

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 <h1 style="text-align: center;">2024</h1> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description)

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

Part II	Basic Plan Information—enter all requested information
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1a Name of plan DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT	1b Three-digit plan number (PN) ▶ <u>015</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) DANA LIMITED P.O. BOX 1000 MAUMEE, OH 43537	1c Effective date of plan <u>01/01/1972</u> 2b Employer Identification Number (EIN) <u>26-1318190</u> 2c Plan Sponsor's telephone number <u>419-887-3000</u> 2d Business code (see instructions) <u>336300</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2025	LAURA BOWLES
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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>DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT</u>	B Three-digit plan number (PN) ▶	<u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>DANA LIMITED</u>	D Employer Identification Number (EIN) <u>26-1318190</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>12690407</u>
	b Actuarial value	2b	<u>12690407</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>200</u>	<u>8771431</u>
	b For terminated vested participants	<u>52</u>	<u>656632</u>
	c For active participants	<u>31</u>	<u>979385</u>
	d Total	<u>283</u>	<u>10407448</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>5.11 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>0</u>
	b Expected plan-related expenses	6b	<u>86000</u>
	c Target normal cost	6c	<u>86000</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>09/03/2025</u>
	<u>CHRISTOPHER D RICHMOND</u>	Date
	Type or print name of actuary	<u>23-08687</u>
	<u>WILLIS TOWERS WATSON US LLC</u>	Most recent enrollment number
	Firm name	<u>248-936-7700</u>
	<u>TRAVELERS TOWER 26555 EVERGREEN ROAD, SUITE 1600 SOUTHFIELD, MI 48076</u>	Telephone number (including area code)
	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)	3491041	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	83000	0
9	Amount remaining (line 7 minus line 8)	3408041	0
10	Interest on line 9 using prior year's actual return of <u>8.86</u> %	301952	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>5.07</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	3709993	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	86.28 %
15	Adjusted funding target attainment percentage	15	121.93 %
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	114.69 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

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

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

21 Discount rate:

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

22 Weighted average retirement age **22** 67

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	31a	86000
b Excess assets, if applicable, but not greater than line 31a	31b	0

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

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

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	86000
	Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement	86000	0
36 Additional cash requirement (line 34 minus line 35)	36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0

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

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

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

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

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

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 DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT	B Three-digit plan number (PN) ▶ 015
C Plan sponsor's name as shown on line 2a of Form 5500 DANA LIMITED	D Employer Identification Number (EIN) 26-1318190

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	12690407
(12) Value of interest in 103-12 investment entities	1c(12)	12016824
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	12690407	12016824
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	12690407	12016824

Part II Income and Expense Statement

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

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

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		261058
(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		261058

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	934641	
(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)		934641
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		0
j Total expenses. Add all expense amounts in column (b) and enter total	2j		934641

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-673583
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: **REHMANN ROBSON LLC**

(2) EIN: **38-3635706**

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		50000000
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 545053.

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.
--	---	---

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

A Name of plan <u>DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT</u>	B Three-digit plan number (PN)	<u>015</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>DANA LIMITED</u>	D Employer Identification Number (EIN) <u>26-1318190</u>	

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

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 36-3046063

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		1
---	--	---

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

Dana Victor Reinz
Division Pension Plan
for Hourly Paid
Employees at the
Robinson, Illinois
Plant



Years Ended
December 31,
2024 and 2023

Financial
Statements

Rehmann

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

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Note: Supplemental schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended, have been omitted because they are not applicable.

INDEPENDENT AUDITORS' REPORT

October 6, 2025

Dana Incorporated Investment Committee
Dana Victor Reinz Division Pension Plan for Hourly Paid
Employees at the Robinson, Illinois Plant
Maumee, Ohio

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

We have performed audits of the financial statements of ***Dana Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant*** (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 (modified cash basis) as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits (modified cash basis) for the years then ended, and the statement of accumulated plan benefits as of December 31, 2023, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements (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 3 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 Independent Auditors' 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 the modified cash basis method of accounting described in Note 2.
- 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 ("GAAS"). Our responsibilities under those standards are further described in the Independent Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Basis of Accounting

We draw attention to Note 2 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis method of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis method of accounting described in Note 2, and for determining that the modified cash basis method of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible 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 that 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.

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

In performing an audit in accordance with GAAS, we:

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

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 the modified cash basis method of accounting described in Note 2.

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 the modified cash basis method of accounting described in Note 2.

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.

Rehmann Lobson LLC

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statements of Net Assets Available for Benefits

(Modified Cash Basis Method of Accounting)

	December 31	
	2024	2023
ASSETS		
Plan interest in Dana Master Pension Trust, at fair value (equal to net assets available for benefits)	<u>\$ 12,016,824</u>	<u>\$ 12,690,407</u>

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statements of Changes in Net Assets Available for Benefits

(Modified Cash Basis Method of Accounting)

	Year Ended December 31	
	2024	2023
Additions to net assets attributed to		
Plan interest in Dana Master Pension Trust net appreciation in fair value of investments	\$ 141,338	\$ 820,700
Plan interest in Dana Master Pension Trust net investment income	231,232	271,701
Total additions	372,570	1,092,401
Deductions from net assets attributed to		
Benefits paid to participants	934,641	988,987
Administrative expenses	111,512	104,988
Total deductions	1,046,153	1,093,975
Net change in net assets available for benefits	(673,583)	(1,574)
Net assets available for benefits		
Beginning of year	12,690,407	12,691,981
End of year	\$ 12,016,824	\$ 12,690,407

