

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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.

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [X] a single-employer plan [] a DFE (specify) ____
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. [X]
D Check box if filing under: [] Form 5558 [X] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 01/01/1957
2a Plan sponsor's name (employer, if for a single-employer plan): COOPER TIRE & RUBBER COMPANY LLC
2b Employer Identification Number (EIN): 34-4297750
2c Plan Sponsor's telephone number: 330-796-2121
2d Business code (see instructions): 326200

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	1280
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)	363
	6a(2)	313
	6b	685
	6c	53
	6d	1051
	6e	205
	6f	1256
	6g(1)	
6g(2)		
6h		0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1B 3H 3F

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

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

A Name of plan <u>COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>COOPER TIRE & RUBBER COMPANY LLC</u>	D Employer Identification Number (EIN) <u>34-4297750</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date:	Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2 Assets:			
a Market value	2a		<u>183541981</u>
b Actuarial value	2b		<u>201026573</u>
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>853</u>	<u>131327296</u>	<u>131327296</u>
b For terminated vested participants	<u>74</u>	<u>3470047</u>	<u>3470047</u>
c For active participants	<u>363</u>	<u>41414669</u>	<u>44195290</u>
d Total	<u>1290</u>	<u>176212012</u>	<u>178992633</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5		<u>5.13 %</u>
6 Target normal cost			
a Present value of current plan year accruals	6a		<u>1731672</u>
b Expected plan-related expenses	6b		<u>129280</u>
c Target normal cost	6c		<u>1860952</u>

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

SIGN HERE			
	Signature of actuary	<u>08/01/2025</u>	Date
	<u>KEITH OKRESS, ASA, EA</u>	<u>23-06965</u>	Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u>	<u>216-937-4000</u>	Telephone number (including area code)
	<u>1001 LAKESIDE AVENUE SUITE 1500 CLEVELAND, OH 44114-1172</u>		
	Address of the firm		

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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	4449130
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	4449130
10	Interest on line 9 using prior year's actual return of <u>9.00</u> %	0	400422
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.07</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	4849552

Part III Funding Percentages			
14	Funding target attainment percentage	14	109.60 %
15	Adjusted funding target attainment percentage	15	112.30 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	107.18 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls					
18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)	0	18(c) 0

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

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: %	2nd segment: %	<input checked="" type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input type="checkbox"/> Prescribed - separate	<input checked="" type="checkbox"/> Substitute

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

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)			31a 1860952
b Excess assets, if applicable, but not greater than line 31a			31b 1860952
32 Amortization installments:		Outstanding Balance	Installment
a Net shortfall amortization installment		0	0
b Waiver amortization installment.....		0	0
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount			33
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....			34 0
		Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement		0	0
36 Additional cash requirement (line 34 minus line 35)			36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)			37 0
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)			38a 0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....			38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)			39 0
40 Unpaid minimum required contributions for all years			40 0

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

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

A Name of plan <u>COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COOPER TIRE & RUBBER COMPANY LLC</u>	D Employer Identification Number (EIN) <u>34-4297750</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MASTER RETIREMENT TRUST</u>				
b Name of sponsor of entity listed in (a): <u>COOPER TIRE & RUBBER COMPANY LLC</u>				
c EIN-PN <u>34-4297750-020</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>0</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-ALTERNATIVES</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-006</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>10463000</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-TRUST CASH</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-003</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>1100000</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-INTERMEDIATE CRE</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-015</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>6730000</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-LONG CORP</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-016</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>48594000</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-US CREDIT</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-017</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>19759000</u>	
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GOODYEAR COMM TRST-INTNATIONAL GOV</u>				
b Name of sponsor of entity listed in (a): <u>THE GOODYEAR TIRE & RUBBER COMPANY</u>				
c EIN-PN <u>34-1458060-018</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	<u>0</u>	

a Name of MTIA, CCT, PSA, or 103-12 IE: GOODYEAR COMM TRST-AGGREGATE

b Name of sponsor of entity listed in (a): THE GOODYEAR TIRE & RUBBER COMPANY

c EIN-PN 34-1458060-019	d Entity code M	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15554000
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a Name of MTIA, CCT, PSA, or 103-12 IE: GOODYEAR COMM TRST-LONG CREDIT

b Name of sponsor of entity listed in (a): THE GOODYEAR TIRE & RUBBER COMPANY

c EIN-PN 34-1458060-020	d Entity code M	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49360000
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a Name of MTIA, CCT, PSA, or 103-12 IE: GOODYEAR COMM TRST-NISA FINDLAY

b Name of sponsor of entity listed in (a): THE GOODYEAR TIRE & RUBBER COMPANY

c EIN-PN 34-1458060-023	d Entity code M	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20702000
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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 COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 COOPER TIRE & RUBBER COMPANY LLC	D Employer Identification Number (EIN) 34-4297750

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	172262000
(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)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	183541982	172262000
Liabilities			
g Benefit claims payable.....	1g	0	5000
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	5000
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	183541982	172257000

Part II Income and Expense Statement

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

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

		(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)		1683018
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1683018

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	13679000	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		13679000
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	-711000	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		-711000
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		12968000

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		-11284982
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: **BOBER MARKEY FEDOROVICH AND COMPANY**

(2) EIN: **34-1523030**

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		30000000
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 554622.

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

A Name of plan <u>COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COOPER TIRE & RUBBER COMPANY LLC</u>	D Employer Identification Number (EIN) <u>34-4297750</u>	

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

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 20-2387942

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3		7
---	--	---

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b Enter the amount contributed by the employer to the plan for this plan year	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... Yes No N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? Yes No N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... Increase Decrease Both No

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? Yes No

11 a Does the ESOP hold any preferred stock? Yes No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) Yes No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? Yes No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14b	
c The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
 Public Equity: 0.0 % Private Equity: 2.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 88.2 %
 High-Yield Debt: 6.8 % Real Assets: 0.0 % Cash or Cash Equivalents: 3.0 % Other: 0.0 %

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN

FINANCIAL STATEMENTS

December 31, 2024 and 2023

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN

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Note: Certain schedules normally required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because of the absence of the conditions under which they are required.

