

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1
1b Three-digit plan number (PN): 038
1c Effective date of plan: 01/01/1986
2a Plan sponsor's name (employer, if for a single-employer plan): INTERNATIONAL MOTORS, LLC
2b Employer Identification Number (EIN): 36-1264810
2c Plan Sponsor's telephone number: 331-332-5000
2d Business code (see instructions): 336100

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

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

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

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

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:		4b EIN 36-1264810	
a Sponsor's name NAVISTAR, INC.		4d PN 038	
c Plan Name NAVISTAR, INC. HOURLY EMPLOYEES PENSION PLAN NO. 1			
5 Total number of participants at the beginning of the plan year	5	11395	
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).			
6a(1) Total number of active participants at the beginning of the plan year	6a(1)	811	
6a(2) Total number of active participants at the end of the plan year	6a(2)	738	
b Retired or separated participants receiving benefits	6b	6689	
c Other retired or separated participants entitled to future benefits	6c	1184	
d Subtotal. Add lines 6a(2), 6b, and 6c	6d	8611	
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits	6e	2510	
f Total. Add lines 6d and 6e	6f	11121	
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)		
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)		
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6h	0	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7		

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

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

A Name of plan <u>INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1</u>	B Three-digit plan number (PN) ▶	<u>038</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>INTERNATIONAL MOTORS, LLC</u>	D Employer Identification Number (EIN) <u>36-1264810</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>739012452</u>
	b Actuarial value	2b	<u>739012452</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>9488</u>	<u>828562853</u>
	b For terminated vested participants	<u>1280</u>	<u>41670838</u>
	c For active participants	<u>811</u>	<u>71013471</u>
	d Total	<u>11579</u>	<u>941247162</u>
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	<u>5.01</u> %
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>1793371</u>
	b Expected plan-related expenses	6b	<u>180000</u>
	c Target normal cost	6c	<u>1973371</u>

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

SIGN HERE		
	Signature of actuary	<u>10/07/2025</u> Date
	<u>BRIANA C GARCIA</u> Type or print name of actuary	<u>23-07806</u> Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u> Firm name	<u>312-288-7700</u> Telephone number (including area code)
	<u>WILLIS TOWER 233 SOUTH WACKER DRIVE SUITE 1800 CHICAGO, IL 60606</u> Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	19833497
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	19833497
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of <u>9.71</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.13</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	77.08 %
15	Adjusted funding target attainment percentage	15	77.08 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	71.99 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls		18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
04/15/2024	8200000	0					
07/15/2024	4500000	0					
10/15/2024	6400000	0					
01/15/2025	6400000	0					
09/09/2025	3900000	0					
			Totals ▶	18(b)	29400000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	28299916
20	Quarterly contributions and liquidity shortfalls:		
	a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:		
Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 63
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

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

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	1973371	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	219742636	26237045	
b Waiver amortization installment.....	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	28210416	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35)	36	28210416	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	28299916	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	89500	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<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>INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1</u>	B Three-digit plan number (PN)	<u>038</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>INTERNATIONAL MOTORS, LLC</u>	D Employer Identification Number (EIN) <u>36-1264810</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>NAVISTAR, INC. HEPP MASTER TRUST</u>		
b Name of sponsor of entity listed in (a): <u>INTERNATIONAL MOTORS, LLC</u>		
c EIN-PN <u>13-3248322-100</u>	d Entity code <u>M</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>703251617</u>
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)

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)

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)

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 INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1	B Three-digit plan number (PN) ▶ 038
C Plan sponsor's name as shown on line 2a of Form 5500 INTERNATIONAL MOTORS, LLC	D Employer Identification Number (EIN) 36-1264810

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	14000000
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	99592
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	727109582
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	703251617

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	741209174	713551617
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	130092	150414
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	130092	150414
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	741079082	713401203

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)	29400000	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		29400000
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(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)		36683463
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		66083463

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	92967594	
(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)		92967594
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)	9752	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	333141	
(6) Bank or trust company trustee/custodial fees	2i(6)	135799	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	30321	
(11) Other expenses.....	2i(11)	284735	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		793748
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		93761342

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-27677879
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: GRANT THORNTON LLP

(2) EIN: 36-6055558

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 552079.

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

A Name of plan <u>INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1</u>	B Three-digit plan number (PN)	<u>038</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INTERNATIONAL MOTORS, LLC</u>	D Employer Identification Number (EIN) <u>36-1264810</u>	

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

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

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

1	<u>0</u>
----------	----------

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 36-1561860

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

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

3	<u>0</u>
----------	----------

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
 Public Equity: 41.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 30.0 %
 High-Yield Debt: 4.0 % Real Assets: 13.0 % Cash or Cash Equivalents: 2.0 % Other: 10.0 %

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

Financial Statements and Report of Independent
Certified Public Accountants

International Motors, LLC
Hourly Employees Pension Plan No. 1
(f/k/a Navistar, Inc.
Hourly Employees Pension Plan No. 1)

December 31, 2024 and 2023

Contents

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Plan Administrator and Plan Participants
International Motors, LLC Hourly Employees Pension Plan No. 1

Scope and nature of the ERISA Section 103(a)(3)(C) audit

We have performed audits of the financial statements of The International Motors, LLC Hourly Employees Pension Plan No. 1 (f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1) (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

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

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section

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

Basis for opinion

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

Responsibilities of management for the financial statements

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

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

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

Auditor's responsibilities for the audit of the financial statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US 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 US GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

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

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

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

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

Grant Thornton LLP

Chicago, Illinois
October 8, 2025

International Motors, LLC Hourly Employees Pension Plan No. 1
(f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1)
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
As of December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Assets		
Plan's interest in Master Trust, at fair value	\$ 703,251,617	\$ 727,109,582
Company contribution receivable	10,300,000	14,000,000
Income tax refund receivable	-	99,592
	<u>713,551,617</u>	<u>741,209,174</u>
Liabilities		
Accrued administrative expenses	<u>150,414</u>	<u>130,092</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 713,401,203</u></u>	<u><u>\$ 741,079,082</u></u>

The accompanying notes are an integral part of these statements.

