

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify) E, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, C If the plan is a collectively-bargained plan, check here, D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan: LORD ABBETT INTERNATIONAL SMALL CAP TRUST
1b Three-digit plan number (PN): 001
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): LORD ABBETT & CO LLC, C/O STATE STREET BANK AND TRUST CO., 2323 GRAND BLVD. 5TH FLOOR, KANSAS CITY, MO 64108
2b Employer Identification Number (EIN): 46-2001535
2c Plan Sponsor's telephone number: 816-871-4100
2d Business code (see instructions)

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 entries for employer/plan sponsor and DFE.

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

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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
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.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

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

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

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____ (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan LORD ABBETT INTERNATIONAL SMALL CAP TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LORD ABBETT & CO LLC	D Employer Identification Number (EIN) 46-2001535	

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

STATE STREET BANK AND TRUST COMPANY

04-1867445

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 15 18 19 21 50	TRUSTEE	62768	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

DELOITTE & TOUCHE

13-3891517

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	36000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

UBS

677 WASHINGTONBLVD
CONNECTICUT, CT 06901

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	21232	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

BANK OF AMERICA

56-2058405

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	15722	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

MIZUHO SECURITIES USA INC

320 PARK AVENUE 12TH FLOOR
NEW YORK, NY 10022

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	13567	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

BNP PARIBAS

BOULEVARD DES ITALIENS 16
PARIS, FRANCE 75009 FR

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	13446	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

HSBC

545 WASHINGTON BOULEVARD
JERSEY CITY, NJ 07310

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	13033	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

JEFFERIES + COMPANY

95-2622900

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	12379	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

JOH BERENBERG GOSSLER AND CO

NEUER JUNGFERNSTIEG 20
HAMBURG, GERMANY 20354 DE

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	11534	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

BARCLAYS CAPITAL

EQUITY SALES SUPPORT 1301 6TH AVE,
NEW YORK, NY 10019

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	8909	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

MORGAN STANLEY & CO., INC.

13-2655998

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	8600	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

PERSHING SECURITIES

32 OLD SLIP, 15TH FLOOR
NEW YORK, NY 10286

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	8446	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

GOLDMAN SACHS & CO.

13-5108880

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	7980	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

RBC CAPITAL MARKETS

98-0235083

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	7044	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

SOCIETE GENERALE

30-0195590

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	6860	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

SMBC SECURITIES INC

277 PARK AVENUE
NEW YORK, NY 10172

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
33 71	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	6751	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
STATE STREET BANK AND TRUST COMPANY	10 15 18 19 21 50	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	MANAGEMENT FEE ON STIF CASH SWEEP 18 BPS ANNUALLY NETTED OUT OF YIELD	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
BANK OF AMERICA	33 71	15722
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
BNP PARIBAS	33 71	13446
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
HSBC	33 71	13033
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MIZUHO SECURITIES USA INC	33 71	13567
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
JOH BERENBERG GOSSLER AND CO	33 71	11534
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
BARCLAYS CAPITAL	33 71	8909
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
UBS	33 71	21232
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SMBC SECURITIES INC	33 71	6751
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
SOCIETE GENERALE	33 71	6860
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
PERSHING SECURITIES	33 71	8446
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
GOLDMAN SACHS & CO.	33 71	7980
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MORGAN STANLEY & CO., INC.	33 71	8600
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
RBC CAPITAL MARKETS	33 71	7044
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
JEFFERIES + COMPANY	33 71	12379
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
LORD ABBETT INTERNATIONAL SMALL CAP 46-2001535	BROKER COMMISSIONS	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<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>LORD ABBETT INTERNATIONAL SMALL CAP TRUST</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>LORD ABBETT & CO LLC</u>	D Employer Identification Number (EIN) <u>46-2001535</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name	UNITED FOOD & COMMERCIAL WORKERS INTL UNION - INDUSTRY PENSION FUND	
b Name of plan sponsor	TRUSTEES OF UFCW INT'L UNION - INDUSTRY PENSION FUND	c EIN-PN 51-6055922-001

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

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 LORD ABBETT INTERNATIONAL SMALL CAP TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 LORD ABBETT & CO LLC	D Employer Identification Number (EIN) 46-2001535

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

	(a) Beginning of Year	(b) End of Year
Assets		
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)	237517 130839
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	173837 183544
(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)	99481772 101490825
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	4485463 4244676
(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	104378589	106049884
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	110769	200811
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	110769	200811
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	104267820	105849073

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)	227017	
(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)		227017
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	2848358	
(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)		2848358
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	67384940	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	69443512	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-2058572
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	736854	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		-63689
d Total income. Add all income amounts in column (b) and enter total	2d		1689968

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
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)	9000	
(4) IQPA audit fees	2i(4)	48237	
(5) Investment advisory and investment management fees	2i(5)	33961	
(6) Bank or trust company trustee/custodial fees	2i(6)	24507	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	25000	
(11) Other expenses	2i(11)	-31990	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		108715
j Total expenses. Add all expense amounts in column (b) and enter total	2j		108715

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1581253
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: **DELOITTE & TOUCHE LLP**

(2) EIN: **13-3891517**

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.)			
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?			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
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?			
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?			
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.)			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
l Has the plan failed to provide any benefit when due under the plan?			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

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

Lord Abbett International Small Cap Trust

*Independent Auditor's Report, and Financial Statements
as of and for the Year Ended December 31, 2024*

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

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Deloitte & Touche LLP
30 Rockefeller Plaza
New York, NY 10112-0015
USA

Tel: +1 (212) 492 4000
Fax: +1 (212) 489 1687
www.deloitte.com

INDEPENDENT AUDITOR'S REPORT

To Lord Abbett International Small Cap Trust:

Opinion

We have audited the financial statements of Lord Abbett International Small Cap Trust (the "Trust"), which comprise the statement of assets and liabilities, including the condensed schedule of investments, as of December 31, 2024, and the related statements of operations, changes in net assets, and the financial highlights for the year then ended, and the related notes to the financial statements (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of the Trust as of December 31, 2024, and the results of its operations, changes in its net assets, and financial highlights for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Trust'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 Trust's ability to continue as a going concern for a reasonable period of time.