INDEPENDENT AUDITORS' REPORT

Plan Administrator and Participants of
Cooper Tire & Rubber Company
Findlay Represented Employee Retirement Plan
Akron, Ohio

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

We have performed audits of the accompanying financial statements of Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan (“the Plan”), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits and of accumulated plan benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits and of changes in accumulated plan benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors’ Responsibilities for the Audits of the Financial Statements section—

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audits of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audits section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- 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 audits in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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



BOBER, MARKEY, FEDOROVICH & COMPANY
Akron, Ohio

September 26, 2025

COOPER TIRE & RUBBER COMPANY
 FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
 December 31, 2024 and 2023

Statements of Net Assets Available for Benefits

(Dollars in Thousands)

	December 31, 2024	December 31, 2023
Plan's Interest in Master Trust	\$ 172,262	\$ 183,542
Net Assets Available for Benefits	\$ 172,262	\$ 183,542

Statement of Changes in Net Assets Available for Benefits

(Dollars in Thousands)

	Year Ended December 31, 2024
Net Investment Gain from Plan's Interest in Master Trust	\$ 1,683
Benefits Paid to Participants or Their Beneficiaries	(13,674)
Administrative Expenses	711
Net Decrease	(11,280)
Net Assets Available for Benefits at Beginning of Year	183,542
Net Assets Available for Benefits at End of Year	\$ 172,262

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

COOPER TIRE & RUBBER COMPANY
 FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
 December 31, 2024 and 2023

Statements of Accumulated Plan Benefits

(Dollars in Thousands)	December 31, 2024	December 31, 2023
Actuarial Present Value of Accumulated Plan Benefits:		
Vested Benefits for:		
Current Employees	\$ 28,793	\$ 40,721
Retirees	125,375	130,296
Former Employees	3,039	3,392
	157,207	174,409
Nonvested Benefits for Current Employees	2,233	2,508
	\$ 159,440	\$ 176,917

Statement of Changes in Accumulated Plan Benefits

(Dollars in Thousands)	Year Ended December 31, 2024
Actuarial Present Value of Accumulated Plan Benefits, December 31, 2023	\$ 176,917
(Decrease)/Increase During the Year Attributable to:	
Plan Amendments	(950)
Change in Actuarial Assumptions	(15,062)
Benefits Accumulated	1,681
Benefit Payments	(13,674)
Change in Discount Period	9,447
Experience	1,081
Net Decrease	(17,477)
Actuarial Present Value of Accumulated Plan Benefits, December 31, 2024	\$ 159,440

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

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Trust Assets

The Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan (the “Plan”), along with the Cooper Tire & Rubber Company Texarkana Represented Employee Retirement Plan were included in the Cooper Tire & Rubber Company Master Retirement Trust (“Cooper Master Trust”) through April 30, 2024. Effective May 1, 2024, the Plan participates in a master trust (“Goodyear Master Trust”) where Wingfoot Corporation is the Trustee and The Northern Trust Company (“Northern Trust”) has been appointed as the custodian. Individual Master Trust Investment Accounts (“MTIA”) within the Goodyear Master Trust hold investments for pension plans sponsored by Cooper Tire & Rubber Company LLC (“Company” or “Cooper”) and The Goodyear Tire & Rubber Company (“Goodyear”). See discussion of significant accounting policies for master trust in Note 8.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits include benefits expected to be paid to:

- a) Retired or terminated employees or their beneficiaries.
- b) Beneficiaries of employees who died while in active service.
- c) Present employees and their beneficiaries.

The actuarial present value of accumulated plan benefits is determined by WTW, consulting actuaries, using actuarial assumptions to reflect the time value of money and the probability that a benefit payment will be made between the valuation date and the expected payment date.

The significant actuarial assumptions used in the valuation of accumulated plan benefits as of December 31, 2024 and 2023 were:

- a) Life Expectancy – The mortality basis is derived from the mortality experience of the Goodyear Hourly non-disabled population for the period 2017 – 2021, adjusted to reflect the MP-2021 scale..
- b) Retirement Age - Scale ranging from 6% of all eligible employees at ages 55 to 57 to 100% at age 67.
- c) Withdrawal - Scale ranging from 14.58% at age 20 to 2.52% at age 55.
- d) Discount Rate - Obligations of the Plan are assumed to be settled at a rate of 6.50% (December 31, 2024) and 5.50% (December 31, 2023)

Contributions and Funding

During the 2024 Plan year, no Company contributions were required under the minimum funding requirements specified in the Employee Retirement Income Security Act of 1974 (“ERISA”). Company contributions are recognized as they accrue.

Expenses

Certain administrative expenses of the Plan are paid by Goodyear and are excluded from these financial statements.

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

COOPER TIRE & RUBBER COMPANY
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Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Estimates and assumptions are most significantly utilized in determining the actuarial present value of accumulated plan benefits. Actual results could differ from those estimates.

Benefit Payments

Benefit payments to participants are recorded upon distribution.

Subsequent Events

The Plan has evaluated subsequent events through September 26, 2025, the date the financial statements were available to be issued. There were no subsequent events which required recognition or disclosure in the financial statements, other than the events disclosed in Note 2 and Note 7.

NOTE 2 – GENERAL DESCRIPTION AND OPERATION OF THE PLAN

The following brief description of the Plan provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions. The Plan is subject to the provisions of ERISA.

Effective June 7, 2021, Cooper was acquired by Goodyear, and effective January 1, 2023, active Plan participants became employees of Goodyear. Cooper remained the plan sponsor through December 31, 2024. Effective January 1, 2025, Goodyear became the plan sponsor.

Participation and Benefits

The Plan is a defined benefit pension plan covering substantially all hourly employees subject to the collective bargaining agreement between Goodyear and Local Union #207L of the United Steelworkers of America, who were hired prior to July 1, 2012.

Participants are entitled to monthly pension benefits equal to the amount specified in the Plan agreement multiplied by the years of continuous credited service at time of termination or retirement. Effective June 30, 2012, benefit accruals were frozen for employees hired after December 31, 2008. If termination occurs prior to eligibility for an immediate pension benefit, vested participants may elect to receive a lump sum distribution in lieu of a deferred pension benefit. See Note 7.

The Plan's participants may be eligible for unreduced monthly pension benefits upon attainment of 30 years of continuous credited service. Participants also may retire earlier than the normal retirement age. Pension benefits for participants with less than 30 years continuous credited service are subject to a reduction based upon the time by which the retirement precedes the participant's attainment of age 62.

Effective June 8, 2024, a new collective bargaining agreement was ratified covering the participants of the Plan. The new collective bargaining agreement includes provisions which increase the monthly pension multiplier amount by \$1, effective June 30, 2024, and allows participants who terminate with immediate pension benefit eligibility to elect to receive a lump sum distribution, effective January 1, 2025.