International Motors, LLC Hourly Employees Pension Plan No. 1
(f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1)
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the years ended December 31, 2024 and 2023

	2024	2023
Additions to net assets		
Investment income		
Change in Plan's interest in Master Trust	\$ 36,683,463	\$ 69,359,254
Company contribution	29,400,000	14,000,000
Income tax refund	-	120,322
Total additions to net assets	66,083,463	83,479,576
Deductions from net assets		
Benefits paid directly to participants or their beneficiaries	92,967,594	95,693,123
Administrative expenses	793,748	769,344
Total deductions from net assets	93,761,342	96,462,467
NET DECREASE	(27,677,879)	(12,982,891)
Net assets available for benefits		
Beginning of year	741,079,082	754,061,973
End of year	\$ 713,401,203	\$ 741,079,082

The accompanying notes are an integral part of these statements.

**International Motors, LLC Hourly Employees Pension Plan No. 1
(f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1)
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023**

NOTE A - DESCRIPTION OF THE PLAN

The following description of the International Motors, LLC Hourly Employees Pension Plan No. 1 (f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1) (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan document for a complete description of the Plan’s provisions.

General

The Plan is a defined benefit pension plan sponsored by International Motors, LLC (f/k/a Navistar, Inc.) (the “Company”) that is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”). In general, employees are considered eligible for the Plan at the date of employment if they are represented by a union and meet certain service hour requirements.

Effective October 1, 2024, the Company’s name changed from Navistar, Inc. to International Motors, LLC. In addition, effective October 1, 2024, the Plan’s name changed from the Navistar, Inc. Hourly Employees Pension Plan No. 1 to the International Motors, LLC Hourly Employees Pension Plan No. 1.

The Plan’s assets are held in the Navistar, Inc. Hourly Employees Pension Trust (the “Master Trust”), along with the assets of the International Motors, LLC Hourly Employees Pension Plan No. 2 (f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 2) (“HEPP 2”), a separate defined benefit plan sponsored by the Company. The Northern Trust Company (the “Trustee”) serves as the trustee of the Plan and the Master Trust. The Trustee is authorized to hold the assets of the Plan, to invest or reinvest the assets of the Master Trust, and to deposit monies in separate checking accounts for the payment of benefits or expenses of the Plan and the Master Trust in accordance with the instructions of the Company.

Contributions

The Plan provides that the Company shall make annual contributions required under the minimum funding standards of the Internal Revenue Code (the “IRC”) and ERISA. In no event, however, shall the Company be required to pay in any year an amount greater than the amount that is deductible for tax purposes in that year. The 2024 and 2023 contributions required to meet the minimum funding standards of ERISA were \$28,210,416 and \$32,662,662, respectively. The Company’s contributions for 2024 and 2023 met or exceeded the minimum requirement. The Company elected to satisfy a portion of the 2023 minimum contribution from the Plan’s prefunding balance. The balance of the 2023 minimum contribution was funded by the Company. Contributions funded by the Company are made directly to the Trustee.

International Motors, LLC Hourly Employees Pension Plan No. 1
(f/k/a Navistar, Inc. Hourly Employees Pension Plan No. 1)
NOTES TO FINANCIAL STATEMENTS - CONTINUED
December 31, 2024 and 2023

Benefits

The Plan provides that eligible employees who retire after September 1, 1955, shall receive a benefit based on the employee's credited service and monthly benefit rate. Eligible employees who work on or after January 1, 1987, and who retire on or after October 1, 1995, receive benefits based on increased monthly benefit rates (subject to the provisions of the various collective bargaining agreements). Employees who retire at their option prior to age 62 and who have 10 years of credited service shall receive a reduced benefit based on attained age at retirement. Certain employees are eligible for supplemental allowances that are dependent on attained age and credited service at retirement date. Participants become fully vested in their accrued benefits upon completion of five years of vesting service.

Administrative Expenses

Administrative expenses are paid from the Plan unless the terms of the various collective bargaining agreements direct that the Company must pay such expenses.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

The financial statements of the Plan are presented on the accrual basis of accounting.

Use of Estimates

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 estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements and changes therein. Actual results could differ from those estimates.

Risks and Uncertainties

Investment securities, in general, are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

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

Investment Valuation and Income Recognition

The Plan's interest in the Master Trust is presented at fair value, which has been determined based on the fair value of the underlying investments of the Master Trust.

Dividend income is recorded on the ex-dividend date. Interest income is recorded as earned on an accrual basis. Purchases and sales of securities are recorded on the trade-date basis. Net realized and unrealized appreciation (depreciation), along with dividend income and interest income are recorded in the accompanying statements of changes in net assets available for benefits as change in Plan's interest in Master Trust.

The Plan follows guidance on accounting for fair value measurements, which:

- Defines fair value as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants at the measurement date, and establishes a framework for measuring fair value;
- Establishes a hierarchy of fair value measurement based on the observability of inputs used to value assets and liabilities;
- Requires consideration of nonperformance risk; and
- Requires disclosures about the methods used to measure fair value.

The framework for measuring fair value establishes a three-level hierarchy of measurements based on the reliability of observable and unobservable inputs used to arrive at fair value. Observable inputs are independent market data, while unobservable inputs reflect the Plan management's assumptions about valuation. Depending on the inputs, the Plan classifies each fair value measurement as follows:

- Level 1 - based on unadjusted quoted prices for *identical* instruments in active markets;
- Level 2 - based on quoted prices for *similar* instruments, prices for identical or similar instruments in markets that are not active, or model-derived valuations, all of whose significant inputs are observable; and

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- Level 3 - based on one or more significant unobservable inputs.

The following describes the methods and significant assumptions used to estimate fair value of the investments held by the Master Trust. There were no changes in the methodologies used at December 31, 2024 and 2023.

Cash and short-term investments - Valued at cost plus earnings from investments for the period, which approximates fair market value due to the short-term duration. Short-term investments are valued at net asset value (“NAV”) as provided by the administrator of the fund.

Collective trusts - Valued at the NAV provided by the administrator of each trust. The NAV is based on the value of the underlying assets owned by the trust, minus its liabilities, and then divided by the number of shares outstanding.

Hedge fund, private debt funds, private equity funds, insurance-linked securities funds, and real estate - Valued at the NAV as reported to the Trustee from the respective fund’s manager and is used as a practical expedient to estimate fair value. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding.