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statement of Accumulated Plan Benefits

December 31, 2023

Actuarial present value of accumulated plan benefits

Vested benefits	
Participants currently receiving payments	\$ 8,385,314
Other participants	<u>1,526,297</u>
Total vested benefits (equal to actuarial present value of accumulated plan benefits)	<u><u>\$ 9,911,611</u></u>

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statement of Changes in Accumulated Plan Benefits

Year Ended December 31, 2023

Increase (decrease) during the year attributable to

Decrease in the discount period	\$ 588,943
Change in actuarial assumptions (Note 2)	172,279
Benefits paid to participants	(988,987)
Actuarial gains	<u>(163,636)</u>

Net decrease **(391,401)**

Actuarial present value of accumulated plan benefits

Beginning of year 10,303,012

End of year **\$ 9,911,611**

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

1. DESCRIPTION OF THE PLAN

The following brief description of the *Dana Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant* (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

Description of the Plan

General

The Plan is a defined benefit pension plan established to provide pension benefits to individuals who are employed by an indirect subsidiary of *Dana Limited* (the "Company") who are members of the collective bargaining unit represented by District 167 of the International Association of Machinists and Aerospace Workers and its Local No. 2293, AFL-CIO. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

Effective May 31, 2007, the Plan was frozen for all participants. Participants who were actively employed at that time became fully vested on that date. Future benefits will be calculated based on a participant's retirement date and credited service through May 31, 2007 ("freeze date"). The monthly benefit amount was also frozen at \$21 per month (for participants who retired on or after April 20, 2000) for each year of credited service earned prior to June 1, 2007.

Dana Incorporated is the Company's parent. The Plan is administered by the Dana Incorporated Investment Committee (the "Investment Committee"), who is responsible for oversight of the Plan and the appropriateness of the Plan's investment offerings and monitors investment performance. Northern Trust Company ("Northern Trust") is the trustee of the Plan. Northern Trust holds all assets of the Plan in accordance with the service provider contract with the Company.

Funding Policy

Minimum required contributions to the Plan are based upon valuations performed by an independent actuary. The *Pension Protection Act of 2006* ("PPA") determines minimum required contributions as the sum of (a) the value of benefits earned during the year, (b) expected administrative expenses paid from the trust during the year, and (c) an amortization of any unfunded obligation over seven years. The Plan has met the minimum funding requirements prescribed by ERISA.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

Pension Benefits

Participants are entitled to monthly pension benefits beginning at normal retirement age (65) which are equal to specified rates multiplied by total years of credited service. The benefit is typically paid in the form of a joint and surviving spouse annuity; however, participants may elect to waive the survivor benefit option in the manner prescribed by ERISA. If the present value of the accrued benefit is less than \$1,000, the benefit will be paid to the participant in a single lump-sum without the participant's consent. A participant with an accrued benefit greater than \$1,000 but less than or equal to \$5,000 may be paid in a lump-sum with the participant's written consent or will have their interest in the Plan transferred in a direct rollover to an individual retirement account administered by Vanguard Fiduciary Trust Company or other individual retirement account administered by a trustee as designated by the Investment Committee if the participant fails to elect a distribution or rollover option.

Participants are eligible for early retirement upon attaining age 60 with 10 years of credited service. Early retirement benefits are generally equal to the accrued normal retirement benefit actuarially reduced for retirement prior to age 65. Benefits for participants who do not commence receiving payments until after they reach normal retirement age are actuarially increased to take into account the number of months after the normal retirement date, excluding months in which the pension benefit was suspended because the participant worked for the Company.

Death and Disability Benefits

If an active or terminated vested participant dies prior to benefit commencement, a benefit is payable to the beneficiary equal to 50% of the participant's accrued normal retirement benefit, as stated in the Plan document. Such benefit is reduced for payments made prior to age 65 and for election of the joint annuitant option.

A participant with 15 or more years of credited service that becomes permanently and totally disabled is eligible to receive disability benefits under the Plan.

Vesting

All participants are fully vested in their benefits.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the modified cash basis method of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Consequently, contributions are recognized when received rather than when earned and Plan expenses are recognized when paid rather than when the obligation is incurred.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

Use of Estimates

The preparation of financial statements in accordance with the modified cash basis method of accounting requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein, disclosures of contingent assets and liabilities, the recorded amounts of additions to and deductions from Plan assets 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.

Master Trust Agreement

The Plan's net assets, along with the net assets of three other Company pension plans, are held by Northern Trust in the Dana Master Pension Trust (the "Master Trust"). The net assets of the participating plans have been commingled in the Master Trust for investment purposes only. Employer contributions, when made, benefit payments and certain administrative expenses are identified for each respective participating plan whereas earnings and administrative expenses not specifically related to each plan are allocated proportionately to the participating plans. The allocation is based on the relative dollar value investment of the participating plans in the Master Trust, with the exception of income related to certain investments, which is allocated to each plan to match the duration of the associated pension liability.

Investment Valuation and Income Recognition

The Master Trust's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Investment Committee determines the Master Trust's valuation policies utilizing information provided by the investment managers and trustee. See Note 4 for a discussion of the Master Trust's fair value measurements.