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The amount of any pension benefit otherwise available may be reduced by certain disability payments (but not payments under the Federal Insurance Contribution Act). The Plan provides certain survivor and disability benefits, and various optional forms of payment, some actuarially reduced.

Vesting

Participants are vested after five years of continuous credited service.

Termination Provisions

The Company anticipates and believes that the Plan will continue without interruption but reserves the right to discontinue the Plan. As stated in the Plan, in the event that such discontinuance results in the termination of the Plan:

- a) The Plan's interest in the master trust shall serve to discharge any liability presently incurred and the net assets shall be applied for the exclusive benefit of the participants and beneficiaries of the Plan, provided that after satisfaction of all liabilities, residual assets of the Plan are distributable to the Company, or to other plans within the master trust.
- b) To the extent unfunded vested benefits exist, benefits up to specified limitations are insured by the Pension Benefit Guaranty Corporation.

NOTE 3 – TAX STATUS

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated June 22, 2017 that the Plan is qualified and the trust established for the Plan is exempt from Federal Income Tax under the appropriate sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However, the Company and Plan's tax counsel believe the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

NOTE 4 – FINANCIAL DATA CERTIFIED BY THE NORTHERN TRUST COMPANY AND PRINCIPAL TRUST COMPANY

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, all investment information applicable to the master trust and at the Plan level is certified complete and accurate or derived from information certified complete and accurate by Northern Trust, with the exception of certain funds within the master trust as of December 31, 2024 and 2023. As of December 31, 2024, and 2023, the fair value of these investments within the Goodyear Master Trust (partnership interests) and Cooper Master Trust (certain collective trust funds) was \$210,528,000 and \$9,780,000, respectively. Net appreciation in fair value of investments of the Goodyear Master Trust for the year ended December 31, 2024 includes net appreciation of approximately \$253,000 related to partnership interests.

COOPER TIRE & RUBBER COMPANY
 FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
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NOTE 5 – RECONCILIATION OF PLAN FINANCIAL STATEMENTS TO THE FORM 5500

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

(Dollars in Thousands)	December 31, 2024
Net assets available for benefits per the financial statements	\$ 172,262
Less: Amounts allocated to retired participants	(5)
Net assets available for benefits per the Form 5500	\$ 172,257

The following is a reconciliation of benefits paid to participants or their beneficiaries per the Plan financial statements to the Form 5500:

(Dollars in Thousands)	Year Ended December 31, 2024
Benefits paid to participants or their beneficiaries per the financial statements	\$ 13,674
Add: Amounts allocated to retired participants at December 31, 2024	5
Benefits paid to participants or their beneficiaries per the Form 5500	\$ 13,679

NOTE 6 – PARTY-IN-INTEREST

Certain Plan investments are managed by Northern Trust Asset Management, an affiliate of Northern Trust and, therefore, these transactions are party-in-interest transactions. Fees are paid by the master trust for asset custody and management to parties-in-interest. These fees are pursuant to arrangements exempted from the prohibited transaction rules.

NOTE 7 – SUBSEQUENT EVENT

The Plan was amended effective May 1, 2025, to offer a limited period lump sum option during 2025 to certain terminated vested participants in the Plan. The lump sum option concluded in July 2025, and approximately \$816,000 was paid from the Plan in August 2025 related to the limited period lump sum option.

COOPER TIRE & RUBBER COMPANY
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NOTE 8 – MASTER TRUST

Investment Valuation and Income Recognition

The investments of the Plan are reported at fair value. The fair value of the Plan's interest in the master trust is based on the beginning of the year value in the master trust plus actual contributions and allocated investment income (loss) less actual distributions and allocated administrative expenses. The fair value of investments held by the master trust is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. Investment income (loss) and administrative expenses relating to the master trust are allocated to the Plan based on the Plan's divided interest in the master trust.

The Goodyear Master Trust utilizes a tiered allocation structure, whereby the master trust assets are grouped into MTIA's, for which the plans have divided interest ownership. The target allocation for each plan which participates in the Goodyear Master Trust is 94% in duration-matched fixed income securities and 6% in private equity and credit securities.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the master trust gains and losses on investments bought and sold as well as held during the year.

Partnership Interests

At December 31, 2024 the Goodyear Master Trust had investments of \$210,528,000 in partnership interests. These partnership interests include venture, buyout and special situation private equity and credit funds which cannot be redeemed and are liquidated over the stated life of the fund. At December 31, 2024 the Goodyear Master Trust had \$35,000,000 in unfunded commitments related to these investments.

Financial Instruments

Certain investment managers retained by the Goodyear Master Trust are authorized to use derivative financial instruments within specific guidelines established by the Company. Interest rate, foreign exchange and credit contracts are held to manage the risk inherent in certain investments.

Goodyear has established a control environment which includes policies and procedures for risk assessment and the approval, reporting, and monitoring of derivative financial instruments. The counterparties to the derivative financial instrument contracts are substantial and credit worthy multinational commercial banks or other financial institutions. Neither the risks of counterparty non-performance nor the economic consequence of counterparty non-performance associated with these contracts are considered by Goodyear to be significant. In addition, the Goodyear Master Trust does not anticipate any material adverse effect on its financial position resulting from its involvement in these instruments. The notional amounts generally exceed the cash requirements relating to the financial instruments. The Plan's share of the net fair value of derivative financial instruments is included in the Plan's interest in master trust in the statements of net assets available for benefits. The Plan's share of the income and realized and unrealized gains and losses resulting from derivative financial instruments is included in net investment gain from the Plan's interest in master trust in the statement of changes in net assets available for benefits.

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The net fair value of derivative financial instruments was \$7,078,000 at December 31, 2024. The net appreciation in the fair value of derivative financial instruments was \$6,507,000 for the year ended December 31, 2024.

Securities Lending

Certain MTIA's in the Goodyear Master Trust participate in The Northern Trust Company Securities Lending Program under which Northern Trust as Custodian and Agent is authorized to lend securities of the Goodyear Master Trust, as part of a pool of securities from other participating lenders, to borrowers selected by Northern Trust and approved by the Trustee. Under the terms of the program, participating lenders receive cash or government securities as collateral for loans of their securities, which must be equal to or greater than 102% of the market value of the borrowed securities if the collateral is denominated in the same currency, or 105% if denominated in a different currency than the borrowed securities. The amount of master trust securities on loan is capped at ten percent of lendable investments. The market value of the borrowed securities and collateral are revalued daily and the borrower is required to deliver additional collateral when necessary to meet the minimum requirements. Cash collateral received by Northern Trust is invested in obligations issued by the U.S. Government, corporate bonds, and certain other instruments that meet The Northern Trust Company Securities Lending Program's guidelines intended to maximize current income, while maintaining the preservation of capital and maintenance of liquidity. Upon termination of the loan, the borrower is required to return loaned securities in exchange for the return of the related collateral.