See Note C - Master Trust - for the Master Trust’s investments by level within the fair value hierarchy as of December 31, 2024 and 2023.

Benefit Payments

Benefits are recorded when paid.

NOTE C - MASTER TRUST

The Master Trust holds the Plan’s and HEPP 2’s investment assets. Use of the Master Trust permits the commingling of Plan assets with the assets of HEPP 2 for investment and administrative purposes. Although assets of the plans are commingled in the Master Trust, the Trustee maintains supporting records for the purpose of allocating the investments to the participating plans. Each plan holds a divided interest in the Master Trust’s net assets as of December 31, 2024 and 2023. The value of the Plan’s interest in the Master Trust is based on the beginning of year value of the Plan’s interest in the Master Trust, plus actual contributions and investment income or loss, less actual benefits paid and administrative expenses.

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The following table presents the Master Trust's net assets and the Plan's interest in the Master Trust's net assets as of December 31:

Assets	2024		2023	
	Master Trust	Plan's Interest	Master Trust	Plan's Interest
Investments, at fair value				
Cash and short-term investments	\$ 18,737,475	\$ 14,928,156	\$ 31,489,439	\$ 27,428,954
Collective trusts	698,624,607	597,033,213	708,189,285	595,261,673
Hedge fund	29,987,211	28,770,087	27,706,287	26,581,741
Private debt funds	45,584,759	37,833,685	51,924,932	43,093,233
Private equity funds	-	-	101,614	84,102
Insurance-linked securities funds	1,510,249	1,249,011	2,858,516	2,384,742
Real estate	28,247,685	23,378,412	27,721,814	22,944,186
Total investments	<u>822,691,986</u>	<u>703,192,564</u>	<u>849,991,887</u>	<u>717,778,631</u>
Receivables				
Receivable for investments sold	3,538,891	3,399,971	10,229,791	9,200,000
Accrued investment income	106,887	89,085	144,313	130,951
Total receivables	<u>3,645,778</u>	<u>3,489,056</u>	<u>10,374,104</u>	<u>9,330,951</u>
Total assets	<u>826,337,764</u>	<u>706,681,620</u>	<u>860,365,991</u>	<u>727,109,582</u>
Liabilities				
Payable for investments purchased	<u>3,576,030</u>	<u>3,430,003</u>	<u>49,791</u>	<u>-</u>
Total net assets of the Master Trust available for benefits	<u>\$ 822,761,734</u>	<u>\$ 703,251,617</u>	<u>\$ 860,316,200</u>	<u>\$ 727,109,582</u>

The net investment earnings of the Master Trust for the years ended December 31, 2024 and 2023, are summarized below:

	2024	2023
Net appreciation in fair value of investments	\$ 38,546,574	\$ 79,967,617
Dividend and interest income	1,786,288	1,360,010
	<u>\$ 40,332,862</u>	<u>\$ 81,327,627</u>

The following tables present the Master Trust's investments by level within the fair value hierarchy as of December 31,:

	2024				Total
	Level 1	Level 2	Level 3	NAV	
Cash and short-term investments	\$ 18,737,475	\$ -	\$ -	\$ -	\$ 18,737,475
Collective trusts (a)	-	698,624,607	-	-	698,624,607
Hedge fund (b)	-	-	-	29,987,211	29,987,211
Private debt funds (c)	-	-	-	45,584,759	45,584,759
Insurance-linked securities funds (e)	-	-	-	1,510,249	1,510,249
Real estate (f)	-	-	-	28,247,685	28,247,685
Total	<u>\$ 18,737,475</u>	<u>\$ 698,624,607</u>	<u>\$ -</u>	<u>\$ 105,329,904</u>	<u>\$ 822,691,986</u>

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	2023				Total
	Level 1	Level 2	Level 3	NAV	
Cash and short-term investments	\$ 31,489,439	\$ -	\$ -	\$ -	\$ 31,489,439
Collective trusts (a)	-	708,189,285	-	-	708,189,285
Hedge fund (b)	-	-	-	27,706,287	27,706,287
Private debt funds (c)	-	-	-	51,924,932	51,924,932
Private equity funds (d)	-	-	-	101,614	101,614
Insurance-linked securities funds (e)	-	-	-	2,858,516	2,858,516
Real estate (f)	-	-	-	27,721,814	27,721,814
Total	\$ 31,489,439	\$ 708,189,285	\$ -	\$ 110,313,163	\$ 849,991,887

- (a) All of the collective trusts file an annual report on Form 5500 as a direct filing entity. Except for two collective trusts, redemption is permitted daily with 2 or 15 days' written notice. One collective trust that is an exception permits redemption quarterly with 105 days' notice and a 10% holdback is applicable upon full liquidation. The other collective trust permits redemption monthly with 95 days' notice.
- (b) This fund does not file an annual report on Form 5500 as a direct filing entity. The investment strategy of the fund is to generate attractive returns over a full market cycle by investing in a range of alternative investment opportunities with sources of return that have a low correlation to the broader financial markets, while also seeking to preserve capital. The fund has a one year lock up period and thereafter, redemptions are permitted semi-annually at the end of June and December with 95 days' notice. Full redemptions are subject to a 10% holdback.
- (c) These funds are closed end funds and redemption is not permitted. One of the funds files an annual report on Form 5500 as a direct filing entity. The Master Trust is committed to invest \$30,000,000 in this fund, of which \$26,003,960 and \$25,067,141 has been funded as of December 31, 2024 and 2023, respectively. The other fund does not file an annual report on Form 5500 as a direct filing entity. The investment strategy of the fund is to primarily focus on private credit and real estate lending, with an additional allocation to opportunistic credit. The fund has a lock up through the life of the fund, however, capital distributions will be made during the term. The Master Trust is committed to invest \$45,000,000 in the fund, of which \$33,225,270 has been funded as of December 31, 2024 and 2023.
- (d) These funds do not file an annual report on Form 5500 as direct filing entities. The investment strategy of these funds is to invest in other limited partnerships, limited liability companies and other pooled investment vehicles. Redemption is not permitted. With written permission from the respective partnership's manager, the Master Trust may sell all or part of its interest to another party as long as the transfer of the interest to the other party follows the appropriate transfer policies of the partnerships. In 2023, the funds began a wind down phase and cash distributions of the proceeds received from liquidating the funds' underlying portfolios, net of applicable expenses, were being made. The wind down was completed in 2024 and the Master Trust was released from its commitment and no longer holds the investments. The Master Trust was committed to invest \$90,000,000 in the partnerships, of which \$82,937,780 had been funded as of December 31, 2023.
- (e) These funds do not file an annual report on Form 5500 as a direct filing entity. These funds achieve their investment strategy by participating in collateralized reinsurance and retrocessional contracts or securities and other transactions which primarily provide exposure to risks traditionally associated with the insurance and reinsurance industry and, in particular catastrophe insurance risk across a number of