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

Deloitte & Touche LLP

March 28, 2025

Condensed Schedule of Investments

LORD ABBETT INTERNATIONAL SMALL CAP TRUST *December 31, 2024*

Investments	Fair Value	% of Net Assets
LONG-TERM INVESTMENTS		
Common Stocks		
Australia		
Automobile Components	\$ 1,009,764	0.95%
Insurance	861,579	0.81
Trading Companies & Distributors	<u>917,284</u>	<u>0.87</u>
<i>Total Australia</i>	<u>2,788,627</u>	<u>2.63</u>
Austria		
Banks	2,095,848	1.98
Canada		
Capital Markets	770,114	0.73
Consumer Staples Distribution & Retail	1,178,238	1.11
Gas Utilities	1,104,605	1.04
Metals & Mining	2,565,297	2.42
Oil, Gas & Consumable Fuels	2,615,555	2.47
Paper & Forest Products	315,581	0.30
Retail REITS	1,655,354	1.57
Trading Companies & Distributors	<u>482,269</u>	<u>0.46</u>
<i>Total Canada</i>	<u>10,687,013</u>	<u>10.10</u>
China		
Textiles, Apparel & Luxury Goods	653,564	0.62
Denmark		
Beverages	1,187,636	1.12
Biotechnology	<u>561,730</u>	<u>0.53</u>
<i>Total Denmark</i>	<u>1,749,366</u>	<u>1.65</u>
Faeroe Islands		
Food Products	807,580	0.76
Finland		
Containers & Packaging	1,026,755	0.97
France		
Electrical Equipment	647,613	0.61
Household Durables	963,884	0.91
Oil, Gas & Consumable Fuels	1,014,530	0.96
Personal Care Products	726,495	0.69
Software	<u>2,427,419</u>	<u>2.29</u>
<i>Total France</i>	<u>5,779,941</u>	<u>5.46</u>
Germany		
Interactive Media & Services	1,542,639	1.46
Life Sciences Tools & Services	532,321	0.50
Real Estate Management & Development	552,391	0.52
Textiles, Apparel & Luxury Goods	781,155	0.74
Wireless Telecommunication Services	<u>1,641,832</u>	<u>1.55</u>
<i>Total Germany</i>	<u>5,050,338</u>	<u>4.77</u>
Greece		
Banks	1,301,970	1.23
Hong Kong		
Semiconductors & Semiconductor Equipment	549,696	0.52
Indonesia		
Real Estate Management & Development	818,171	0.77

See Notes to Financial Statements.

Condensed Schedule of Investments (continued)

LORD ABBETT INTERNATIONAL SMALL CAP TRUST *December 31, 2024*

Investments	Fair Value	% of Net Assets
Specialty Retail	\$ 937,352	0.89%
<i>Total Indonesia</i>	<u>1,755,523</u>	<u>1.66</u>
Ireland		
Hotels, Restaurants & Leisure	602,360	0.57
Israel		
Capital Markets	1,836,682	1.74
Italy		
Health Care Equipment & Supplies	721,904	0.68
Hotels, Restaurants & Leisure	798,019	0.75
Leisure Products	505,754	0.48
Personal Care Products	917,987	0.87
Textiles, Apparel & Luxury Goods	<u>1,303,155</u>	<u>1.23</u>
<i>Total Italy</i>	<u>4,246,819</u>	<u>4.01</u>
Japan		
Banks	1,428,739	1.35
Beverages	1,413,980	1.34
Building Products	2,411,595	2.28
Chemicals	1,837,726	1.74
Commercial Services & Supplies	555,976	0.52
Construction & Engineering	968,910	0.92
Distributors	994,906	0.94
Electronic Equipment, Instruments & Components	1,351,190	1.28
Food Products	1,228,526	1.16
Information Technology Services	2,797,388	2.64
Machinery	4,789,168	4.52
Media	391,639	0.37
Real Estate Management & Development	483,354	0.46
Semiconductors & Semiconductor Equipment	249,133	0.23
Software	2,180,577	2.06
Specialty Retail	1,293,362	1.22
Wireless Telecommunication Services	<u>1,738,949</u>	<u>1.64</u>
<i>Total Japan</i>	<u>26,115,118</u>	<u>24.67</u>
Jordan		
Pharmaceuticals	1,196,370	1.13
Mexico		
Consumer Finance	782,457	0.74
Netherlands		
Insurance	1,090,688	1.03
Semiconductors & Semiconductor Equipment	<u>606,415</u>	<u>0.57</u>
<i>Total Netherlands</i>	<u>1,697,103</u>	<u>1.60</u>
New Zealand		
Transportation Infrastructure	431,710	0.41
Norway		
Media	587,522	0.56
Peru		
Banks	1,558,629	1.47
South Korea		
Semiconductors & Semiconductor Equipment	402,077	0.38
Spain		
Air Freight & Logistics	967,898	0.91

See Notes to Financial Statements.

Condensed Schedule of Investments (continued)

LORD ABBETT INTERNATIONAL SMALL CAP TRUST *December 31, 2024*

Investments	Fair Value	% of Net Assets
Containers & Packaging	\$ 885,801	0.84%
<i>Total Spain</i>	<u>1,853,699</u>	<u>1.75</u>
Sweden		
Commercial Services & Supplies	1,503,787	1.42
Leisure Products	648,382	0.61
<i>Total Sweden</i>	<u>2,152,169</u>	<u>2.03</u>
Switzerland		
Building Products	2,107,901	1.99
Capital Markets	899,036	0.85
Life Sciences Tools & Services	494,331	0.47
Machinery	806,742	0.76
<i>Total Switzerland</i>	<u>4,308,010</u>	<u>4.07</u>
Taiwan		
Electronic Equipment, Instruments & Components	548,918	0.52
Semiconductors & Semiconductor Equipment	1,096,921	1.04
<i>Total Taiwan</i>	<u>1,645,839</u>	<u>1.56</u>
United Kingdom		
Aerospace & Defense	1,880,372	1.78
Broadline Retail	691,257	0.65
Capital Markets	3,963,708	3.74
Chemicals	538,817	0.51
Construction & Engineering	623,133	0.59
Construction Materials	1,560,337	1.47
Food Products	2,242,021	2.12
Hotels, Restaurants & Leisure	1,105,805	1.05
Household Durables	797,461	0.75
Insurance	1,363,316	1.29
Residential REITS	1,133,825	1.07
Specialized REITS	1,079,334	1.02
Trading Companies & Distributors	848,654	0.80
<i>Total United Kingdom</i>	<u>17,828,040</u>	<u>16.84</u>
<i>Total Common Stocks (cost \$96,835,971)</i>	<u>\$101,490,825</u>	<u>95.88</u>
SHORT-TERM INVESTMENTS		
Money Market Mutual Funds (cost \$4,244,676)	<u>\$ 4,244,676</u>	<u>4.01</u>
Total Investments in Securities (cost \$101,080,647)	<u>\$105,735,501</u>	<u>99.89%</u>