The Goodyear Master Trust realized \$481,000 of additional net earnings from these activities during 2024. The Trustee does not anticipate any material adverse effect on the financial position of the Goodyear Master Trust resulting from its involvement in The Northern Trust Company Securities Lending Program.

COOPER TIRE & RUBBER COMPANY
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Master Trust Net Assets

The following provides a summary of master trust net assets at December 31, 2024 and 2023 and changes in net assets for the year ended December 31, 2024:

Statements of Net Assets Available for Benefits
(Dollars in Thousands)

	December 31, 2024		December 31, 2023	
	Goodyear Master Trust	Plan's Interest in Goodyear Master Trust	Cooper Master Trust	Plan's Interest in Cooper Master Trust
Assets				
Investments:				
Cash and Short Term Securities	\$ 2,701	\$ 41	\$ 3,274	\$ 1,330
Corporate Bonds	1,849,312	91,004	-	-
Government Bonds	561,732	31,820	-	-
Partnership Interests	210,528	9,214	-	-
Common/Collective Trusts	310,676	15,734	165,985	67,426
Mutual Funds	74,834	7,190	281,858	114,496
Derivative Financial Instruments	7,078	716	-	-
Asset Backed Securities	192,693	9,745	-	-
	<u>3,209,554</u>	<u>165,464</u>	<u>451,117</u>	<u>183,252</u>
Investments on Loan				
Under Securities Lending Program:				
Corporate Bonds	153,301	7,092	-	-
Government Bonds	92,562	2,089	-	-
	<u>245,863</u>	<u>9,181</u>	<u>-</u>	<u>-</u>
Total Investments	<u>3,455,417</u>	<u>174,645</u>	<u>451,117</u>	<u>183,252</u>
Receivables:				
Pending Trades	58,115	3,897	-	-
Accrued Income	30,675	1,547	715	290
	<u>88,790</u>	<u>5,444</u>	<u>715</u>	<u>290</u>
Total Assets	<u>3,544,207</u>	<u>180,089</u>	<u>451,832</u>	<u>183,542</u>
Liabilities:				
Pending Trades	(96,656)	(7,827)	-	-
Accrued Expenses	-	-	-	-
Total Liabilities	<u>(96,656)</u>	<u>(7,827)</u>	<u>-</u>	<u>-</u>
Securities Lending Program:				
Investment of Collateral	251,669	9,394	-	-
Payable for Collateral	(251,669)	(9,394)	-	-
	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Net Assets Available for Benefits	<u>\$ 3,447,551</u>	<u>\$ 172,262</u>	<u>\$ 451,832</u>	<u>\$ 183,542</u>

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
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Statement of Changes in Net Assets Available for Benefits -
Cooper Master Trust

(Dollars in Thousands)	<u>Period from January 1, 2024 through April 30, 2024</u>
Net Investment Gain:	
Interest and Dividend Income	\$ 2,847
Net Depreciation in Fair Value of Investments	<u>(21,880)</u>
	(19,033)
Benefits Paid to Participants or Their Beneficiaries	(12,085)
Trust Expenses	(296)
Administrative Expenses	-
Transfer to Goodyear Master Trust	<u>(420,418)</u>
Net Decrease	(451,832)
Net Assets Available for Benefits at Beginning of Period	<u>451,832</u>
Net Assets Available for Benefits at End of Period	<u><u>\$ -</u></u>

Statement of Changes in Net Assets Available for Benefits -
Goodyear Master Trust

(Dollars in Thousands)	<u>Year Ended December 31, 2024</u>
Net Investment Gain:	
Interest	\$ 132,583
Net Depreciation in Fair Value of Investments	<u>(51,728)</u>
	80,855
Securities Lending:	
Total Earnings	12,158
Rebates	(11,419)
Bank Fees	<u>(258)</u>
	481
Benefits Paid to Participants or Their Beneficiaries	(321,202)
Trust Expense	(5,376)
Administrative Expenses	(539)
Transfer from Cooper Master Trust	<u>420,418</u>
Net Increase	174,637
Net Assets Available for Benefits at Beginning of Year	<u>3,272,914</u>
Net Assets Available for Benefits at End of Year	<u><u>\$ 3,447,551</u></u>

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
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Fair Value Measurements

Assets and liabilities measured at fair value are classified using the following hierarchy, which is based upon the transparency of inputs to the valuation as of the measurement date.

- Level 1 – Valuation is based upon quoted prices (unadjusted) for identical assets or liabilities in active markets.
- Level 2 – Valuation is based upon quoted prices for similar assets and liabilities in active markets, or other inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument.
- Level 3 – Valuation is based upon other unobservable inputs that are significant to the fair value measurement.

COOPER TIRE & RUBBER COMPANY
 FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
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The following tables set forth by level, within the fair value hierarchy, the master trust investments at fair value as of December 31, 2024, and 2023:

Goodyear Master Trust

December 31, 2024

(Dollars in Thousands)

	Level 1	Level 2	Level 3	Total
Cash and Short Term Securities	\$ -	\$ 2,701	\$ -	\$ 2,701
Corporate Bonds	-	2,002,613	-	2,002,613
Government Bonds	-	654,294	-	654,294
Derivative Financial Instruments	-	6,863	215	7,078
Asset Backed Securities	-	192,693	-	192,693
Total Assets in the Fair Value Hierarchy	<u>\$ -</u>	<u>\$ 2,859,164</u>	<u>\$ 215</u>	2,859,379
Investments Measured at Net Asset Value:				
Mutual Funds				
Debt Securities				74,834
Partnership Interests				
Equity Securities				77,368
Debt Securities				133,160
Common/Collective Trusts				
Short Term Securities				100,876
Debt Securities				209,800
Total Investments at Fair Value				<u>\$ 3,455,417</u>

Cooper Master Trust

December 31, 2023

(Dollars in Thousands)