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different geographic regions and perils. Redemption from one of the funds was not permitted until the expiration of the one year lock up period, at which time the Plan elected to reinvest its redemptions into another class of shares within the fund. Both share classes have begun a wind down phase to distribute all assets in the portfolio in cash and normal redemptions are no longer permitted. Both share classes will be compulsorily redeemed pro rata as cash becomes available for distribution. Certain events may suspend or delay the payment of the redemption proceeds. The other fund has a one year lock up and requires redemption notice as outlined by the fund. The fund will make redemption payouts and distributions on a monthly basis if there is liquidity from underlying investments.

- (f) These funds do not file an annual report on Form 5500 as a direct filing entity. The funds are closed-end funds and redemption is not permitted. One of the funds pursues a high value-add and opportunistic investment strategy with respect to real estate and real estate-related investments primarily in North America and Europe. The Master Trust is committed to invest \$13,382,353 in this fund, of which \$7,431,832 and \$7,036,312 has been funded as of December 31, 2024 and 2023, respectively. The second fund seeks attractive opportunistic risk-adjusted returns by acquiring positions of control or significant influence in real estate and real estate companies globally capitalizing on market instabilities and volatility and assessing growth opportunities. The Master Trust is committed to invest \$17,500,000 in this fund, of which \$13,506,928 and \$13,772,106 has been funded as of December 31, 2024 and 2023, respectively.
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NOTE D - TAX STATUS

The Internal Revenue Service (“IRS”) issued a favorable determination letter, dated February 7, 2014, indicating that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. The Plan has been amended since receiving the letter; however, the Company believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2024 and 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by the IRS; however, there are currently no audits for any tax periods in progress.

The Plan holds certain investments that are subject to Unrelated Business Income Tax and therefore, the Plan may be required to pay income tax. The Plan did not pay income tax for the 2024 and 2023 Plan years.

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NOTE E - PLAN TERMINATION

If the Plan is terminated, the net assets of the Plan will be distributed to the participants in an order of priority determined in accordance with ERISA and its applicable regulations, and with the Plan document. Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (the “PBGC”) if the Plan terminates. Generally, the PBGC guarantees most vested normal retirement benefits, early retirement benefits, and certain disability and survivor’s pensions. However, the PBGC does not guarantee all types of benefits under covered plans, and the amount of benefit protection is subject to certain limitations.

The PBGC guarantees vested benefits at the level in effect on the date of Plan termination, subject to a statutory ceiling on the amount of an individual’s monthly benefit. Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan’s net assets to provide for accumulated benefit obligations, and may also depend on the financial condition of the Plan sponsor and the level of benefits guaranteed by the PBGC.

NOTE F - INFORMATION CERTIFIED BY THE TRUSTEE

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Trustee has certified that the following data included in the accompanying financial statements is complete and accurate, except for \$1,617,431 and \$118,448 that Plan management recorded to adjust certain alternative investments to fair value as of December 31, 2024 and 2023, respectively:

- Plan’s interest in Master Trust as shown in the statements of net assets available for benefits as December 31, 2024 and 2023.
- Investment income as shown in the statements of changes in net assets available for benefits for the years ended December 31, 2024 and 2023.

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NOTE G - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

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

The actuarial present value of accumulated plan benefits was determined by actuaries from the Plan’s independent actuary, Willis Towers Watson US LLC, and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money and the probability of payment between the valuation date and the expected date of payment.

The significant actuarial assumptions used in the valuation of accumulated plan benefits as of December 31, 2023 were (1) an interest rate of 5.00% (updated from 5.30% for 2022), (2) the life expectancy of healthy and disabled participants using 111% of Pri-2012 (blue collar) projected generationally to 2037 using scale MP-2021 adjusted for year 2023 (unchanged from 2022), and (3) retirement rates varying by age and service with average expected retirement age of 63.

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

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

Vested benefits	
Participants and beneficiaries currently receiving benefits	\$773,468,203
Other participants	<u>111,582,658</u>
Total vested benefits	885,050,861
Nonvested benefits	<u>17,047,267</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$902,098,128</u></u>

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

Balance as of December 31, 2022	\$ 927,683,995
Additional benefits accumulated (including the effect of non-investment experience)	1,745,188
Actuarial losses	1,983,684
Interest due to decrease in discount period	46,756,628
Assumption changes	19,621,756
Benefits paid	<u>(95,693,123)</u>
Balance as of December 31, 2023	<u>\$ 902,098,128</u>

NOTE H - PARTY-IN-INTEREST TRANSACTIONS

The Plan paid fees to the Trustee for trustee and investment services. Aon serves as the Plan's investment advisor and the Plan paid Aon investment advisor fees. In addition, certain Master Trust investments are managed by the Trustee and Aon. Payments to the Trustee and Aon and investments managed by the Trustee and Aon qualify as party-in-interest transactions.

NOTE I - SUBSEQUENT EVENTS

Management of the Plan has evaluated its December 31, 2024 financial statements for subsequent events through October 8, 2025, the date the financial statements were available to be issued. There were no subsequent events that require recognition or additional disclosure in these financial statements.

SCHEDULE SB ATTACHMENTS

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

Attained Age	Attained Years of Credited Service ⁸										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	2	0	2	0	0	0	0	0	0	4
40-44	0	4	7	1	6	3	0	0	0	0	0	21
45-49	2	3	13	13	8	13	8	0	0	0	0	60
50-54	0	13	15	9	4	22	63	3	0	0	0	129
55-59	0	8	19	17	6	17	87	4	0	0	0	158
60-64	0	4	7	9	3	10	63	4	3	1	1	104
65-69	0	1	3	4	1	8	27	2	1	2	2	49
70 & over	0	1	2	0	0	1	8	6	0	16	16	34
Total	2	34	68	53	30	74	256	19	4	19	19	559

⁸ Age and service for purposes of determining category are based on exact (not rounded) values.