Net investment income of the Master Trust includes interest, dividends and distributions received on such investments, and net income from swaps and swaptions. Net change in fair value of the Master Trust includes the aggregate gains and losses on investments bought and sold as well as held during the year. Investment income of the Master Trust is recorded when earned on the accrual basis. Dividend income is recorded on the ex-dividend date.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits consist of those future benefit payments attributable, in accordance with the Plan provisions, to participants credited with service through the freeze date. These accumulated benefits are expected to be paid to retired or terminated vested participants or their surviving spouses, or presently eligible participants or their surviving spouses. Future estimated plan benefits used to measure accumulated plan benefits include amounts payable in the event of retirement, death, disability or termination of employment to the extent they are deemed attributable to credited service through the freeze date.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The Company utilizes the services of an independent actuary to determine the actuarial present value of accumulated plan benefits. The actuarial present value of accumulated plan benefits is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

The significant actuarial assumptions used in the valuation as of and for the year ended December 31, 2023 (most recent information available) are as follows:

Rates of Mortality	Based upon custom mortality tables using historical experience projected generationally using the MP-2021 scale.
Retirement Age	Based upon age stated in the Plan document and actual experience
Valuation Interest Rate	5.75%

All actuarial methods and assumptions used in 2023 were consistent with those used in 2022 except that the Valuation Interest Rate was updated from 6.00% to 5.75%.

These 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.

Contributions

Contributions are recorded when received by the trustee.

Payment of Benefits

Benefits payments to participants are recorded when paid.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

Administrative Expenses

Certain of the Plan's administrative expenses are paid directly by the Company and, accordingly, they are not reflected in the Plan's financial statements. Administrative fees and expenses for investment consulting, legal, actuarial, audit and record keeping services, Pension Benefit Guaranty Corporation ("PBGC") insurance premiums and services provided by the trustee, investment managers and administrative service providers are generally borne by the Plan. These expenses are party-in-interest transactions, which qualify for exemption from prohibited transaction rules under ERISA.

Subsequent Events

In preparing these financial statements, Plan management has evaluated, for potential recognition or disclosure, significant events or transactions that occurred during the period subsequent to the most recent statement of net assets available for benefits presented herein, through the date these financial statements were available to be issued.

3. MASTER TRUST

The Master Trust includes the net assets of four defined benefit pension plans sponsored by the Company. The Master Trust is administered under the supervision of the Board of Directors of Dana Incorporated which has appointed the Investment Committee to oversee the administration of the investments. The Investment Committee executes this duty by appointing Northern Trust and various investment managers to direct the Master Trust's investments. The Plan's interest in the Master Trust represents 2.44% and 2.39% of net assets available for benefits of the Master Trust at December 31, 2024 and 2023, respectively.

Certain information related to investments disclosed in the accompanying financial statements, including the Plan's interest in the Dana Master Pension Trust held at December 31, 2024 and 2023, and the related Plan's interest in Dana Master Pension Trust net investment income and net change in fair value of investments for the years ended December 31, 2024 and 2023, and the information summarized below, was obtained by management and agreed to and derived from information certified as complete and accurate by Northern Trust.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following presents the net assets available for benefits of plans participating in the Master Trust at December 31:

	2024		2023	
	Master Trust Balances	Plan's Interest in Master Trust	Master Trust Balances	Plan's Interest in Master Trust
Assets				
Investments, at fair value				
Equity securities	\$ 24,731,589	\$ 277,919	\$ 25,310,361	\$ 256,275
Collective trust funds				
Equity securities	47,334,986	531,921	50,024,113	506,509
Bonds	175,329,278	10,495,412	196,679,770	10,661,384
U.S. government agency securities	11,336,272	124,313	7,836,661	121,941
Corporate debt instruments	173,466,401	-	186,531,989	-
State and local bonds	1,169,211	-	848,671	-
Foreign government bonds	1,888,766	-	1,508,518	-
Core real estate investment funds	10,832,382	121,728	11,309,520	114,512
Collateralized mortgage obligations	9,165,222	81	-	-
Investment contract with an insurance company	3,672,132	-	3,945,657	-
Pooled separate accounts	1,203,084	-	2,013,833	-
Interest bearing cash	29,844,859	450,379	41,359,252	950,790
Swaps and swaptions	1,336,701	13,899	1,548,598	15,142
Total investments	491,310,883	12,015,652	528,916,943	12,626,553
Receivables				
Interest and dividends	2,074,505	3,091	1,980,686	5,482
Due from broker	165,554	(640)	331,950	491
Securities sold not settled	-	-	1,091,031	71,225
Total receivables	2,240,059	2,451	3,403,667	77,198
Total assets	493,550,942	12,018,103	532,320,610	12,703,751
Liabilities				
Securities purchases not settled	63,835	717	1,267,952	12,838
Due to broker	50,000	562	460,000	506
Total liabilities	113,835	1,279	1,727,952	13,344
Net assets available for benefits	\$ 493,437,107	\$ 12,016,824	\$ 530,592,658	\$ 12,690,407

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following presents the changes in net assets available for benefits of plans participating in the Master Trust for the years ended December 31:

	2024	2023
Additions to net assets attributed to		
Net (depreciation) appreciation in fair value of investments	\$ (10,326,672)	\$ 28,280,732
Investment income		
Interest	16,000,299	16,531,904
Dividends and distributions	1,147,277	1,096,693
Net income from swaps and swaptions	905,461	375,149
	<u>18,053,037</u>	<u>18,003,746</u>
Total investment income	18,053,037	18,003,746
Employer contributions	7,450,000	-
Total additions	<u>15,176,365</u>	<u>46,284,478</u>
Deductions from net assets attributed to		
Benefits paid to participants	46,635,439	48,267,910
Administrative expenses	5,696,477	4,720,817
	<u>52,331,916</u>	<u>52,988,727</u>
Total deductions	<u>52,331,916</u>	<u>52,988,727</u>
Net change in net assets available for benefits	(37,155,551)	(6,704,249)
Net assets available for benefits		
Beginning of year	<u>530,592,658</u>	<u>537,296,907</u>
End of year	<u>\$ 493,437,107</u>	<u>\$ 530,592,658</u>

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

4. FAIR VALUE MEASUREMENTS

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

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

Level 2: Inputs to the valuation methodology include:

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

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

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

The fair value measurement level within the fair value hierarchy of each of the assets and liabilities of the Master Trust is based on the lowest level of any input that is significant to the fair value measurements. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

Equity securities: Valued at closing prices reported in an active market.

Collective trust funds: Valued using the net asset value ("NAV") provided by the trustee, classified as "other" and are not assigned to a level in the fair value hierarchy. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV.

U.S. government agency securities: Fair value is based on yields currently available for comparable securities.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

Corporate debt instruments: Fair value is based on yields currently available for comparable securities.

State and local bonds: Fair value is measured based on yields currently available for comparable securities.

Foreign government bonds: Fair value is measured based on yields currently available for comparable securities.

Core real estate investment funds: Fair value is based on the NAV's provided by the fund managers or determined by a third party and the unit price is based on the values of the underlying net assets of these funds. These funds are classified as "other" and are not assigned to a level in the fair value hierarchy. The NAV is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV.

Collateralized mortgage obligations: Fair value is based on yields currently available for comparable securities.

Investment contract with an insurance company: This investment is reported at fair value as determined by Aetna Life Insurance Company utilizing the market approach of resetting interest rates periodically based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuer.

Pooled separate account: Valued at the unit price reported by Aetna Life Insurance Company. The underlying investments owned can include registered investment companies, common stocks, corporate bonds, U.S. Government securities, other pooled separate accounts, or guaranteed insurance contracts priced by the sponsoring insurance company using applicable interest rates and contract provisions. The unit price is based on the fair value of the underlying investments owned, less any accrual of fees and expenses borne by the account, and divided by the number of units outstanding. The unit price is readily determinable and quoted on the active private market on which the Master Trust can transact daily with no significant redemption restrictions on this investment.

Interest-bearing cash: Fair value is determined based on exchange rates sourced by Reuters.

Swaps and swaptions: Fair value is determined based on quotes received by industry vendors.

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following tables set forth, by level within the fair value hierarchy, the Master Trust's investments measured at fair value at December 31:

2024	(in thousands of dollars)				
	Level 1	Level 2	Level 3	Other (1)	Total
Equity securities	\$ 24,732	\$ -	\$ -	\$ -	\$ 24,732
Collective trust funds					
Equity securities	-	-	-	47,335	47,335
Bonds	-	-	-	175,329	175,329
U.S. government					
agency securities	-	11,336	-	-	11,336
Corporate debt					
instruments	-	173,467	-	-	173,467
State and local bonds	-	1,169	-	-	1,169
Foreign government bonds	-	1,889	-	-	1,889
Core real estate					
investment funds	-	-	-	10,832	10,832
Collateralized mortgage					
obligations	-	9,165	-	-	9,165
Investment contract					
with an insurance					
company	-	-	3,672	-	3,672
Pooled separate accounts	-	1,203	-	-	1,203
Interest bearing cash	-	29,845	-	-	29,845
Swaps and swaptions	-	1,337	-	-	1,337
Total investments at fair value	\$ 24,732	\$ 229,411	\$ 3,672	\$ 233,496	\$ 491,311

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

2023	(in thousands of dollars)				
	Level 1	Level 2	Level 3	Other (1)	Total
Equity securities	\$ 25,310	\$ -	\$ -	\$ -	\$ 25,310
Collective trust funds					
Equity securities	-	-	-	50,024	50,024
Bonds	-	-	-	196,679	196,679
U.S. government					
agency securities	-	7,837	-	-	7,837
Corporate debt					
instruments	-	186,532	-	-	186,532
State and local bonds	-	849	-	-	849
Foreign government bonds	-	1,508	-	-	1,508
Core real estate					
investment funds	-	-	-	11,310	11,310
Investment contract					
with an insurance					
company	-	-	3,946	-	3,946
Pooled separate accounts	-	2,014	-	-	2,014
Interest bearing cash	-	41,359	-	-	41,359
Swaps and swaptions	-	1,549	-	-	1,549
Total investments at fair value	\$ 25,310	\$ 241,648	\$ 3,946	\$ 258,013	\$ 528,917

(1) Certain investments are measured at NAV per share (or its equivalent) on an inactive market and have not been classified in the fair value hierarchy and are presented in the column titled "Other" above. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the schedules of net assets available for benefits of plans participating in the Master Trust in Note 3.