	Level 1	Level 2	Level 3	Total
Cash and Short Term Securities	\$ 3,274	\$ -	\$ -	\$ 3,274
Total Assets in the Fair Value Hierarchy	<u>\$ 3,274</u>	<u>\$ -</u>	<u>\$ -</u>	3,274
Investments Measured at Net Asset Value:				
Mutual Funds				
Debt Securities				281,858
Common/Collective Trusts				
Equity Securities				3
Short Term Securities				156,202
Debt Securities				9,780
Total Investments at Fair Value				<u>\$ 451,117</u>

COOPER TIRE & RUBBER COMPANY
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The classification of fair value measurements within the hierarchy is based upon the lowest level of input that is significant to the measurement. Investments that were measured at net asset value (NAV) per share are not classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to total investments at fair value of the master trust. Valuation methodologies used for assets and liabilities measured at fair value are as follows:

Cash and Short Term Securities: Cash and cash equivalents consist of U.S. and foreign currencies. Foreign currencies are reported in U.S. dollars based on currency exchange rates readily available in active markets.

Corporate and Government Bonds and Asset Backed Securities: Valued based on institutional bid evaluations using proprietary models.

Derivative Financial Instruments: Derivatives are primarily valued using independent pricing sources which utilize industry standard derivative valuation models.

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

Changes in Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

The Plan evaluated the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits of the master trust. For the year ended December 31, 2024, there were no significant transfers in or out of levels 1, 2 or 3.

Investments Valued at Net Asset Value

Assets valued at NAV are as follows:

Partnership Interests: Priced based on valuations using the partnership's latest available financial statements and the master trust's percent ownership, which are valued at the NAV as a practical expedient to estimate fair value, adjusted for any cash transactions which occurred between the date of those financial statements and the Plan's year end.

COOPER TIRE & RUBBER COMPANY
FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN
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Common/Collective Trusts: Valued at the NAV of units held at year end, as determined by a pricing vendor or the fund family. The NAV, as provided by the trustee of each common collective Trust fund, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by each fund less its liabilities. This practical expedient would not be used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. If the plan were to initiate a full redemption of any common collective trust, each investment manager reserves the right to temporarily delay withdrawal to ensure that securities liquidation will be carried out in an orderly business manner. The investments in common collective trust funds of the Goodyear Master Trust and Cooper Master Trust had a fair value of approximately \$310,676,000 and \$165,985,000 as of December 31, 2024 and 2023, respectively, with no unfunded commitments, daily pricing frequency, and full redemption notice periods that extend no greater than 30 days. Common/collective trusts invested in equity securities are invested to earn returns that match or exceed U.S. equity indexes. Common/collective trust funds and 103-12 investment entities invested in debt securities are invested to earn returns that match or exceed U.S. fixed income indexes. Common/collective trust funds invested in real estate funds are invested in global real estate securities. Common/collective trust funds invested in short term securities are invested in obligation of the U.S. government and related money market instruments.

Mutual Funds: Valued at the NAV of shares held at year end, as determined by the pricing vendor or the fund family. The NAV, as provided by the Trustee of each mutual fund, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by each fund less its liabilities. This practical expedient would not be used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. If the plan were to initiate a full redemption of any mutual fund, each investment manager reserves the right to temporarily delay withdrawal to ensure that securities liquidation will be carried out in an orderly business manner. The investments in mutual funds of the Goodyear Master Trust and Cooper Master Trust had a fair value of \$74,834,000 and \$281,858,000 as of December 31, 2024 and 2023, respectively, with no unfunded commitments, daily pricing frequency, and full redemption notice periods that extend no greater than 30 days. Mutual funds invested in equity securities are invested to earn returns that match or exceed U.S. equity indexes. Mutual funds invested in debt securities are invested to earn returns that match or exceed U.S. fixed income indexes.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a Schedule of Active Participant Data as of January 1, 2024

Attained Age	Attained Years of Credited Service ¹										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	1	0	0	0	0	0	0	0	0	0	0	1
35-39	3	2	0	4	3	0	0	0	0	0	0	12
40-44	0	6	0	5	21	1	0	0	0	0	0	33
45-49	1	7	0	1	30	11	2	0	0	0	0	52
50-54	0	8	2	7	20	23	12	6	0	0	0	78
55-59	1	9	1	4	32	15	18	31	4	0	0	115
60-64	1	4	0	6	10	6	6	25	4	4	4	66
65-69	0	2	0	0	1	0	0	1	0	1	1	5
70 & over	0	0	0	0	0	0	1	0	0	0	0	1
Total	7	38	3	27	117	56	39	63	8	5	5	363

¹ Age and service for purposes of determining category are based on exact (not rounded) values.
 Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
 EIN / PN: 34-4297750 / 001
 Plan Sponsor: Cooper Tire & Rubber Company LLC
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis

- Applicable month December
- Interest rate basis Full Yield Curve

Interest rates

- 10-year rate 5.10%
- 20-year rate 5.22%
- 30-year rate 5.17%
- Effective interest rate 5.13%

Annual rates of increase

- Compensation: N/A
- Representative rates N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation N/A

Plan-related expenses

\$129,280; equal to the PBGC premium for the current plan year.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee becomes a participant

New or rehired employees It was assumed there will be no new or rehired employees.

Mortality

- **Healthy and disabled** Mortality is assumed to occur according to a plan-specific substitute mortality table with separate male and female rates, as approved by the IRS in 2022 for valuations starting with the 2023 plan year. The substitute mortality table is constructed from standard tables, adjusted based on the mortality experience of an aggregation of plans and the credibility of that experience. The base tables are the IRS optional combined tables for males and females for 2020 adjusted by a 1.436540 mortality ratio. The mortality experience is fully credible. The mortality rates are applied to all non-disabled participants and to participants who became disabled after 1994. The tables were developed based on the mortality experience of the corresponding populations of the Goodyear 1950 Plan (excluding participants disabled after 2009) plus the Cooper Findlay, Texarkana and Clarksdale Plans for the period 2019-2021. The tables are projected using Scale MP-2021 adjusted for 2024 by the IRS for generational mortality, with a base year of 2020.

For male and female participants who became disabled before 1995, the tables prescribed in IRS Revenue Ruling 96-7 are used.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

The table below presents illustrative rates for the base year.