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SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

Applicable month September 2023

Yield curve basis Segment rates

Interest rates for funding:	Reflecting Stabilization	Not Reflecting Stabilization ¹
First segment rate	4.75%	3.62%
Second segment rate	4.87%	4.46%
Third segment rate	5.59%	4.52%
Effective interest rate	5.01%	4.38%
Plan reporting interest rate		5.00%

Annual rates of increase

Compensation N/A

Future Social Security wage bases N/A

Statutory limits on compensation N/A

Plan-related expenses paid by the plan \$180,000

¹ Rates not reflecting stabilization are used to determine the PBGC 4010 funding shortfall.

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Demographic Assumptions

Inclusion date The valuation date coincident with or next following the date on which the employee is hired.

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

Mortality for funding

Healthy and disabled Separate rates for non-annuitants and annuitants based on Pri-2012 "Employees" and "Healthy Annuitants" (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Termination Rates varying by age, equal to 145% of the SOA Hourly Union termination rate table.

Representative Rates

Percentage leaving during the year	
Age	
25	4.93%
30	3.92
35	3.19
40	2.47
45	2.03
50	1.60

Disability Rates vary by age, equal to 37.5% of the 1987 Commissioner's Group Disability Male table.

Representative Rates

Percentage becoming disabled during the year	
Age	
25	.019%
30	.024
35	.033
40	.052
45	.096
50	.190
55	.359
60	.552

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Retirement Rates varying by age and service with average expected retirement age of 63.

Active employees Rates vary by age.

Representative Rates

Percentage retiring during the year	
Age	Rate
55-59	10.0%
60-61	15.0
62-64	20.0
65-69	35.0
70	100.0

Layoffs Earliest unreduced

Deferred inactive Later of age 60 or current age

Deferred inactive eligible for grown-in Earliest eligible retirement date

Benefit commencement date:

Retirement Immediate

Termination Normal retirement date

Disability Earliest eligible commencement date

Death Earliest eligible commencement date

Form of payment If single, life annuity. If married, a 55% Qualified Joint and Survivor (QJSA).

Percent married 90% of participants.

Spouse age Wife three years younger than husband.

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At-risk assumptions	For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan, which is usually the life form of payment for single participants and the 55% QJSA for married participants.
Timing of benefit payments	Benefit payments are assumed to be made uniformly throughout the year.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year as required by regulations under IRC §430.
Actuarial value of assets	The actuarial value of assets is equal to the market value of assets as of the valuation date plus the discounted present value of contributions made after the valuation date for the prior plan year, discounted using the effective interest rate for the prior plan year
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. Willis Towers Watson has reviewed the plan provisions with the plan sponsor and, based on that review, is not aware any significant benefits required to be valued that are not.

Sources of Data and Other Information

The plan sponsor furnished participant data as of 1/1/2024. Information on assets, contributions and plan provisions was supplied by the plan sponsor. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, assumptions or estimates were made when data were not available. All such assumptions are documented in the January 1, 2024 Valuation Data Diagnostics report. We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

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SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Economic Assumptions

Discount rate for funding	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Mortality for funding	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	<p>Termination rates are selected by Navistar, based on a published table for pension participants believed to have similar characteristics to the plan population, blended with plan experience. The most recent experience study was conducted in 2020.</p> <p>Termination rates for at-risk funding calculations are as required by IRC 430.</p>
Retirement	<p>Retirement rates are selected by Navistar, Inc. based on plan experience, with consideration of whether any conditions have changed that would be expected to produce different results in the future. The most recent experience study was conducted in 2020.</p> <p>Retirement rates for at-risk funding calculations are as required by IRC 430.</p>
Benefit commencement date for deferred benefits	<p>Deferred vested participants' assumed commencement age is a single age intended to capture the average age at commencement. Deferred vested early commencement factors are not subsidized so that the difference between this approach and using assumed commencement rates at multiple ages is not expected to be significant.</p> <p>Deferred vested participants who are eligible for grow-in to early retirement eligibility are assumed to commence at earliest retirement eligibility to capture the value of the subsidy.</p>
Form of payment	The percentage of retiring participants assumed to take joint and survivor annuities, and the assumed survivor percentages, are intended to capture the value of the plan's subsidized QJSA.

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Percent married The assumed percentage married is based on expected marriage patterns of retirement age individuals in the future.

Spouse age The assumed age difference for spouses is based a blending of age differences of current retirees and changes expected to occur in marriage patterns of retirement age individuals in the future.

Source of Prescribed Methods

Funding methods The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Change in assumptions since prior valuation The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC 430.

The mortality assumption used to calculate the funding target and target normal cost was updated as required by IRC 430.

Change in methods since prior valuation None.

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

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

A Name of plan INTERNATIONAL MOTORS, LLC HOURLY EMPLOYEES PENSION PLAN NO. 1		B Three-digit plan number (PN) ▶	038
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF INTERNATIONAL MOTORS, LLC		D Employer Identification Number (EIN) 36-1264810	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information			
1	Enter the valuation date:	Month <u>01</u> Day <u>01</u> Year <u>2024</u>	
2	Assets:		
	a Market value	2a	739,012,452
	b Actuarial value	2b	739,012,452
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	9,488	828,562,853
	b For terminated vested participants	1,280	41,670,838
	c For active participants	811	71,013,471
	d Total	11,579	941,247,162
	(3) Total Funding Target		958,755,088
4	If the plan is in at-risk status, check the box and complete lines (a) and (b) <input type="checkbox"/>		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	5.01%
6	Target normal cost		
	a Present value of current plan year accruals	6a	1,793,371
	b Expected plan-related expenses	6b	180,000
	c Target normal cost	6c	1,973,371

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

SIGN HERE	BRIANA C GARCIA <i>B6</i>	<u>10/7/2025</u>
	Signature of actuary	Date
BRIANA C GARCIA		2307806
	Type or print name of actuary	Most recent enrollment number
WILLIS TOWERS WATSON US LLC		312-288-7700
	Firm name	Telephone number (including area code)
WILLIS TOWER 233 SOUTH WACKER DRIVE SUITE 1800 CHICAGO IL 60606		
	Address of the firm	