The following is a summary of the inputs used as of December 31, 2024 in valuing the Trust's investments carried at fair value⁽¹⁾:

Investment Type ⁽²⁾	Level 1	Level 2	Level 3	Total
Long-Term Investments				
Common Stocks				
Canada	\$10,687,013	\$ —	\$—	\$ 10,687,013
France	1,557,537	4,222,404	—	5,779,941
Indonesia	1,755,523	—	—	1,755,523
Ireland	602,360	—	—	602,360
Mexico	782,457	—	—	782,457
New Zealand	431,710	—	—	431,710
Norway	587,522	—	—	587,522

See Notes to Financial Statements.

Condensed Schedule of Investments (concluded)

LORD ABBETT INTERNATIONAL SMALL CAP TRUST *December 31, 2024*

<u>Investment Type</u> ⁽²⁾	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Peru	\$ 1,558,629	\$ —	\$—	\$ 1,558,629
Sweden	1,503,787	648,382	—	2,152,169
United Kingdom	9,621,769	8,206,271	—	17,828,040
Remaining Countries	—	59,325,461	—	59,325,461
Short-Term Investments				
Money Market Mutual Funds	<u>4,244,676</u>	<u>—</u>	<u>—</u>	<u>4,244,676</u>
Total	<u>\$33,332,983</u>	<u>\$72,402,518</u>	<u>\$—</u>	<u>\$105,735,501</u>

⁽¹⁾ Refer to Note 2(j) for a description of fair value measurements and the three-tier hierarchy of inputs.

⁽²⁾ See Condensed Schedule of Investments for fair values in each industry and identification of foreign issuers and/or geography. The table above is presented by Investment Type. Countries are presented within an Investment Type should such Investment Type include securities classified as two or more levels within the three-tier fair value hierarchy. When applicable, each Level 3 security is identified on the Condensed Schedule of Investments along with the valuation technique utilized.

A reconciliation of Level 3 investments is presented when the Trust has a material amount of Level 3 investments at the beginning or end of the year in relation to the Trust's net assets.

See Notes to Financial Statements.

Statement of Assets and Liabilities

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

For the Year Ended December 31, 2024

ASSETS:

Investments in securities, at cost	<u>\$101,080,647</u>
Investments in securities, at fair value	\$105,735,501
Foreign cash, at value (cost \$184,380)	183,544
Receivables:	
Interest and dividends	105,371
Investment securities sold	21,720
From Manager (See Note 2(e))	<u>3,748</u>

Total assets 106,049,884

LIABILITIES:

Payables:

Investment securities purchased	102,042
Professional	61,420
Trust accounting	10,417
Partnership and tax reporting	4,375
Reports to Investors	4,167
Investor recordkeeping	3,750

Accrued expenses 14,640

Total liabilities 200,811

Commitments and contingent liabilities

NET ASSETS (equivalent to \$1,615.86 per Unit based on 65,506.22 Units outstanding) \$105,849,073

Statement of Operations

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

For the Year Ended December 31, 2024

Investment income:

Dividends (net of foreign withholding taxes of \$434,729)	\$ 2,848,358
Interest and other	<u>227,017</u>
Total investment income	<u>3,075,375</u>

Expenses:

Professional	61,698
Trust accounting	25,000
Custody	24,507
Partnership and tax reporting	10,500
Reports to Investors	10,000
Investor recordkeeping	9,000
Other	<u>863</u>
Gross expenses	141,568
Expenses waived or reimbursed by Manager (See Note 2(e))	<u>(32,853)</u>

Net expenses 108,715

Net investment income 2,966,660

Net realized and unrealized gain/(loss):

Net realized gain/(loss) on investments	(476,261)
Net realized gain/(loss) on foreign currency related transactions	(55,237)
Net change in unrealized appreciation/(depreciation) on investments	(845,457)
Net change in unrealized appreciation/(depreciation) on translation of assets and liabilities denominated in foreign currencies	<u>(8,452)</u>

Net realized and unrealized gain/(loss) (1,385,407)

Net Increase in Net Assets Resulting From Operations \$ 1,581,253

Statement of Changes in Net Assets

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

For the Year Ended December 31, 2024

INCREASE IN NET ASSETS

Operations:

Net investment income	\$ 2,966,660
Net realized gain/(loss) on investments and foreign currency related transactions	(531,498)
Net change in unrealized appreciation/(depreciation) on investments and translation of assets and liabilities denominated in foreign currencies	<u>(853,909)</u>
Net increase in net assets resulting from operations	<u>1,581,253</u>

NET ASSETS:

Beginning of year	\$104,267,820
End of year	<u>\$105,849,073</u>

See Notes to Financial Statements.

Financial Highlights

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

December 31, 2024

Per Unit Operating Performance

Net asset value, beginning of year	<u>\$1,591.72</u>
Investment operations:	
Net investment income ^(a)	45.29
Net realized and unrealized gain/(loss)	<u>(21.15)</u>
Total from investment operations	<u>24.14</u>
Net asset value, end of year	<u>\$1,615.86</u>
Total Return^(b)	1.52%
Ratios to Average Monthly Net Assets^(c):	
Expenses after expenses waived and/or reimbursed	0.10%
Expenses before expenses waived and/or reimbursed	0.13%
Net investment income	2.73%

^(a) Calculated based on average Units outstanding during the year.

^(b) Total return is based on a single Unit outstanding throughout the year. It represents the percentage change in the net asset value per Unit between the beginning and the end of the year.