Percentage of Participants Expected to Die Within One Year		
Age	Males	Females
25	0.0882	0.0325
30	0.0929	0.0417
35	0.1115	0.0571
40	0.1236	0.0727
45	0.1633	0.1005
50	0.2682	0.1669
55	0.5000	0.3117
60	0.9904	0.6235
65	1.6660	1.1426
70	2.4917	1.8333
75	3.9617	3.0389
80	6.7216	5.2930
85	11.8269	9.5219
90	20.8954	17.0482

- Lump sum mortality rates

The mortality table is the unisex static mortality table that applies under § 417(e)(3) for annuity starting dates occurring during stability periods beginning in 2024, as published in the appendix to IRS Notice 2023-73.

Termination

The rates at which participants are assumed to terminate employment by age are shown below. These rates are based on the 2003 Society of Actuaries Small Plan Age Table reflecting a multiplier of 0.60.

Representative Termination Rates

Percentage assumed to leave during the year	
Attained Age	
20	14.58
25	11.70
30	9.30
35	7.26
40	5.64
45	4.38
50	3.36
55	2.52

Disability

50% of Pension Disability Table (DP-85) Class 1 Incidence Rates

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
 EIN / PN: 34-4297750 / 001
 Plan Sponsor: Cooper Tire & Rubber Company LLC
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below. All inactive participants are assumed to retire at age 62.

Percentage retiring during the year	
Age	
55-57	6
58	7
59	8
60	11
61	15
62	30
63-64	15
65	50
66	25
67	100

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Benefit commencement date:

- Preretirement death benefit The later of the death of the active participant or the date the participant would have attained age 55 with 10 years of vesting service
- Deferred vested benefit Current active participants: Lump sum is paid upon termination; annuity is deferred to age 62
Current inactive participants: Age 62 or current age if later
- Disability benefit Upon disablement
- Retirement benefit Upon termination of employment

Form of payment

50% of active participants who terminate before the earliest assumed retirement age are assumed to receive a single sum immediately. The remaining active participants are assumed to elect benefits in the form of a life annuity with period certain of 5 years. Participants who are already terminated on the valuation date are assumed to receive their benefit in the normal form at the assumed retirement date.

Percent married

85% married

Spouse age

Wives are assumed to be three years younger than their husbands

Timing of benefit payments

Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the date of decrement.

Unpredictable Contingent Event Benefit (UCEB) assumptions

No prospective events are considered to have more than a de minimis likelihood of occurring.

Methods

Valuation date

First day of plan year

Funding target

Present value of accrued benefits as required by regulations under IRC §430.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Target normal cost Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

Decrement timing The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

Actuarial value of assets Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

The assumed rate of return on plan assets for the two prior plan years is as follows, where the 3rd segment rate is the applicable funding target 3rd segment interest rate for the year published by the IRS (regardless of whether the full yield curve or the segment rates are elected for interest rate election).

Year	Expected Return	3 rd segment rate*	Rate used
2023	6.75%	5.74%	5.74%
2022	5.25%	5.92%	5.25%

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
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Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Tax policy

The actuarial valuation performed for the plan year ending December 31, 2024 is used to determine the maximum deductible contribution for the tax year ending December 31, 2024.

Sources of Data and Other Information

Alight, the administrator for the Company's plans, furnished participant data as of the valuation date. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Asset data were provided by the Company on May 3, 2024. WTW does not receive copies of trust statements.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.

Lump sum conversion rate

As prescribed by law and regulation, lump sums on a 417(e) basis are valued using "annuity substitution" and the discount rate basis selected by the plan sponsor. Future interest rates are determined from information inherent in current market rates.

Plan-related expenses

As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust). The current year estimate equals the current year PBGC premium.

The expected rate of return on invested assets is net of investment-related expenses.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
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Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Demographic Assumptions

Healthy and disabled mortality	Mortality rates for healthy and disabled lives were developed through an analysis of plan experience. The tables have been approved as plan-specific substitute mortality tables under Treas. Reg. § 1.430(h)(3)-2. The rates reflect actual mortality experience during the period of the study. Adjustments of the rates for future periods are prescribed by law and regulations. Other disabled lives are valued using disabled methods and assumptions prescribed by IRC 430(h).
Termination	Termination rates were based on an experience study conducted by the prior actuary, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Retirement	Retirement rates were based on an experience study conducted by the prior actuary, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future.
Lump sum election rate	The percentage of terminating participants assumed to take lump sums is based on experience observed by the prior actuary.
Unpredictable Contingent Event Benefits (UCEBs)	The assumption that UCEBs will not have a material effect has been selected by the plan sponsor. WTW is unable to assess this assumption due to lack of information about the Company's business plans.

Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are "prescribed methods set by law", as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.
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Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
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Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions since prior valuation	<p>The full corporate bond yield curve used to calculate the funding target and target normal cost was updated to the current valuation date as required by IRC §430.</p> <p>The mortality projection scale used to calculate the funding target and target normal cost was updated from Scale MP-2021 to the IRS 2024 Adjusted Scale MP-2021, as required by guidance issued by IRS under IRC §430.</p> <p>The assumed 417(e) applicable mortality table has been updated to reflect the 2024 rates published in IRS Notice 2023-73.</p> <p>The assumed plan-related expenses added to the target normal cost were changed from \$123,744 for the prior valuation to \$129,280 for the current valuation. The plan sponsor indicated that beginning in 2024 the PBGC premium would be the only expense paid from the trust.</p>
Change in methods since prior valuation	None.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
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Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Cooper Tire & Rubber Company LLC
EIN/PN	34-4297750 / 001
Plan Name	Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
Valuation Date	January 1, 2024
Enrolled Actuary	Keith Okress, ASA, EA
Enrollment Number	23-06965

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years. The amounts of contributions and dates paid shown in Item 18 of Schedule SB were listed in reliance on information provided by the plan administrator and/or trustee.