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

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 63
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	1,973,371	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	219,742,636	26,237,045	
b Waiver amortization installment	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)....	34	28,210,416	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			0
36 Additional cash requirement (line 34 minus line 35).....	36	28,210,416	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	28,299,916	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	89,500	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input checked="" type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021
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SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	International Motors, LLC
EIN/PN	36-1264810/038
Plan Name	International Motors, LLC Hourly Employees Pension Plan No. 1
Valuation Date	January 1, 2024
Enrolled Actuary	Briana C. Garcia
Enrollment Number	23-07806

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

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

SCHEDULE SB ATTACHMENTS

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

For each active participant, an expected retirement age was calculated weighted in proportion to the probability (as shown in the retirement rates table below) that the individual would remain an active participant to each age and then retire at that age. The plan's weighted average retirement age of 63 is the arithmetic average of the expected retirement ages of all participants on January 1, 2024.

During the year in which participant attains 30 years of service with eligibility for the supplemental allowance: 40%. Otherwise, rates vary by age.

Percentage retiring during the year	
Age	Rate
55-59	10.0%
60-61	15.0%
62-64	20.0%
65-69	35.0%
70	100.0%

Laid-off participants are assumed to retire upon attainment of any of the criteria below:

- 30 years of service
- Age 65 and 1 year of service
- Age 55 and age plus service greater than or equal to 85 (85 points)

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	1,043,330	749,167	92,487,565	94,280,062
2025	2,606,506	1,551,361	89,117,707	93,275,574
2026	3,519,808	1,693,613	85,542,078	90,755,499
2027	4,229,834	1,865,720	81,790,950	87,886,504
2028	4,869,866	2,034,608	77,903,785	84,808,259
2029	5,453,823	2,234,039	73,896,938	81,584,800
2030	5,895,749	2,451,648	69,760,140	78,107,537
2031	6,237,112	2,646,075	65,573,698	74,456,885
2032	6,470,295	2,802,291	61,382,147	70,654,733
2033	6,628,884	2,938,553	57,153,688	66,721,125
2034	6,728,690	3,074,917	52,923,638	62,727,245
2035	6,761,891	3,172,412	48,728,301	58,662,604
2036	6,795,432	3,225,495	44,592,772	54,613,699
2037	6,789,288	3,258,140	40,558,698	50,606,126
2038	6,762,256	3,270,954	36,665,683	46,698,893
2039	6,678,355	3,260,801	32,938,061	42,877,217
2040	6,552,547	3,227,147	29,402,480	39,182,174
2041	6,454,768	3,175,436	26,080,980	35,711,184
2042	6,357,024	3,119,662	22,990,408	32,467,094
2043	6,241,765	3,058,093	20,142,034	29,441,892
2044	6,115,381	2,990,779	17,541,566	26,647,726
2045	5,975,553	2,918,786	15,189,366	24,083,705
2046	5,816,031	2,842,339	13,080,805	21,739,175
2047	5,648,405	2,761,338	11,206,828	19,616,571
2048	5,472,366	2,675,707	9,554,776	17,702,849
2049	5,284,530	2,585,401	8,109,294	15,979,225
2050	5,085,116	2,490,429	6,853,239	14,428,784
2051	4,879,809	2,390,872	5,768,552	13,039,233
2052	4,665,126	2,286,898	4,837,039	11,789,063
2053	4,437,831	2,178,791	4,040,994	10,657,616
2054	4,202,571	2,066,937	3,363,663	9,633,171
2055	3,961,349	1,951,831	2,789,577	8,702,757

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

2056	3,715,464	1,834,063	2,304,709	7,854,236
2057	3,466,369	1,714,310	1,896,566	7,077,245
2058	3,215,671	1,593,317	1,554,183	6,363,171
2059	2,965,126	1,471,886	1,268,024	5,705,036
2060	2,716,612	1,350,874	1,029,855	5,097,341
2061	2,472,119	1,231,187	832,555	4,535,861
2062	2,233,647	1,113,749	669,956	4,017,352
2063	2,003,148	999,497	536,708	3,539,353
2064	1,782,495	889,361	428,149	3,100,005
2065	1,573,377	784,236	340,231	2,697,844
2066	1,377,226	684,945	269,451	2,331,622
2067	1,195,178	592,206	212,784	2,000,168
2068	1,028,034	506,604	167,653	1,702,291
2069	876,239	428,564	131,873	1,436,676
2070	739,909	358,339	103,613	1,201,861
2071	618,851	296,000	81,355	996,206
2072	512,568	241,432	63,858	817,858
2073	420,331	194,353	50,112	664,796

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

The Navistar, Inc. Hourly Employees Pension Plan (HEPP) was amended to spinoff certain participants as of January 1, 2019 to form the Navistar, Inc. Hourly Employees Pension Plan No. 2 (HEPP No. 2). The HEPP Plan was renamed the Navistar, Inc. Hourly Employees Pension Plan No. 1 (HEPP No. 1) effective January 1, 2019. All former IC Bus participants are in HEPP No. 2. The plan provisions remain unchanged following the spinoff.

General

Covered Employees	Union employees covered by collective bargaining agreement with the UAW and other unions
Participation Date	At employment or transfer to covered group

Definitions

Credited Service	One year for each calendar year in which the employee completes at least 1,700 hours of service. A partial year of service is earned for years in which a participant completes less than 1,700 hours of service.
Monthly Pension Benefit (MPB)	Fixed dollar amount based on job classification and location per years of service. See Negotiated Retirement Rates for more detailed information
Monthly Spouse Benefit	If eligible for early or normal retirement, surviving spouse receives 55% of retirement benefit payable under normal form. If not eligible for early or normal retirement, spouse receives 50% of terminated vested benefit commencing no earlier than the benefit could have otherwise commenced, reduced for the period the participant elected to be covered for this benefit

Eligibility for Benefits

Normal Retirement	Later of age 65 and 1 year of service
Early Retirement	Age 55 and age plus service greater than or equal to 85 (85 points) Age 60 and 10 years of service, or 30 years of service
Vested Termination	5 years of service and not eligible for early retirement
Disability	10 years of service