^(c) An individual investor's ratios may vary from the ratios shown.

Notes to Financial Statements

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

December 31, 2024

1. ORGANIZATION

Lord Abnett International Small Cap Trust (the “Trust”) was established as a New Hampshire investment trust under an Agreement and Declaration of Trust (the “Agreement”) dated as of May 30, 2008 and amended from time to time. The Trust commenced operations on November 6, 2014. The Trust is intended to provide eligible investors (each an “Investor”) an opportunity to invest their assets in an investment program managed by Lord, Abnett & Co. LLC (“Lord Abnett”).

Lord Abnett, the Trust’s Investment Manager (the “Manager”), manages the investment assets of the Trust. State Street Bank and Trust Company of New Hampshire (the “Trustee”) is the Trustee of the Trust and is responsible for the custody of the Trust’s assets, performance of certain administrative functions and providing Investor recordkeeping and accounting services.

The investment objective of the Trust is to seek long-term capital appreciation. The Trust invests in a diversified portfolio of equity securities of foreign companies that the Manager believes provide exposure to both growth and value stocks.

The Trust is an investment company and applies the accounting and reporting guidance of the Financial Accounting Standards Board (“FASB”) Accounting Standards Codification *Topic 946 Financial Services – Investment Companies*. The preparation of the financial statements in conformity with accounting principles generally accepted in the United States of America (“U.S. GAAP”) requires management to make certain estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of increases and decreases in net assets from operations during the reporting period. Actual results could differ from those estimates.

Capital terms used but not defined herein shall have the meaning assigned to them in the Agreement

2. SIGNIFICANT ACCOUNTING POLICIES

(a) Investment Valuation—Securities actively traded on any recognized U.S. or non-U.S. exchange or on the NASDAQ Stock Market LLC are valued at the last sale price or official closing price on the exchange or system on which they are principally traded. Events occurring after the close of trading on non-U.S. exchanges may result in adjustments to the valuation of foreign securities to reflect their fair value as of the close of regular trading on the New York Stock Exchange. The Trust may utilize an independent fair valuation service in adjusting the valuations of foreign securities. Unlisted equity securities are valued at the last quoted sale price or, if no sale price is available, at the mean between the most recently quoted bid and ask prices. Swaps are valued daily using independent pricing services or quotations from broker/dealers to the extent available.

Securities for which prices are not readily available are valued at fair value under fair value procedures approved by the Trustee. The Trust considers a number of factors, including observable and unobservable inputs, when arriving at fair value. The Trust may use related or comparable assets or liabilities, recent transactions, market multiples, book values and other relevant information to determine fair value of portfolio investments. The Trust regularly reviews fair value determinations, employs techniques such as reviewing related market activity, reviewing inputs and assumptions, and retrospectively comparing prices of subsequent purchases and sales transactions to fair value determinations.

Investments in open-end money market mutual funds are valued at their net asset value (“NAV”) as of the close of each business day. Short-term securities with 60 days or less remaining to maturity are valued using the amortized cost method, which approximates fair value.

(b) Security Transactions—Security transactions are recorded as of the date that the securities are purchased or sold (trade date). Realized gains and losses on sales of portfolio securities are calculated using the identified-cost method.

(c) Investment Income—Dividend income is recorded on the ex-dividend date. Interest income and other is recorded on the accrual basis as earned. Discounts are accreted and premiums are amortized using the effective interest method and are included in Interest and other income on the Statement of Operations. Withholding taxes on foreign dividends have been provided for in accordance with the applicable country’s tax rules and rates.

(d) Income Taxes—The Trust intends to be treated as a partnership for U.S. federal income tax purposes. As a partnership, the Trust is not itself subject to U.S. federal income tax. For income tax purposes, each Investor will be treated as a partner of the Trust and, as such, will be taxed upon its distributive share of each item of the Trust’s income, gain, loss and deductions for each taxable year of the Trust ending with or within the Investor’s taxable year.

The Trust files U.S. federal and various state and local tax returns. No income tax returns are currently under examination. The statute of limitations on the Trust’s filed U.S. federal tax returns remains open for the tax period ended September 30, 2021 through the tax year ended September 30, 2024. The statutes of limitations on the Trust’s state and local tax returns may remain open for an additional year depending upon the jurisdiction.

In accordance with ASC 740, the Trust has reviewed and evaluated uncertain tax positions and has determined that there are no uncertain tax positions that require financial statement recognition.

(e) Expenses—The Trust is responsible for and will bear its own operating expenses, including, without limitation, (i) ordinary legal and audit expenses, (ii) Trustee fees and expenses, (iii) taxes and governmental fees (i.e., withholding tax on foreign issues), (iv) all expenses incurred in connection with the acquisition or realization of investments (including brokerage commissions and transfer taxes), (v) trust administration, transfer agent, and similar administrative expenses, (vi) extraordinary expenses, including costs of litigation and certain indemnification expenses and (vii) the costs of preparing and distributing reports and notices to the investors. The Manager has voluntarily agreed to reimburse the Trust to the extent that the expenses and obligations described in (i), (ii), (v) and (vii) above, in the aggregate, exceed an annualized rate of 0.10% of the Trust’s average monthly

Notes to Financial Statements (continued)

LORD ABBETT INTERNATIONAL SMALL CAP TRUST

December 31, 2024

net assets. The Manager, in its sole discretion, may from time to time increase or decrease the voluntary reimbursement by notice in writing to the Investors.

(f) Foreign Transactions—The books and records of the Trust are maintained in U.S. dollars and transactions denominated in foreign currencies are recorded in the Trust's records at the rate prevailing when earned or recorded. Asset and liability accounts that are denominated in foreign currencies are adjusted monthly to reflect current exchange rates and any unrealized gain/(loss), if applicable, is included in Net change in unrealized appreciation/(depreciation) on translation of assets and liabilities denominated in foreign currencies in the Trust's Statement of Operations. The resultant exchange gains and losses upon settlement of such transactions are included in Net realized gain/(loss) on foreign currency related transactions in the Trust's Statement of Operations. The Trust does not isolate that portion of the results of operations arising as a result of changes in the foreign exchange rates from the changes in market prices of the securities.