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan 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.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

B This return/report is: the first return/report the final return/report
 an amended return/report a short plan year return/report (less than 12 months)

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

D Check box if filing under: Form 5558 automatic extension the DFVC program
 special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:80%;">1b Three-digit plan number (PN) ▶</td> <td style="width:20%; text-align: center;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/01/1957</td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) 34-4297750</td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number 330-796-2121</td> </tr> <tr> <td colspan="2">2d Business code (see instructions) 326200</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 01/01/1957		2b Employer Identification Number (EIN) 34-4297750		2c Plan Sponsor's telephone number 330-796-2121		2d Business code (see instructions) 326200	
1b Three-digit plan number (PN) ▶	001										
1c Effective date of plan 01/01/1957											
2b Employer Identification Number (EIN) 34-4297750											
2c Plan Sponsor's telephone number 330-796-2121											
2d Business code (see instructions) 326200											
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) Cooper Tire & Rubber Company LLC 200 Innovation Way Akron OH 44316-0001											

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.
 Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<i>Margaret V. Snyder</i>	<u>09/26/25</u>	MARGARET V SNYDER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

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

A Name of plan COOPER TIRE & RUBBER COMPANY FINDLAY REPRESENTED EMPLOYEE RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Cooper Tire & Rubber Company LLC	D Employer Identification Number (EIN) 34-4297750	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	183,541,981
	b Actuarial value	2b	201,026,573
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	853	131,327,296
	b For terminated vested participants	74	3,470,047
	c For active participants	363	41,414,669
	d Total	1,290	176,212,012
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	5.13%
6	Target normal cost		
	a Present value of current plan year accruals	6a	1,731,672
	b Expected plan-related expenses	6b	129,280
	c Target normal cost	6c	1,860,952

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

SIGN HERE	Keith J. Okress KJO Signature of actuary Keith Okress, ASA, EA Type or print name of actuary Willis Towers Watson US LLC Firm name 1001 Lakeside Avenue Suite 1500 Cleveland OH 44114-1172 Address of the firm	August 1, 2025 Date 2306965 Most recent enrollment number 216-937-4000 Telephone number (including area code)
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

Part II		Beginning of Year Carryover and Prefunding Balances	
		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	4,449,130
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	4,449,130
10	Interest on line 9 using prior year's actual return of <u>9.00%</u>	0	400,422
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.07%</u>		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	4,849,552

Part III		Funding Percentages	
14	Funding target attainment percentage	14	109.60%
15	Adjusted funding target attainment percentage	15	112.30%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	107.18%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	
Totals ▶			18(b)	0	18(c)	0

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? Yes No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	<input checked="" type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....				21b

22 Weighted average retirement age **22** 63

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c).....	31a	1,860,952
b Excess assets, if applicable, but not greater than line 31a	31b	1,860,952

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

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

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

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

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

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

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

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

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

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22 Description of Weighted Average Retirement Age as of January 1, 2024

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed. The resulting weighted average retirement age is 63.

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	418,339	62,242	12,798,621	13,279,202
2025	888,280	118,243	12,464,532	13,471,055
2026	1,341,652	146,681	12,035,591	13,523,924
2027	1,777,478	181,949	11,616,488	13,575,915
2028	2,187,507	198,075	11,178,805	13,564,387
2029	2,537,650	218,057	10,751,123	13,506,830
2030	2,826,507	229,505	10,341,769	13,397,781
2031	3,063,499	233,339	9,916,107	13,212,945
2032	3,268,622	246,987	9,487,882	13,003,491
2033	3,438,727	260,187	9,065,397	12,764,311
2034	3,544,666	266,920	8,645,338	12,456,924
2035	3,631,452	266,732	8,223,581	12,121,765
2036	3,690,394	262,142	7,801,615	11,754,151
2037	3,720,401	262,210	7,380,281	11,362,892
2038	3,736,318	268,591	6,960,295	10,965,204
2039	3,725,716	268,921	6,542,248	10,536,885
2040	3,692,379	263,627	6,126,762	10,082,768
2041	3,644,818	258,074	5,714,580	9,617,472
2042	3,582,510	249,844	5,306,531	9,138,885
2043	3,503,083	248,735	4,903,568	8,655,386
2044	3,410,362	248,397	4,506,834	8,165,593
2045	3,309,092	243,062	4,117,638	7,669,792
2046	3,189,545	235,993	3,737,457	7,162,995
2047	3,053,497	225,501	3,368,023	6,647,021
2048	2,910,538	213,458	3,011,303	6,135,299
2049	2,759,495	200,625	2,669,487	5,629,607
2050	2,598,577	187,761	2,344,823	5,131,161
2051	2,428,997	174,751	2,039,584	4,643,332
2052	2,255,325	161,857	1,755,940	4,173,122
2053	2,080,273	149,064	1,495,773	3,725,110

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2054	1,905,421	136,497	1,260,560	3,302,478
2055	1,732,818	124,280	1,051,072	2,908,170
2056	1,564,599	112,538	867,392	2,544,529
2057	1,402,917	101,381	708,839	2,213,137
2058	1,249,182	90,887	574,107	1,914,176
2059	1,104,745	81,110	461,424	1,647,279
2060	970,658	72,062	368,541	1,411,261
2061	847,538	63,750	293,008	1,204,296
2062	735,655	56,170	232,335	1,024,160
2063	634,982	49,291	184,192	868,465
2064	545,133	43,072	146,469	734,674
2065	465,540	37,464	117,257	620,261
2066	395,461	32,418	94,811	522,690
2067	334,154	27,894	77,663	439,711
2068	280,770	23,854	64,611	369,235
2069	234,493	20,252	54,681	309,426
2070	194,587	17,049	47,101	258,737
2071	160,314	14,207	41,261	215,782
2072	131,032	11,700	36,691	179,423
2073	106,157	9,509	33,029	148,695

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
EIN / PN: 34-4297750 / 001
Plan Sponsor: Cooper Tire & Rubber Company LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

After June 30, 2012, no employee shall become an active participant and no inactive participant or former participant shall again become an active participant. There are certain situations that would allow an inactive participant or former participant to become an active participant again that are disclosed in the plan document.

Under the current agreement, no benefit will accrue for the period of July 1, 2009 to June 30, 2010. After June 30, 2012, accrued benefits are frozen and no additional benefits shall accrue after such date for employees hired after December 31, 2008.

Covered employees All employees subject to the collective bargaining agreements between Cooper Tire & Rubber Company and local union #752 of the United Steelworkers of America. Truck drivers at the Findlay Plant who are represented by the Teamsters are also participants of the Findlay plan.

Participation date Date of hire

Definitions

Vesting service Participants are vested after five years of service.

Continuous credited service (CCS) All years of service from the participant's date of employment, to the earlier of termination, or retirement, with fractional years computed to the completed 1/12 of a year. Periods of layoff are included in Benefit Service if recalled before the expiration of two years from layoff. Under the current agreement, CCS will not accrue for purposes of increasing the Accrued Benefit for the Period from July 1, 2009 to June 30, 2010.