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. The Investment Committee evaluates the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following tables set forth the Master Trust's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, the significant unobservable inputs and the ranges of values for those inputs at December 31:

2024 Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Weighted Average
Investment contract with an insurance company	\$ 3,672,132	Market approach	Interest rates	4.06%

2023 Instrument	Fair Value	Principal Valuation Technique	Unobservable Inputs	Weighted Average
Investment contract with an insurance company	\$ 3,945,657	Market approach	Interest rates	4.36%

In estimating fair value of the investments classified as Level 3, the Investment Committee utilizes third-party pricing sources.

The following tables set forth additional disclosures for the fair value measurement of investments in certain entities that calculate NAV per share (or its equivalent) as of December 31:

Investment Type	2024			
	Fair Value (in thousands)	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective trust funds	\$ 222,664	\$ -	Daily/Monthly	Daily/Monthly
Core real estate investment funds	10,832	-	Quarterly	Quarterly

Investment Type	2023			
	Fair Value (in thousands)	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective trust funds	\$ 246,703	\$ -	Daily/Monthly	Daily/Monthly
Core real estate investment funds	11,310	-	Quarterly	Quarterly

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following is a description of the investment strategies for investments in certain entities that calculate NAV per share (or its equivalent) at December 31, 2024 and 2023.

Collective trust funds: These funds invest in a wide variety of investment categories including equities and fixed income securities with the goal of providing growth and offsetting changes in the value of the Plans' benefit obligations due to changes in interest rates.

Core real estate investment funds: These funds invest in stabilized, income-flowing properties using primarily commingled fund vehicles. These investments are part of the return-seeking diversified pool of assets for the purpose of generating an incremental return with an acceptable level of risk.

5. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain Master Trust investments are in funds that are managed by Northern Trust or their subsidiaries and affiliates. The balance within the net assets available for benefits of the Master Trust related to these investments was \$53,911,198 and \$65,760,635 at December 31, 2024 and 2023, respectively. The Master Trust paid for administrative service provider, investment advisor and manager, actuarial, record keeping services and plan audit fees which qualify as party-in-interest transactions. Certain management fees in the form of an expense ratio charged to each investment option are paid by the Master Trust and deducted from earnings on investments. These transactions are party-in-interest transactions, which are exempt from prohibited transaction rules.

6. TAX STATUS

The Plan has received a favorable determination letter dated August 24, 2017 from the Internal Revenue Service ("IRS"), that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the Investment Committee and the Plan's legal counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, that the Plan is qualified and the related Master Trust is tax exempt.

Plan management has evaluated the tax positions taken by the Plan to determine if the Plan has taken any uncertain tax positions that more likely than not would not be sustained upon examination by the IRS, and has concluded that, as of December 31, 2024, there are no uncertain positions taken or expected to be taken. While the Plan may be subject to routine audits by the IRS, there are currently no audits for any tax periods in progress.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

7. PLAN TERMINATION

The Company expects to continue the Plan as long as necessary to pay accumulated plan benefits. However, the Company reserves the right to terminate the Plan, in whole or in part, at any time as prescribed by the Board of Directors of Dana Incorporated, the Company's parent, subject to the provisions of ERISA.

Upon the complete termination of the Plan, the assets then remaining in the Plan, after providing for the expenses of the Plan, would be allocated (to the extent that they are sufficient) for the purpose of providing benefits that have accrued to participants or their beneficiaries as of the date of such termination, in a manner that is consistent with the order of precedence prescribed by Section 4044 of ERISA.

Any assets remaining in the fund because of variations in actual experience from actuarial estimates, after the complete satisfaction of all liabilities under the Plan in accordance with the preceding paragraph, would revert to the Company.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal-age retirement benefits, early retirement benefits, and certain disability and survivor's benefits. However, the PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit. Should the Plan terminate, the payment of certain benefits not covered by the PBGC would depend on the sufficiency of the Plan's assets.

8. RISKS AND ECONOMIC UNCERTAINTIES

The Master Trust invests in various investment securities with the underlying assets consisting of any combination of stocks, bonds, fixed income securities, and other investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of interest rate, market, and credit risks inherent with certain of the Master Trust's investment securities, it is at least reasonably possible that changes in the fair values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits and changes in net assets available for benefits. Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of Plan's interest in the Dana Master Pension Trust net investment income reported in these financial statements to the amounts reported on Schedule H of Forms 5500 for the years ended December 31:

	2024	2023
Plan interest in Dana Master Pension Trust net appreciation in fair value of investments reported in these financial statements	\$ 141,338	\$ 820,700
Plan interest in Dana Master Pension Trust net investment income reported in these financial statements	231,232	271,701
Administrative expenses netted against net investment income	<u>(111,512)</u>	<u>(104,988)</u>
Net investment income from Dana Master Pension Trust investment accounts reported on Schedule H of Form 5500	<u>\$ 261,058</u>	<u>\$ 987,413</u>

The following is a reconciliation of administrative expenses reported in these financial statements to the amounts reported on Schedule H of Forms 5500 for the years ended December 31:

	2024	2023
Administrative expenses reported in these financial statements	\$ 111,512	\$ 104,988
Administrative expenses netted against net investment income	<u>(111,512)</u>	<u>(104,988)</u>
Administrative expenses reported on Schedule H of Form 5500	<u>\$ -</u>	<u>\$ -</u>



SCHEDULE SB ATTACHMENTS

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

Attained Age	Attained Years of Credited Service ¹										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	0	0	0	0	0	0	0	0	0
40-44	0	1	2	0	0	0	0	0	0	0	3
45-49	0	2	1	0	0	0	0	0	0	0	3
50-54	0	0	0	0	0	0	0	0	0	0	0
55-59	0	2	4	0	0	1	0	0	0	0	7
60-64	0	0	2	0	3	2	2	0	0	0	9
65-69	0	1	1	0	0	1	2	0	0	0	5
70 & over	0	0	1	1	0	0	0	0	1	1	4
Total	0	6	11	1	3	4	4	0	1	1	31

¹ Age and service for purposes of determining category are based on exact (not rounded) values.

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
 EIN / PN: 26-1318190/015
 Plan Sponsor: Dana Limited
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Former Plan Assignments

The following former plans compose the Dana Combined Hourly Employees' Pension Plan (Plan 003): 003 (only select locations), 026, 028, 029, 034, 048, 054, 055, 069, 078, 115, 126, 127, 130, and 131.

The following former plans compose the Dana U.S.W. Hourly Employees' Pension Plan (Plan 148): 004, 005, 008, 118, and 129.

The assumptions detailed herein are as of January 1, 2024.

Economic Assumptions

Funding Interest Rate Basis

- Yield Curve Basis IRS-prescribed one-month average yield curve based on bond yields in the month preceding the valuation date
- Effective Interest Rate Plan 003: 5.11%
 Plan 015: 5.11%
 Plan 148: 5.11%

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
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SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Mortality

For Plans 003, 015, and 148, a custom mortality table was developed during 2018 using Dana's historical mortality experience. A sample of annual rates per 1000 participants are provided below for each gender:

Age	Males	Females
20	0.5	0.2
25	0.6	0.2
30	0.6	0.3
35	0.7	0.4
40	0.8	0.5
45	1.2	0.8
50	2.3	1.5
55	4.3	2.7
60	8.3	5.1
65	13.9	9.7
70	21.6	16.4
75	35.0	27.1
80	59.1	46.3
85	103.1	82.2
90	180.4	145.9
95	281.0	237.8
100	374.1	330.8
105	453.8	415.9
110	498.6	470.8
115	500.0	500.0
120+	1000.0	1000.0

These custom mortality tables are projected generationally from 2015 using the SOA projection scale, MP-2021.

Termination

Annual rates per 1000 participants

Service	High Subsidy (Plans 003, 004, 005, 034)	Moderate Subsidy (Plans 015, 118)
2	70.2	135.2
7	32.5	55.8
12	20.7	37.4
17	15.5	33.9
22	10.5	25.2
27	10.2	13.6

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
 EIN / PN: 26-1318190/015
 Plan Sponsor: Dana Limited
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Disability No incidence of disability assumed

Retirement Age Active Participant Retirement Assumptions
Annual Rate per 1,000 Employees

Age	High Subsidy Plans (Plans 003, 004, 005, 034)			Moderate Subsidy (Plans 015, 118)
	<30 YOS	30-31 YOS	32+ YOS	
50-54	N/A	150	75	20
55-56	50	275	150	50
57-59	75	275	150	75
60-61	150	275	150	150
62	300	300	300	300
63-64	150	150	150	150
65	750	750	750	750
66-69	500	500	500	500
70	1000	1000	1000	1000

In general, deferred vesteds are assumed to retire at normal retirement age of 65.

Form of Payment

Plan	Form of Payment
Berwick (029), Ecorse (028), Fort Wayne (004), Marion (005), Spicer (003), Syracuse (034)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Combined Hourly (003)	For those single, a life annuity. For those married, 100% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Hillsdale (026), Rochester (115)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 55% of such reduced amount payable to his surviving spouse after his death.

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
 EIN / PN: 26-1318190/015
 Plan Sponsor: Dana Limited
 Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Robinson (015), Everflex (078), Hohenwald (048), Pueblo (008), Henderson Plant (118), Brake Systems Inc. (127), PTG (129)	For those single, a life annuity. For those married, an actuarially reduced amount of the retirement income payable to the employee during his lifetime with 50% of such reduced amount payable to his surviving spouse after his death.
Terminated vested, deferred disabled	Single life annuity with REA benefits

Expenses

Expenses included in the Funding Target Normal Cost include: PBGC premiums, benefit administration fees, audit fees, and trust eligible actuarial fees.

Special 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.

Shutdown

Provisions for Future Shutdowns

Should a plant shutdown occur and a plant's shutdown benefits become payable and/or a significant number of early retirements occur, there would be significant changes in the plan's financial conditions, affecting cash flow as well as present values. Actuarial techniques which are practical for establishing the cost of other types of pension benefits are not applicable to group termination benefits, because a practical provision for the occurrence cannot be determined. Therefore, this actuarial valuation contains no numeric measurement of the potential costs of such shutdown benefits.

Locations Currently Shutdown

For plans with shutdown locations, eligible plan participants will receive special early retirement benefits attributable to the shutdown. If the participant is subsequently re-employed by Dana Corporation, the special early retirement benefits are forfeited.