The Trust uses foreign currency exchange contracts to facilitate transactions in foreign-denominated securities. Losses from these transactions may arise from changes in the value of the foreign currency or if the counterparties do not perform under the contracts' terms.

(g) Issuances and Redemptions of Units—The beneficial interest in the Trust is divided into Units. The NAV of the Trust is determined as of the close of business on the last Business Day of each calendar month or at such other frequency as determined by mutual agreement of the Manager and Trustee ("Valuation Date"). The value of each Unit as of a Valuation Date shall be determined by dividing the NAV, as established as of such Valuation Date, by the number of Units outstanding on such Valuation Date. For purposes of valuation, the NAV shall equal the aggregate value of the assets less the value of the accrued liabilities incurred. Issuances and redemptions of Units are based upon NAV.

All eligible Investors desiring to participate in the Trust must complete and deliver to the Manager a Subscription Agreement at least five (5) Business Days prior to the relevant Valuation Date. The initial investment of an Investor must be at least \$5 million. The initial investment minimum may, however, be waived by mutual agreement between the Manager and the Trustee. Units may be redeemed by providing written notice to the Manager and Trustee at least ten calendar days prior to the next available Valuation Date. A "Business Day" is any day or part of a day when the New York Stock Exchange is open for business.

(h) Unit Allocations—All income, profits, losses and expenses of the Trust will be allocated equally to each Unit of the Trust.

(i) Indemnifications—Under the Trust's organizational documents, the Trustee may be indemnified against certain liabilities and expenses arising out of the performance of its duties to the Trust. Additionally, in the normal course of business, the Trust enters into agreements with service providers that may contain indemnification clauses. The Trust's maximum exposure under these agreements is unknown as this would involve future claims that may be made against the Trust that have not yet occurred.

(j) Fair Value Measurements—Fair value is defined as the price that the Trust would receive upon selling an investment or transferring a liability in an orderly transaction to an independent buyer in the principal or most advantageous market of the investment. A three-tier hierarchy is used to maximize the use of observable market data and minimize the use of unobservable inputs and to establish classification of fair value measurements for disclosure purposes. Inputs refer broadly to the assumptions that market participants would use in pricing the asset or liability, including assumptions about risk – for example, the risk inherent in a particular valuation technique used to measure fair value (such as a pricing model) and/or the risk inherent in the inputs to the valuation technique. Inputs may be observable or unobservable. Observable inputs reflect the assumptions market participants would use in pricing the asset or liability. Observable inputs are based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the reporting entity's own assumptions about the assumptions market participants would use in pricing the asset or liability. Unobservable inputs are based on the best information available in the circumstances. The three-tier hierarchy classification is determined based on the lowest level of inputs that is significant to the fair value measurement and is summarized in the three broad Levels listed below:

- Level 1 – unadjusted quoted prices in active markets for identical investments;
- Level 2 – other significant observable inputs (including quoted prices for similar investments, interest rates, prepayment speeds, credit risk, etc.); and
- Level 3 – significant unobservable inputs (including the Trust's own assumptions in determining the fair value of investments).

A summary of inputs used in valuing the Trust's investments as of December 31, 2024, is included in the Trust's Condensed Schedule of Investments.

Changes in valuation techniques may result in transfers into or out of Level 3 within the three-tier hierarchy. The inputs or methodology used for valuing securities are not necessarily an indication of the risk associated with investing in those securities.

3. MANAGEMENT FEE

Each Investor shall be charged directly by the Manager a fee based on the value of such Investor's investment in the Trust, which fee shall be set forth in a Subscription Agreement executed by the Investor. Accordingly, management fees are not incurred by the Trust and therefore not included on the Statement of Operations.

4. INVESTMENT RISKS

The Trust is subject to the general risks and considerations associated with equity investing. These include the risks of investing in equity markets in foreign countries, the risk of investing in derivatives, liquidity risk, and the risks from leverage. The value of an investment will fluctuate in response to movements in the stock market in general, and to the changing prospects of individual companies in which the Trust invests. The Trust is subject to the risks of investing in foreign securities and in the securities of small companies. Foreign securities may pose greater risks than domestic securities, including greater price fluctuations and higher transaction costs. Foreign investments also may be affected by changes in currency rates or currency

Notes to Financial Statements (concluded)
LORD ABBETT INTERNATIONAL SMALL CAP TRUST

December 31, 2024

controls. These risks are generally greater for securities issued by companies in emerging market countries. Investing in small companies generally involves greater risks than investing in the stocks of larger companies, including more volatility and less liquidity.

The Trust's investment exposure to foreign (which may include emerging market) companies presents increased market, liquidity, currency, political, information and other risks. The cost of a Trust's potential use of forward foreign currency exchange contracts varies with factors such as the currencies involved, the length of the contract period and the market conditions prevailing.

The Trust is subject to the risks associated with derivatives, which may be different from and greater than the risks associated with directly investing in securities. Derivatives may be subject to risks such as liquidity risk, leveraging risk, interest rate risk, market risk, and credit risk. Illiquid securities may lower the Trust's returns since the Trust may be unable to sell these securities at their desired time or price. Derivatives also may involve the risk of mispricing or improper valuation and the risk that changes in the value of the derivative may not correlate perfectly with the value of the underlying asset, rate or index. Whether the Trust's use of derivatives is successful will depend on, among other things, the Trust's ability to correctly forecast market movements, changes in foreign exchange and interest rates, and other factors. If the Trust incorrectly forecasts these and other factors, its performance could suffer. The Trust's use of derivatives could result in a loss exceeding the amount of the Trust's investment in these instruments.

Geopolitical and other events (e.g., wars, terrorism, natural disasters, infectious illness outbreaks, epidemics or pandemics) may disrupt securities markets and adversely affect global economies and markets, thereby decreasing the value of the Trust's investments. Market disruptions can also prevent the Trust from implementing its investment strategies and achieving its investment objective.

Adverse developments that affect financial institutions or the financial services industry generally, or concerns or rumors about any events of these kinds or other similar risks, may reduce liquidity in the market generally or have other adverse effects on the economy, the Trust or issuers in which the Trust invests. In addition, issuers in which the Trust invests and the Trust may not be able to identify all potential solvency or stress concerns with respect to a financial institution or to transfer assets from one bank or financial institution to another in a timely manner in the event such bank or financial institution comes under stress or fails.