Normal retirement date (NRD) First of month coinciding with or next following the attainment of age 65 with five years of service

Monthly Pension Amount The Accrued Benefit for any employee

Plan Name: Cooper Tire & Rubber Company Findlay Represented Employee Retirement Plan
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Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after (a) attaining age 55 and completing ten years of service or (b) completing 30 years of service
Postponed retirement	Retirement after NRD
Deferred vested termination	Termination for reasons other than death, disability, or retirement after completing five years of vesting service and not yet eligible for Early Retirement Benefit
Disability	Permanent and total disability prior to NRD with completion of ten years of service
Pre-retirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse
Post-retirement death benefit	Death while receiving retirement benefits, with a surviving spouse
Plant closure (special vesting)	Termination due to a Plant Closure (defined in the labor agreement) with completion of 30 years of service

Benefits Paid Upon the Following Events

Normal retirement The respective monthly Pension Amount in effect at retirement multiplied by the CCS at retirement. The increase effective on June 7, 2022 is due to the change-in-control agreement.

Pension amount	Effective date
\$50.00	11/6/2000
\$53.00	2/16/2004
\$54.00	11/1/2005
\$55.00	11/1/2006
\$56.00	11/1/2007
\$57.50	4/1/2020
\$58.50	6/7/2022

Early retirement Those eligible as in (a) in the description of Early Retirement eligibility above may elect either the Accrued Benefit reduced by four-tenths of 1% (0.004) for each month prior to age 62 that

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payments commence or the unreduced Accrued Benefit beginning at age 62.

To those eligible under (b) the Accrued Benefit commencing at retirement is payable.

To those eligible under (b) and retiring over age 55, the Accrued Benefit is payable, with an added supplement equal to \$340 plus \$9 per year of service over 30 plus \$10 per year of age over 55 for all months prior to age 62, or earlier commencement of Social Security benefits. The amount of the supplement is reduced if the retired participant has annual earned income in excess of the limitations in the labor agreements.

Postponed retirement

The monthly pension benefit determined as of the actual retirement date

Deferred vested termination

The Accrued Benefit is payable for life commencing at age 65. The participant may elect early commencement of an actuarially reduced benefit after attaining age 55. A lump sum option is also available equal to the greater of: (1) the actuarial equivalent of the Accrued Benefit as defined in the plan document, or (2) an amount equal to an average week's pay times CCS at the time of termination. The product in (2) is increased by a factor of 1.25 if CCS is 10 to 15 years; 1.5 if CCS is 15 to 20 years and 2.0 if CCS exceeds 20 years.

Disablement

The Accrued Benefit commencing the first of the month following five months of disablement. The benefits are guaranteed for 60 months following the Disability Retirement of a participant over age 55 or the 60 months following the attainment of age 55 by a disability retiree under age 55.

Pre-retirement death

If the participant is eligible for Early Retirement at death, the monthly benefit is 50% of the Accrued Benefit as payable in a Qualified Joint and 50% Survivor form (with the spouse as survivor) on the day of the participant's death. If the participant is not eligible for Early Retirement at date of death, the monthly benefit is based on the Accrued Benefit monthly amount at the participant's date of death and is reduced by the Qualified Joint and 50% Survivor option factor for the ages of the participant and spouse as of the earliest date the participant could have elected to

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retire. 50% of the optional benefit is payable to the spouse for life commencing at the date of presumed Early Retirement eligibility.

Post-retirement death

The spouse of a retired participant receives \$4,500 at the death of the participant. The benefit is not paid to those receiving benefits due to a deferred vested termination.

Plant closure (special vesting)

The monthly benefit at termination is determined by multiplying \$16.50 by the CCS.

Other Plan Provisions

Forms of payment

Normal retirement benefits are payable as a 5 year Certain and Continuous Life annuity.

Early retirement benefits are payable as a 5 year Certain and Continuous Life annuity.

Disability benefits are payable for life as a monthly annuity, with 60 months guaranteed as described above.

Pre-retirement death benefits are payable to the spouse as a monthly annuity for life, deferred to the participant's earliest retirement date if later than the date of death.

Plant closure benefits are payable for life as a monthly annuity.

Optional forms of payment include: Life annuity with 5 years certain, 50% Joint and Survivor with 5 years certain, 100% Joint and Survivor with 5 years certain, Life annuity with extended certain period of 5, 10 or 15 years after original 5-year period, 75% Joint and Survivor and 50% Joint & Survivor with 5 years certain and Pop up.

Benefits Not Valued

The pay-related benefit for deferred vested participants is not valued. WTW has reviewed the plan provisions with the plan sponsor and, based on that review, is not aware of any other significant benefits required to be valued that were not.

Future Plan Changes

Benefit changes negotiated in 2024 include an increase in the benefit multiplier and the addition of a lump sum option. These changes will be first reflected in the 2025 valuation.

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Changes in Benefits Valued Since Prior Year

None.

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Schedule SB, Line 24 Change in Actuarial Assumptions

The assumed plan-related expenses added to the target normal cost were changed from \$123,744 for the prior valuation to \$129,280 for the current valuation.

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Schedule SB, Line 23 Information on Use of Substitute Mortality Tables

Mortality is assumed to occur according to a plan-specific substitute mortality table with separate male and female rates, as approved by the IRS in 2022 for valuations starting with the 2023 plan year. The substitute mortality table is constructed from standard tables, adjusted based on the mortality experience of the plan and other aggregated plans and the credibility of that experience. The underlying standard tables are the IRS optional combined tables for males and females for 2020, which are then adjusted by a 1.436540 mortality ratio. The mortality experience is fully credible. The substitute mortality rates are applied to all non-disabled participants and to participants who became disabled after 1994 and before 2010. The tables were developed based on the mortality experience of the corresponding populations of the Goodyear 1950 Plan plus the Cooper Findlay, Texarkana and Clarksdale Plans for the period 2019-2021. The tables are generational, based on the IRS-prescribed projection scale for the valuation year, with a base year of 2020. For male and female participants who became disabled before 1995 or after 2009, the tables prescribed in IRS Revenue Ruling 96-7 are used. The following rates are illustrative for the base year:

Percentage of Participants Expected to Die Within One Year		
Age	Males	Females
25	0.0882	0.0325
30	0.0929	0.0417
35	0.1115	0.0571
40	0.1236	0.0727
45	0.1633	0.1005
50	0.2682	0.1669
55	0.5000	0.3117
60	0.9904	0.6235
65	1.6660	1.1426
70	2.4917	1.8333
75	3.9617	3.0389
80	6.7216	5.2930
85	11.8269	9.5219
90	20.8954	17.0482

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