Plan Name:	Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN:	26-1318190/015
Plan Sponsor:	Dana Limited
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

If applicable, this actuarial valuation assumes that participants eligible to receive special early retirement benefits do so unless data supplied by Dana indicates they have been transferred to another position within Dana. They are treated as terminated vested participants and are assumed to commence benefits at the earliest, most valuable age.

Marriage Assumes that 80% of all employees are married and that the male spouse is three years older than the female spouse.

Actuarial Methods

Actuarial Cost Method Present value of Accrued Benefits

Asset Valuation Method Description Fair market value as of the valuation date including discounted contributions receivable for the prior plan year.

Benefits Not Valued All benefits described in the Plan Provisions section of the supplemental report were valued and special benefits granted under plant closings or work-force reductions at certain on-going locations. WTW is unaware of any event which has occurred that would trigger these special benefits for plant closings or work-force reductions, except where noted. The cost for these benefits will be recognized in the valuation after the triggering event occurs.

Data Sources

Participant Data Dana Limited, their administrator, and the plan's Trustee provided census and asset information. WTW is aware of no potential material biases due to imperfect data. WTW checked the data for reasonableness and consistency, but no audit was performed. While it is possible that future data corrections could have a material impact on results, we believe the data provided were sufficient for reasonable valuation results, and we are aware of no errors or omissions that would have a significant effect on the results of our calculations.

Changes in Methods and Assumptions since Prior Year

Since the prior valuation, the following assumptions have been changed:

- The full corporate bond yield curve used to calculate the funding target and target normal cost was updated to the current valuation date as required by IRC §430p.

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
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Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Assumptions Rationale – Significant Economic and Demographic Assumptions

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

Mortality Assumptions used for funding purposes reflect the substitute mortality table that was approved for use by the IRS under Revenue Procedure 2017-55. We believe the assumptions do not significantly conflict with what would be reasonable because they reflect recent experience, and are adjusted to reflect the plan sponsor's expectations regarding future mortality improvement.

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.

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**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 DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT		B Three-digit plan number (PN) ▶	015
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF DANA LIMITED		D Employer Identification Number (EIN) 26-1318190	
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	12,690,407	
b Actuarial value	2b	12,690,407	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	200	8,771,431	8,771,431
b For terminated vested participants	52	656,632	656,632
c For active participants	31	979,385	979,385
d Total	283	10,407,448	10,407,448
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	5.11%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	86,000	
c Target normal cost	6c	86,000	

Statement by Enrolled Actuary

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

SIGN HERE	<u>CR</u>	<u>9/3/2025</u>
	Signature of actuary	Date
<u>CHRISTOPHER D RICHMOND</u>		<u>2308687</u>
	Type or print name of actuary	Most recent enrollment number
<u>WILLIS TOWERS WATSON US LLC</u>		<u>248-936-7700</u>
	Firm name	Telephone number (including area code)
<u>TRAVELERS TOWER 26555 EVERGREEN ROAD, SUITE 1600 SOUTHFIELD MI 48076</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

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

**Schedule SB (Form 5500) 2024
v. 240311**

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)	3,491,041	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	83,000	0
9	Amount remaining (line 7 minus line 8)	3,408,041	0
10	Interest on line 9 using prior year's actual return of <u>8.86%</u>	301,952	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>5.07%</u>		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	3,709,993	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	86.28 %
15	Adjusted funding target attainment percentage	15	121.93 %
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	114.69 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

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

Part V	Assumptions Used to Determine Funding Target and Target Normal Cost			
21	Discount rate:			
a	Segment rates:	1st segment: %	2nd segment: %	3rd segment: %
				<input checked="" type="checkbox"/> N/A, full yield curve used
b	Applicable month (enter code).....			21b
22	Weighted average retirement age			22 67
23	Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input type="checkbox"/> Prescribed - separate <input checked="" type="checkbox"/> Substitute			

Part VI	Miscellaneous Items			
24	Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... <input 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 type="checkbox"/> Yes <input checked="" 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 86,000
b	Excess assets, if applicable, but not greater than line 31a			31b 0
32	Amortization installments:		Outstanding Balance	Installment
a	Net shortfall amortization installment		0	0
b	Waiver amortization installment		0	0
33	If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount			33
34	Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....			34 86,000
35			Carryover balance	Prefunding balance
	Balances elected for use to offset funding requirement		86,000	0
36	Additional cash requirement (line 34 minus line 35).....			36 0
37	Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....			37 0
38	Present value of excess contributions for current year (see instructions)			
a	Total (excess, if any, of line 37 over line 36)			38a 0
b	Portion included in line 38a attributable to use of prefunding and funding standard carryover balances			38b 0
39	Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....			39 0
40	Unpaid minimum required contributions for all years			40 0

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

SCHEDULE SB ATTACHMENTS

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

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

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN: 26-1318190/015
Plan Sponsor: Dana Limited
Valuation Date: January 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Dana Limited
EIN/PN	26-1318190/015
Plan Name	Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
Valuation Date	January 1, 2024
Enrolled Actuary	Christopher D. Richmond
Enrollment Number	23-08687

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, Part V Summary of Plan Provisions

Dana Corporation Victor Reinz Division for Hourly Paid Employees – Robinson, Illinois Plan (Plan #015) – Summary of Plan Provisions