The impacts and effects of infectious illness outbreaks, epidemics or pandemics (such as the COVID-19 outbreak), may be short term or may continue for an extended period of time. For example, a global pandemic or other widespread health crises could negatively affect the global economy, the economies of individual countries, and the financial performance of individual issuers, sectors, industries, asset classes, and markets in significant and unforeseen ways. Health crises caused by outbreaks of disease may also exacerbate other pre-existing political, social, and economic risks in certain countries or globally. The foregoing could disrupt the operations of the Trust and its service providers, adversely affect the value and liquidity of the Trust's investments, and negatively impact the Trust's performance and your investment in the Trust.

Advancements in technology may also adversely impact markets and the overall performance of the Trust. For instance, the economy may be significantly impacted by the advanced development and increased regulation of technology. As the use of technology grows, liquidity and market movements may be affected. As technology is used more widely in the asset management industry, the profitability and growth of the Trust's holdings may be impacted, which could significantly impact the overall performance of the Trust.

5. SUBSEQUENT EVENTS

Management has evaluated the impact of all subsequent events through March 28, 2025, the date that these financial statements were available to be issued, and determined there were no subsequent events that require an adjustment or disclosure in the financial statements.

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
INTEREST BEARING CASH				
	CAD	CANADIAN DOLLAR		
		11,623.65	8,077.87	8,086.30
	CHF	SWISS FRANC		
		0.07	0.08	0.08
	EUR	EURO CURRENCY		
		38,441.63	39,781.30	39,819.75
	GBP	POUND STERLING		
		78.73	98.56	98.56
	HKD	HONG KONG DOLLAR		
		8.05	1.03	1.04
	IDR	INDONESIAN RUPIAH		
		423,584,621.82	26,945.58	26,317.78
	JPY	JAPANESE YEN		
		194,954.00	1,233.38	1,239.02
	KRW	SOUTH KOREAN WON		
		216.00	0.16	0.15
	NOK	NORWEGIAN KRONE		
		-0.01	0.00	0.00
	SEK	SWEDISH KRONA		
		0.01	0.00	0.00
	TWD	NEW TAIWAN DOLLAR		
		3,540,114.00	108,242.16	107,981.33
	929MMUII2	SS INST US GOV MM ADMIN SALXX SS INST US GOV MM ADMIN CLASS	1.000 12/31/2050	
		4,244,675.95	4,244,675.95	4,244,675.95
		-----	-----	-----
		431,614,733.90	4,429,056.07	4,428,219.96

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
CORPORATE STOCKS - COMMON				
	ACI0XCD32 MONEY FORWARD INC	COMMON STOCK 32,400.000	1,329,666.31	994,784.71
	ACI01VLQ5 BRUNELLO CUCINELLI SPA	COMMON STOCK 11,936.000	569,256.71	1,303,155.30
	ACI06Q332 TOKYU FUDOSAN HOLDINGS CORP	COMMON STOCK 78,600.000	569,760.05	483,354.16
	ACI07W296 GAZTRANSPORT ET TECHNIGA SA	COMMON STOCK EUR.01 7,616.000	955,480.18	1,014,529.45
	ACI099K53 KADOKAWA CORP	COMMON STOCK 19,600.000	423,082.99	391,638.76
	ACI1DMSD2 TEL AVIV STOCK EXCHANGE LTD	COMMON STOCK 158,079.000	933,262.10	1,836,681.88
	ACI1H71S7 SANLORENZO SPA/AMEGLIA	COMMON STOCK 15,000.000	640,328.39	505,753.63
	ACI1WXBL7 BELIMO HOLDING AG REG	COMMON STOCK CHF.05 1,150.000	755,425.65	759,655.12
	ACI12HBP6 BE SEMICONDUCTOR INDUSTRIES	COMMON STOCK EUR.01 4,425.000	471,458.66	606,414.91
	ACI206GX8 SIMPLEX HOLDINGS INC	COMMON STOCK 85,900.000	1,336,200.50	1,358,284.03
	BCT5FD907 STEADFAST GROUP LTD	COMMON STOCK 240,000.000	934,729.97	861,578.61
	BD9PNF909 ASR NEDERLAND NV	COMMON STOCK EUR.16 23,000.000	1,072,697.62	1,090,687.61
	BF0QWT901 JAPAN ELEVATOR SERVICE HOLDI	COMMON STOCK 30,000.000	560,049.53	555,975.72
	BG20RW903 MAP AKTIF ADIPERKASA PT	COMMON STOCK IDR10.0 14,099,700.000	845,925.74	937,351.91
	BHWQZW902 GENTERA SAB DE CV	COMMON STOCK 671,400.000	565,178.71	782,457.44
	BH0VTS902 MEBUKI FINANCIAL GROUP INC	COMMON STOCK 350,000.000	1,316,847.02	1,428,739.39
	BJMZDW903 DALATA HOTEL GROUP PLC	COMMON STOCK EUR.01 124,521.000	599,127.36	602,360.15
	BJ1DLW906 MAN GROUP PLC/JERSEY	COMMON STOCK USD.03428571 415,993.000	1,241,710.20	1,116,555.61
	BLH425904 ASHTEAD TECHNOLOGY HOLDINGS	COMMON STOCK GBP.05 50,294.000	334,911.46	351,963.43
	BMTRW1904 B+M EUROPEAN VALUE RETAIL SA	COMMON STOCK GBP.1 150,454.000	772,043.32	691,256.71