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Preretirement Death Benefit	5 years of service
Supplemental Allowance	Eligible for early retirement benefit
Special Early Retirement	Age 55 and 10 years of service under mutually satisfactory conditions as set forward in the Standard for Applications for Special Early Retirement Provisions

Benefits Paid Upon the Following Events

Normal Retirement	MPB determined at Normal Retirement
Early Retirement	MPB formula based on service at early retirement reduced approximately 5%-6% per year before age 62. If retiring with "85 points" or 30 years of service, reduction is eliminated at age 62
Vested Termination	MPB actuarially reduced for benefit commencement prior to age 65
Disablement	MPB payable for life plus temporary supplement to age 62. Temporary supplement equals a flat dollar amount multiplied by service up to 25 or 30 years, depending on location. The flat dollar amount also varies by location
Preretirement Death	Monthly Preretirement Spouse Benefit is payable
Supplemental Allowance	Fixed dollar amount based on location (prorated for less than 30 years of service and reduced 1% per month for commencement prior to age 60 if service less than 30 years) less early retirement benefit payable to age 62. See Schedule of Negotiated Retirement Rates for more details
Benefits for Participants on Permanent Layoff	Most participants on a layoff status can accrue up to 1.9 years of additional service. Also, with at least 10 years of seniority, they may be able to grow-in to early retirement eligibility
Special Early Retirement	MPB payable for life plus temporary supplement to age 62. Temporary supplement equals a flat dollar amount multiplied by service up to 25 or 30 years, depending on location. The flat dollar amount also varies by location. See Schedule of Negotiated Retirement Rates for more details

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
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Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of Payment	Life annuity, 55% Qualified Joint and Survivor Annuity, 75% Qualified Optional Survivor Annuity
Pension Increase	None
Maximum on Benefits and Pay	Dollar limitation under IRC Section 415 in effect during year beginning on the valuation date recognizing limitations for retirement prior to Social Security retirement age

Future Plan Changes

No future plan changes were recognized in the determination of the plan's obligations or pension cost.

Changes in Benefits Valued Since Prior Year

Plan provisions have changed since the prior year to reflect current year changes in the Internal Revenue Code maximums on benefits.

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
EIN / PN: 36-1264810/038
Plan Sponsor: International Motors, LLC
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Negotiated Retirement Rates						
	Basic Benefit Rates (Per month per year of service). ¹			Supplemental Allowance Objective (30 and out amounts)	Temporary Benefit Rates (Per month per year of service, subject to maximum monthly amounts) ²	
UAW – Multiplant (Hired Prior to 10/1/02)						
	<u>Rate Prior to 10/1/2019</u>	<u>Rate as of 10/1/2019</u>	<u>Rate as of 10/1/2021</u>		<u>Rate</u>	<u>Max</u>
Benefit Class A	\$ 37.65	\$ 38.65	\$ 39.65	\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class B	\$ 37.90	\$ 38.90	\$ 39.90	\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class C	\$ 38.15	\$ 39.15	\$ 40.15	\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class D	\$ 38.40	\$ 39.40	\$ 40.40	\$ 2,400.00	\$ 37.43	\$ 1,122.90
UAW – Multiplant (Other than ICC) [&TSC] (Hired On or After 10/1/02 [03] and Prior to 10/1/07 [08])						
	<u>Rate Prior to 10/1/2019</u>	<u>Rate as of 10/1/2019</u>	<u>Rate as of 10/1/2021</u>		<u>Rate</u>	<u>Max</u>
All Benefit Classes	\$ 14.75	\$ 15.75	\$ 16.75	None	\$ 12.75	\$318.75
UAW Local 226 (ICC) (Hired Prior to 8/29/97) and UAW Local 2274 (ICC) (Hired Prior to 10/1/02)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
Benefit Class A		\$ 37.65		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class B		\$ 37.90		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class C		\$ 38.15		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class D		\$ 38.40		\$ 2,400.00	\$ 37.43	\$ 1,122.90
UAW Local 2274 (ICC) (Hired On or After 10/1/02 and Prior to 10/1/07)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
All Benefit Classes		\$ 14.75		None	\$ 12.75	\$318.75
USW @ W. Chicago PDC (Hired Prior to 2/1/00)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
Benefit Class A		\$ 32.65		\$ 2,050.00	\$ 15.00	\$ 375.00
Benefit Class B		\$ 32.90		\$ 2,050.00	\$ 15.00	\$ 375.00
Benefit Class C		\$ 33.15		\$ 2,050.00	\$ 15.00	\$ 375.00
Benefit Class D		\$ 33.40		\$ 2,050.00	\$ 15.00	\$ 375.00
UAW @ Spfld TSC Local 402 (Hired Prior to 10/1/03)						
	<u>Rate Prior to 10/1/2021</u>	<u>Rate as of 10/1/2021</u>			<u>Rate</u>	<u>Max</u>
All Benefit Classes	\$ 28.00	\$ 30.00		\$ 1,100.00	\$ 10.00	\$ 250.00

¹ Rates based on Benefit Class where indicated (Class B is representative for comparison purposes)

² For disability and special early retirements not eligible for Social Security disability benefits