1. Effective Date of Plan Amended and restated effective April 21, 1994. Latest amendment effective March 28, 2005.
2. Eligibility for Participation All employees who are members of District 167, Local No. 2293, of the International Association of Machinists and Aerospace Workers, AFL-CIO.
3. Definitions
 - a. Accrued Benefit The Basic Pension Benefit times years of Credited Service payable monthly.
 - b. Basic Benefit
 - \$17.50 for terminations from May 1, 1995, to April 30, 1996.
 - \$18.25 for terminations from May 1, 1996 to April 20, 1997.
 - \$19.00 for terminations from May 1, 1997 to April 20, 2000.
 - \$21.00 for terminations on or after April 21, 2000.
 - c. Credited Service
 1. All full and fractional years of service from the seniority list; plus
 2. All full and fractional years of past service from the seniority date to January 1, 1972; plus
 3. Each period of absence after January 1, 1976 unless a 12 month period has passed during which the employee has not performed an hour of service.
 4. Reinstatement of Credit Service available for loss of seniority after retirement; Credited Service is aggregated, but future benefit is offset by actuarial equivalent of benefits previously paid.
 5. Employee retiring under the plan also receives Credited Service for all service with the Corporation.
 6. Maximum Credited Service is 35 years; employee on seniority list as of June 1, 1970 who retires at age 65 will be credited with no less than 15 years of Credited Service.
 7. Credited Service accruals ceased June 1, 2007.
 - d. Surviving Spouse One year marriage requirement imposed.
4. Normal Retirement Benefit
 - a. Eligibility: Attainment of age 65.
 - b. Benefit: The Accrued Benefit determined at Normal Retirement Date.

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5. Early Retirement Benefit
- a. Eligibility: Completion of 10 years Credited Service and attainment of age 60.
 - b. Benefit: The Accrued Benefit determined at early retirement date, reduced by one-fifteenth for each year by which the first benefit payment precedes Normal Retirement Date.

Age	% of Benefit
60	66.7%
61	73.4%
62	80.0%
63	86.7%
64	93.4%
65	100.0%

6. Postponed Retirement Benefit
- a. Eligibility: At the request of the employee
 - b. Benefit: The Accrued Benefit determined at date of postponed retirement.
7. Vested Benefit
- a. Eligibility:
 1. Attain age 65.
 2. Qualify for disability retirement.
 3. Completes 5 years of service under this or another Plan.
 - b. Benefit Payable at Normal Retirement Date: Accrued Benefit determined at date of termination.
 - c. Early Commencement of Benefit: Eligible after completion of 10 or more years of Credited Service and attainment of age 60. The benefit payable at normal retirement date, actuarially reduced for early commencement.
8. Disability Benefit
- a. Eligibility: All employees who become disabled after attaining 15 or more years of Credited Service.
 - b. Benefit: The Accrued Benefit determined at date of disability, payable immediately on approval of application but no sooner than the 7th month of disability.
9. Temporary Benefit None.
10. Supplemental Benefits None.

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SCHEDULE SB ATTACHMENTS

11. Survivor's Benefit
- a. Eligibility: Former and active vested employees and retirees who have elected the Normal Form of the Survivor Benefit and who have been married at least one year.
 - b. Amount of Benefit Payable to Surviving Spouse:
 - 1. *Active Vested and Terminated Vested Employees Eligible for Early or Normal Retirement*: Monthly Survivor Benefit shall be equal to 50% of the Accrued Benefit the employee would have received had he retired the day before his death. Benefit payment begins on the first day of the month following the date of death.
 - 2. *Retirement Employees*: Monthly Survivor Benefit shall be equal to 50% of benefit for which retiree was eligible if the retiree did not decline the Survivor's Benefit. Benefit payment begins on the first day of the month following the date of death.
 - 3. *Active Vested and Terminated Vested Employees Not Eligible for Normal or Early Retirement*: Monthly Survivor Benefit shall be equal to 50% of the monthly benefit to which the Employee would have been entitled to had he terminated on the earlier of his termination date or date of death, survived to early retirement date and begun receiving that day, and died the next day.
 - c. Reduction: Pension Benefit of retiree is reduced actuarially for Survivor Benefit Option.
 - d. Duplication Clause: Survivor Benefit not payable concurrently with group insurance transition or Bridge Benefits.
 - e. Revocation of Election: Election of Survivor Benefit shall be voided if either employee Surviving Spouse dies before effective date of election.
12. Employee Contributions None.
13. Form of Benefit
- a. Normal Form: Life Annuity or Survivor's Benefit if married at least one year. Conversion factor is based on 417(e) applicable mortality, 7%
 - b. Optional Forms
 - Straight Life Annuity.
 - 50% (per 11. above) Joint and Survivor's Benefit Annuity.
 - Conversion factor is based on 417(e) applicable mortality, 7%
14. Medicare Benefit None.

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

Substitute mortality tables are used for the entire plan populations, including:

- Male participants (annuitants and non-annuitants), including disabled participants
- Female participants (annuitants and non-annuitants), including disabled participants

Prescribed tables are used for the following plan populations: None

Mortality ratio used to develop the table: 1.295454

Mortality table is constructed based on partial credibility

Partial credibility weighting factor: 0.819914

The last plan year for which the IRS approval for the substitute mortality tables applies is: 2028

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