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	BMVB56905 LOOMIS AB	COMMON STOCK SEK5.0 49,458.000	1,478,979.85	1,503,786.77
	BMXPBZ901 LOTTOMATICA GROUP SPA	COMMON STOCK 60,000.000	786,515.23	798,018.63
	BM8NFJ906 BREEDON GROUP PLC	COMMON STOCK GBP.01 279,770.000	1,497,012.12	1,560,337.00
	BNGHNG905 KOKUSAI ELECTRIC CORP	COMMON STOCK 18,275.000	296,989.82	249,133.27
	BNT8D2903 INTERCOS SPA	COMMON STOCK NPV 63,665.000	1,066,457.43	917,987.43
	BP3QYZ900 LOGISTA INTEGRAL SA	COMMON STOCK EUR.2 32,000.000	969,375.53	967,897.98
	BP92CJ907 TATE + LYLE PLC	COMMON STOCK GBP.2916667 148,398.000	1,351,563.45	1,206,637.33
	BQH8HH902 AMOTIV LTD	COMMON STOCK 153,907.000	907,727.00	1,009,764.06
	BQLSWP908 PLANISWARE SA	COMMON STOCK EUR.1 53,472.000	1,167,306.34	1,557,537.45
	BQ81P8908 REDOX LTD/AUSTRALIA	COMMON STOCK 325,000.000	812,888.16	917,284.12
	BSQXJ0908 THULE GROUP AB/THE	COMMON STOCK SEK.01 21,000.000	695,827.38	648,381.89
	BX8ZX2902 ROYAL UNIBREW	COMMON STOCK DKK2.0 16,914.000	1,381,170.13	1,187,635.71
	BYT934904 SCOUT24 SE	COMMON STOCK 17,500.000	1,607,920.20	1,542,639.20
	BZCMYD906 PORT OF TAURANGA LTD	COMMON STOCK 120,000.000	429,742.40	431,710.22
	BZ1GZ0908 BAWAG GROUP AG	COMMON STOCK 24,933.000	1,207,792.52	2,095,848.16
	BZ1MXR908 ALPHA SERVICES AND HOLDINGS	COMMON STOCK EUR.29 777,310.000	1,356,849.22	1,301,970.16
	BZ8TP8907 WONIK IPS CO LTD	COMMON STOCK KRW500.0 26,484.000	847,779.66	402,076.83
	BOLCW0905 HIKMA PHARMACEUTICALS PLC	COMMON STOCK GBP.1 47,950.000	1,269,908.20	1,196,369.87
	BOLF18905 EFG INTERNATIONAL AG	COMMON STOCK CHF.5 62,000.000	854,975.25	899,035.87
	BOPYHC904 LANCASHIRE HOLDINGS LTD	COMMON STOCK USD.5 165,250.000	1,155,318.48	1,363,315.71
	BOSDJB907 ZEALAND PHARMA A/S	COMMON STOCK DKK1.0 5,652.000	531,180.76	561,729.91
	BOWMWD903 QINETIQ GROUP PLC	COMMON STOCK GBP.01 126,918.000	776,552.12	660,023.30

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	B1SK0S902 FREENET AG	COMMON STOCK 57,553.000	1,524,658.69	1,641,831.78
	B1Y47Y901 GERRESHEIMER AG	COMMON STOCK 7,238.000	633,089.90	532,321.10
	B138HB905 KAUFMAN + BROAD SA	COMMON STOCK EUR.26 28,500.000	1,086,177.12	963,884.06
	B18D6G900 JINS HOLDINGS INC	COMMON STOCK 31,600.000	1,311,619.93	1,293,361.72
	B2RJYH901 XTEP INTERNATIONAL HOLDINGS	COMMON STOCK HKD.01 900,000.000	734,445.62	653,563.63
	B234WN909 DIASORIN SPA	COMMON STOCK EUR1.0 7,000.000	805,717.10	721,904.39
	B29T1W902 SHO BOND HOLDINGS CO LTD	COMMON STOCK 29,200.000	1,281,110.82	968,910.36
	B4KWQ7906 PAKUWON JATI TBK PT	COMMON STOCK IDR25.0 33,086,600.000	1,022,686.83	818,171.28
	B45C9X909 CHEMRING GROUP PLC	COMMON STOCK GBP.01 296,742.000	1,163,296.11	1,220,348.72
	B61BG9905 PALTAC CORPORATION	COMMON STOCK 35,888.000	1,139,703.31	994,905.82
	B63QSB902 GREGGS PLC	COMMON STOCK GBP.02 31,705.000	1,194,985.91	1,105,804.68
	B6632T909 BAKKAFROST P/F	COMMON STOCK DKK1.0 14,500.000	880,735.07	807,579.46
	G5S37H101 MAREX GROUP PLC	COMMON STOCK 44,279.000	923,055.57	1,380,176.43
	P5626F128 INTERCORP FINANCIAL SERVICES	COMMON STOCK 53,123.000	1,295,352.40	1,558,628.82
	011532959 ALAMOS GOLD INC CLASS A	COMMON STOCK 79,632.000	1,055,173.14	1,469,157.63
	023188006 CRANSWICK PLC	COMMON STOCK GBP.1 17,000.000	1,151,275.31	1,035,383.69
	028694909 BIG YELLOW GROUP PLC	REIT GBP.1 89,808.000	1,474,245.68	1,079,333.89
	053590907 RENEW HOLDINGS PLC	COMMON STOCK GBP.1 55,000.000	798,494.25	623,133.10
	055768006 HOWDEN JOINERY GROUP PLC	COMMON STOCK GBP.1 50,000.000	538,296.35	496,691.23
	068253004 PERSIMMON PLC	COMMON STOCK GBP.1 53,172.000	931,926.78	797,460.85
	069286904 UNITE GROUP PLC/THE	REIT GBP.25 112,298.000	1,380,266.41	1,133,824.79
	076693902 ST JAMES S PLACE PLC	COMMON STOCK GBP.15 135,000.000	1,355,093.46	1,466,976.14