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
 EIN / PN: 36-1264810/038
 Plan Sponsor: International Motors, LLC
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Negotiated Retirement Rates						
	Basic Benefit Rates (Per month per year of service). ¹			Supplemental Allowance Objective (30 and out amounts)	Temporary Benefit Rates (Per month per year of service, subject to maximum monthly amounts) ²	
UAW @ Spfld TSC Local 658 (Hired Prior to 10/1/03)						
	<u>Rate Prior to 10/1/2021</u>	<u>Rate as of 10/1/2021</u>	<u>Rate as of 10/1/2022</u>		<u>Rate</u>	<u>Max</u>
Benefit Class A	\$ 33.65	\$ 34.65	\$ 35.65	\$ 2,050.00	\$ 33.20	\$ 996.00
Benefit Class B	\$ 33.90	\$ 34.90	\$ 35.90	\$ 2,050.00	\$ 33.20	\$ 996.00
Benefit Class C	\$ 34.15	\$ 35.15	\$ 36.15	\$ 2,050.00	\$ 33.20	\$ 996.00
Benefit Class D	\$ 34.40	\$ 35.40	\$ 36.40	\$ 2,050.00	\$ 33.20	\$ 996.00
IFPTE @ Ft. Wayne TDTC (Hired Prior to 5/1/03)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
Benefit Class A		\$ 37.65		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class B		\$ 37.90		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class C		\$ 38.15		\$ 2,400.00	\$ 37.43	\$ 1,122.90
Benefit Class D		\$ 38.40		\$ 2,400.00	\$ 37.43	\$ 1,122.90
IFPTE @ Ft. Wayne TDTC (Hired On or After 5/1/03 and Prior to 5/1/08)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
All Benefit Classes		\$ 14.75		None	\$ 12.75	\$ 318.75
IAM @ Ft. Wayne TDTC (Hired on or After 10/1/02 and Prior to 2/1/08)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
All Benefit Classes		\$ 12.75		None	\$ 12.75	\$ 318.75
USW @ Waukesha (Hired Prior to 3/1/97)						
		<u>Rate</u>			<u>Rate</u>	<u>Max</u>
Benefit Class A		\$ 28.25		\$ 1,500.00	\$ 18.25	\$ 456.25
Benefit Class B		\$ 28.50		\$ 1,500.00	\$ 18.25	\$ 456.25
Benefit Class C		\$ 28.75		\$ 1,500.00	\$ 18.25	\$ 456.25
Benefit Class D		\$ 29.50		\$ 1,500.00	\$ 18.25	\$ 456.25
		Lesser rates for svc. prior to 2001				

¹ Rates based on Benefit Class where indicated (Class B is representative for comparison purposes)

² For disability and special early retirements not eligible for Social Security disability benefits

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
 EIN / PN: 36-1264810/038
 Plan Sponsor: International Motors, LLC
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Negotiated Retirement Rates				
	Basic Benefit Rates (Per month per year of service). ¹	Supplemental Allowance Objective (30 and out amounts)	Temporary Benefit Rates (Per month per year of service, subject to maximum monthly amounts) ²	
IUOE @ Melrose Park (Hired Prior to 10/2/95)				
	<u>Rate</u>		<u>Rate</u>	<u>Max</u>
Benefit Class A	\$ 35.65	\$ 2,200.00	\$ 37.43	\$ 1,122.90
Benefit Class B	\$ 35.90	\$ 2,200.00	\$ 37.43	\$ 1,122.90
Benefit Class C	\$ 36.15	\$ 2,200.00	\$ 37.43	\$ 1,122.90
Benefit Class D	\$ 36.40	\$ 2,200.00	\$ 37.43	\$ 1,122.90
IAM @ ICC (Hired Prior to 11/4/97) and IAM @ FT. Wayne TDTC (Hired Prior to 10/1/02)				
	<u>Rate</u>		<u>Rate</u>	<u>Max</u>
Benefit Class A	\$ 37.25	\$ 2,350.00	\$ 37.43	\$ 1,122.90
Benefit Class B	\$ 37.50	\$ 2,350.00	\$ 37.43	\$ 1,122.90
Benefit Class C	\$ 37.75	\$ 2,350.00	\$ 37.43	\$ 1,122.90
Benefit Class D	\$ 38.00	\$ 2,350.00	\$ 37.43	\$ 1,122.90
IAM @ ICC (Hired On or After 11/4/97 and Prior to 2/1/08)				
	<u>Rate</u>		<u>Rate</u>	<u>Max</u>
All Benefit Classes	\$23.50	\$ 700.00	\$ 15.00	\$ 375.00
UAW @ ICC (Hired On or After 8/29/97 and Prior to 10/1/07)				
	<u>Rate</u>		<u>Rate</u>	<u>Max</u>
All Benefit Classes	\$ 25.50	\$ 900.00	\$ 15.00	\$ 375.00
IBT @ York PDC (Hired Prior to 11/1/99)				
	<u>Rate</u>		<u>Rate</u>	<u>Max</u>
Benefit Class A	\$ 28.15	\$ 1,600.00	\$ 15.00	\$ 375.00
Benefit Class B	\$ 28.40	\$ 1,600.00	\$ 15.00	\$ 375.00
Benefit Class C	\$ 28.65	\$ 1,600.00	\$ 15.00	\$ 375.00
Benefit Class D	\$ 28.90	\$ 1,600.00	\$ 15.00	\$ 375.00

NOTE: The following groups are not covered under the Non-Contributory Retirement Plan

- IUOE @ Melrose Park (Hired On or After 10/2/95)
- USW @ Waukesha (Hired On or After 3/1/97)
- IBT @ York PDC (Hired On or After 11/1/99)
- USW @ West Chicago PDC (Hired On or After 2/1/00)
- IAM @ Fort Wayne and ICC (Hired On or After 2/1/08)
- IFPTE @ Fort Wayne (Hired On or After 5/1/08)
- UAW – Multiplant, other than described above (Hired On or After 10/1/07)
- UAW @ Springfield TSC (Hired On or After 10/1/08)

Benefit Accruals under the Non-Contributory Retirement Plan cease for the following groups/dates:

- UAW @ ICC as of 1/8/11
- IUOE @ M.P. as of 12/31/11

¹ Rates based on Benefit Class where indicated (Class B is representative for comparison purposes)

² For disability and special early retirements not eligible for Social Security disability benefits

Plan Name: International Motors, LLC Hourly Employees Pension Plan No. 1
 EIN / PN: 36-1264810/038
 Plan Sponsor: International Motors, LLC
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32 Schedule of Amortization Bases as of January 1, 2024

Type of Base	Date Established	Initial Amount	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
1. Shortfall	01/01/2024	(48,732,723)	15.00000	(48,732,723)	(4,433,718)
2. Shortfall	01/01/2023	200,884,721	14.00000	192,755,928	18,397,165
3. Shortfall	01/01/2022	(81,698,961)	13.00000	(75,035,247)	(7,549,919)
4. Shortfall	01/01/2021	(38,380,252)	12.00000	(33,543,870)	(3,578,635)
5. Shortfall	01/01/2020	(113,821,419)	11.00000	(93,832,988)	(10,686,313)
6. Shortfall	01/01/2019	368,691,972	10.00000	278,131,536	34,088,465
Total				219,742,636	26,237,045

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