b)	(c)			(d)	(e)
Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Units	Rate (%)	Maturity			
Common Stocks (continued)						
LPL FINANCIAL HLDGS INC	136			\$ 34,666	\$ 44,405	
MGM GRAND	260			11,421	9,009	
MARATHON PETE CORP	176			10,038	24,552	
MASCO CORP	179			9,521	12,990	
MCKESSON CORPORATION	64			22,446	36,474	
MEDTRONIC PLC	58			4,696	4,633	
MICROCHIP TECHNOLOGY	320			23,502	18,352	
MICRON TECHNOLOGY INC	358			26,115	30,129	
MORGAN STANLEY	279			23,916	35,076	
NEXTERA ENERGY INC	243			17,481	17,421	
NICE SYSTEMS	90			16,251	15,286	
NORFOLK SOUTHN CORP	139			35,649	32,623	
NXP SEMICONDUCTORS	55			10,081	11,432	
OMNICOM GROUP	257			23,438	22,112	
ORACLE CORPORATION	339			37,726	56,491	
PHILIP MORRIS INTL INC	424			41,090	51,028	
PHILLIPS 66	82			10,722	9,342	
PPL CORPORATION	716			24,685	23,241	
ROBERT HALF INTL	249			16,678	17,545	
SANOFI ADR	97			4,701	4,678	
SCHLUMBERGER LTD	838			28,452	32,129	
SMURFIT WESTROCK LTD	404			18,195	21,759	
SYSCO CORP	559			43,077	42,741	
T-MOBILE US INC	110			13,418	24,280	
TECK RESOURCESLTD CL B	542			23,910	21,967	
TRIMBLE NAV LTD	238			14,515	16,817	
UBER TECHNOLOGIES IN	379			23,504	22,861	
UNITED CONTL HLDGS INC	239			19,550	23,207	
UNITED RENTALS INC	23			4,968	16,202	
UNITEDHEALTH GROUP INC	95			38,156	48,057	
US FOODS HOLDING COR	541			21,068	36,496	
WABTEC CORP	139			11,624	26,353	
WALT DISNEY CO	225			25,619	25,054	
WELLS FARGO & CO	469			21,176	32,944	
Total Common Stocks				1,793,946	2,287,041	

Dana Non-Union Retiree VEBA Trust

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Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value	
	Face Value	Rate (%)	Maturity			
U.S. Government Obligations						
FHLMC A7-2770	\$ 6,021	5.500	-	\$ 6,408	\$ 6,074	
FHLMC A9-2470	26,688	5.000	-	28,234	26,790	
FHLMC C03920	7,059	3.500	05/01/42	7,464	6,357	
FHLMC G0-6501	37,803	4.000	04/01/41	38,244	36,081	
FHLMC GI-3833	158	4.500	05/01/25	168	158	
FHLMC Q38893	26,497	4.000	02/01/46	28,307	24,597	
FHLMC RA6910	39,996	3.500	03/01/52	37,304	35,528	
FHLMC SD1115	321,619	4.000	07/01/52	297,246	296,772	
FHLMC SD4712	298,930	4.500	12/01/52	286,922	281,234	
FHLMC SD4752	387,318	5.000	07/01/53	370,252	376,028	
FHLMC SD6541	59,818	5.000	10/01/54	58,771	57,936	
FHLMC SD8214	350,325	3.500	05/01/52	341,922	309,786	
FNMA PL AJ4894	27,634	4.000	02/01/42	29,240	25,976	
FNMA PL BE0468	38,818	3.000	10/01/46	38,763	33,367	
FNMA PL BV5584	118,650	3.500	05/01/52	116,573	106,014	
FNMA PL CB1371	382,264	2.500	08/01/51	392,794	314,522	
FNMA PL CB2610	282,351	2.000	01/01/52	271,668	221,419	
FNMA PL CB3175	95,504	3.500	03/01/52	88,729	84,807	
FNMA PL CB5534	197,388	4.500	01/01/53	187,642	185,962	
FNMA PL FM2801	149,833	3.000	03/01/50	158,242	129,607	
FNMA PL FS0348	243,312	2.000	01/01/52	232,363	192,827	
FNMA PL FS0350	310,694	2.000	01/01/52	303,053	244,947	
FNMA PL FS6058	68,160	2.500	04/01/52	49,179	56,286	
FNMA PL FS7130	373,766	5.000	01/01/54	357,268	360,764	
FNMA PL FS8486	515,929	4.500	12/01/52	493,397	485,686	
FNMA PL MA0640	14,629	4.500	2041	14,882	14,067	
GNMA MA0909	12,913	3.000	04/20/28	13,794	12,529	
GNMA MA2679	15,471	4.000	03/20/45	16,679	14,567	
GNMA PL MA7024M	131,229	2.500	12/20/35	138,503	120,932	
GNMA PL MA7283M	96,541	2.000	04/20/36	99,634	86,673	
GNMA PL 786656C	285,726	5.000	04/20/53	285,279	279,837	
US TREAS BD	490,000	2.875	05/15/43	430,270	371,022	
US TREASUR	270,000	4.000	01/31/29	267,275	266,372	
US TREASUR	405,000	4.000	01/31/31	405,845	395,381	
US TREASURY	525,000	3.625	02/15/53	454,838	426,892	
GOV NATL MTG ASSN	127,052	1.100	12/16/62	102,029	93,065	
Total U.S. Government Obligations	6,740,096			6,449,181	5,980,862	

Dana Non-Union Retiree VEBA Trust

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Identity of Issuer, Borrower, Lessor, or Similar Party		Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value			Cost	Current Value
		<u>Rate (%)</u>				
*	Interest-Bearing Cash SCHWAB BANK SWEEP		0.450		875,907	875,907
		<u>Face Value</u>	<u>Rate (%)</u>	<u>Maturity</u>		
	Municipal Obligation NEW JERSEY ST	70,000	7.102	2041	79,325	78,175
Total Assets					\$34,432,752	\$38,747,915

* Indicates party-in-interest