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LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	092922905 VICTREX PLC	COMMON STOCK GBP.01 40,000.000	564,818.25	538,817.66
	11276H965 BROOKFIELD INFRASTRUCTURE A	COMMON STOCK 27,528.000	1,204,947.29	1,104,605.41
	14071L959 CAPSTONE COPPER CORP	COMMON STOCK 177,238.000	525,125.82	1,096,139.57
	318071958 FINNING INTERNATIONAL INC	COMMON STOCK 18,200.000	588,220.80	482,269.30
	31890B954 FIRST CAPITAL REAL ESTATE IN	REIT 140,300.000	1,711,134.69	1,655,353.58
	443383906 INTERPARFUMS SA	COMMON STOCK EUR3.0 17,190.000	827,235.05	726,495.27
	444747000 HUHTAMAKI OYJ	COMMON STOCK 29,000.000	1,136,424.07	1,026,754.96
	45868C950 INTERFOR CORP	COMMON STOCK 27,018.000	390,951.07	315,581.22
	479053902 VEND MARKETPLACES ASA	COMMON STOCK NOK.5 19,000.000	607,335.67	587,522.18
	485471007 SULZER AG REG	COMMON STOCK CHF.01 5,589.000	638,057.86	806,742.33
	506472901 PUMA SE	COMMON STOCK 17,000.000	795,745.10	781,154.99
	526763909 ESKER SA	COMMON STOCK EUR2.0 3,220.000	800,781.53	869,881.74
	546672908 VIDRALA SA	COMMON STOCK EUR1.02 9,205.000	597,419.56	885,801.19
	552704959 MEG ENERGY CORP	COMMON STOCK 43,800.000	559,786.08	719,106.75
	573563905 TAG IMMOBILIEEN AG	COMMON STOCK 37,136.000	585,834.45	552,390.65
	600245005 ASMPT LTD	COMMON STOCK HKD.1 57,000.000	757,132.72	549,696.46
	601004005 AICA KOGYO CO LTD	COMMON STOCK 54,900.000	1,312,785.69	1,152,116.69
	605142900 REALTEK SEMICONDUCTOR CORP	COMMON STOCK TWD10.0 34,000.000	467,507.77	589,058.85
	614742906 OKINAWA CELLULAR TELEPHONE	COMMON STOCK 62,900.000	1,460,584.42	1,738,949.44
	616328902 COCA COLA BOTTLERS JAPAN HOL	COMMON STOCK 89,100.000	1,198,764.82	1,413,980.11
	617462908 OBIC BUSINESS CONSULTANTS	COMMON STOCK 26,900.000	1,013,316.20	1,185,791.73
	621210905 CHROMA ATE INC	COMMON STOCK TWD10.0 44,000.000	545,887.72	548,917.93

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

(A)	(B) IDENTITY OF ISSUER	(C) DESCRIPTION OF INVESTMENT SHARES/PAR	RATE MAT DATE (D) COST	(E) CURRENT VALUE
	635682008 FUJITEC CO LTD	COMMON STOCK 36,100.000	974,664.45	1,409,631.07
	644157901 VISUAL PHOTONICS EPITAXY CO	COMMON STOCK TWD10.0 100,000.000	530,430.71	507,861.95
	647052000 ORGANO CORP	COMMON STOCK 16,300.000	941,932.53	849,470.91
	648374007 KANSAI PAINT CO LTD	COMMON STOCK 47,670.000	649,974.99	685,609.39
	648462000 KAWASAKI HEAVY INDUSTRIES	COMMON STOCK 17,000.000	708,916.73	786,551.84
	654468909 NS SOLUTIONS CORP	COMMON STOCK 55,608.000	852,610.01	1,439,103.73
	659777007 MIURA CO LTD	COMMON STOCK 35,000.000	889,752.10	885,315.71
	660256009 DMG MORI CO LTD	COMMON STOCK 53,100.000	681,156.78	858,198.86
	663278968 NORTH WEST CO INC/THE	COMMON STOCK 34,480.000	1,084,999.33	1,178,237.57
	664086006 NICHIREI CORP	COMMON STOCK 46,400.000	898,037.98	1,228,525.85
	677678005 SANWA HOLDINGS CORP	COMMON STOCK 86,200.000	1,077,813.73	2,411,594.90
	698554003 AZBIL CORP	COMMON STOCK 173,200.000	1,233,159.29	1,351,190.06
	705041903 DORMAKABA HOLDING AG	COMMON STOCK CHF.1 1,900.000	1,411,011.06	1,348,245.28
	713083905 NEXANS SA	COMMON STOCK EUR1.0 6,000.000	860,048.39	647,613.25
	739176907 SIEGFRIED HOLDING AG REG	COMMON STOCK CHF7.2 455.000	524,831.31	494,330.89
	87262K956 TMX GROUP LTD	COMMON STOCK 25,000.000	806,048.73	770,113.74
	89055A963 TOPAZ ENERGY CORP	COMMON STOCK 25,000.000	480,210.18	484,364.67
	96467A952 WHITECAP RESOURCES INC	COMMON STOCK 199,000.000	1,582,196.75	1,412,083.90
		----- 56,320,399.000	----- 96,835,971.16	----- 101,490,824.55

LA INTL SMALL CAP TRUST NHIT
LORD ABBETT
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS
(HELD AT END OF YEAR)

ASSET CATEGORY	UNITS	COST	CURRENT VALUE
INTEREST BEARING CASH	431,614,733.900	4,429,056.07	4,428,219.96
CERTIFICATES OF DEPOSIT	0.000	0.00	0.00
U.S. GOVERNMENT SECURITIES	0.000	0.00	0.00
CORP. DEBT INSTR. - PREFERRED	0.000	0.00	0.00
CORP. DEBT INSTR. - ALL OTHER	0.000	0.00	0.00
CORPORATE STOCKS - PREFERRED	0.000	0.00	0.00
CORPORATE STOCKS - COMMON	56,320,399.000	96,835,971.16	101,490,824.55
PARTN./JOINT VENTURE INTERESTS	0.000	0.00	0.00
REAL ESTATE-INCOME PRODUCING	0.000	0.00	0.00
REAL ESTATE-NON INC. PRODUCING	0.000	0.00	0.00
LOANS SECURED BY MTGES-RESID.	0.000	0.00	0.00
LOANS SECURED BY MTGES-COM'L	0.000	0.00	0.00
LOANS TO PARTIC. - MORTGAGES	0.000	0.00	0.00
LOANS TO PARTICIPANTS - OTHER	0.000	0.00	0.00
OTHER	0.000	0.00	0.00
COMMON/COLLECTIVE TRUSTS	0.000	0.00	0.00
POOLED SEPARATE ACCOUNTS	0.000	0.00	0.00
103-12 INVESTMENTS	0.000	0.00	0.00
REGISTERED INVESTMENT COMPANY	0.000	0.00	0.00
INSURANCE CO. GENERAL ACCOUNT	0.000	0.00	0.00
** ASSET CATEGORY NOT FOUND **	0.000	0.00	0.00
GRAND TOTALS	487,935,132.900 =====	101,265,027.23 =====	105,919,044.51 =====