

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
1b Three-digit plan number (PN) 004
1c Effective date of plan 01/01/1987
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) TRAVELPORT, LP
300 GALLERIA PARKWAY NW, 11TH FLOOR
HUMAN RESOURCES
ATLANTA, GA 30339-3196
2b Employer Identification Number (EIN) 43-1537250
2c Plan Sponsor's telephone number 303-397-5000
2d Business code (see instructions) 541512

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

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

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

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	3451
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	167
	6a(2)	137
	6b	2420
	6c	667
	6d	3224
	6e	150
	6f	3374
	6g(1)	
	6g(2)	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE 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>GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>TRAVELPORT, LP</u>	D Employer Identification Number (EIN) <u>43-1537250</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>298547977</u>	
b Actuarial value	2b	<u>289601441</u>	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>2511</u>	<u>306164265</u>	<u>306164265</u>
b For terminated vested participants	<u>773</u>	<u>50130935</u>	<u>50130935</u>
c For active participants	<u>167</u>	<u>12442177</u>	<u>12570723</u>
d Total	<u>3451</u>	<u>368737377</u>	<u>368865923</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>5.03 %</u>	
6 Target normal cost			
a Present value of current plan year accruals	6a	<u>0</u>	
b Expected plan-related expenses	6b	<u>3250000</u>	
c Target normal cost	6c	<u>3250000</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>09/26/2025</u> Date
	<u>MATTHEW FISHEL</u> Type or print name of actuary	<u>23-08172</u> Most recent enrollment number
	<u>MERCER</u> Firm name	<u>215-982-4212</u> Telephone number (including area code)
	<u>30 SOUTH 17TH STREET, 19TH FLOOR PHILADELPHIA, PA 19103</u> Address of the firm	

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	2180259
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	2180259
10	Interest on line 9 using prior year's actual return of <u>11.89</u> %	0	259233
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		12491
	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>5.16</u> %		645
	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		13136
	d Portion of (c) to be added to prefunding balance		13136
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	2452628

Part III Funding Percentages			
14	Funding target attainment percentage	14	77.84 %
15	Adjusted funding target attainment percentage	15	77.84 %
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	84.40 %
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		
07/08/2024	2284000	0					
10/11/2024	2309000	0					
01/10/2025	2362000	0					
09/11/2025	1962000	0					
			Totals ▶	18(b)	8917000	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	8501293	
20	Quarterly contributions and liquidity shortfalls:			
	a Did the plan have a "funding shortfall" for the prior year?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
	c If line 20a is "Yes," see instructions and complete the following table as applicable:			
Liquidity shortfall as of end of quarter of this plan year				
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th	
0	0	0	0	

Part V Assumptions Used to Determine Funding Target and Target Normal Cost			
21 Discount rate:			
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.87 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 4
22 Weighted average retirement age			22 61
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

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

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	3250000	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	81717110	7702851	
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	10952851	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	2452628	2452628
36 Additional cash requirement (line 34 minus line 35)	36	8500223	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	8501293	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	1070	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	1070	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

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

A Name of plan GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 TRAVELPORT, LP	D Employer Identification Number (EIN) 43-1537250	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

BROOKFIELD INVESTMENT FUNDS **P.O. BOX 701**
MILWAUKEE, WA 53201-0701

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

DODGE & COX

94-1441976

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

GMO LLC **40 ROWES WHARF**
BOSTON, MA 02110-3340

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

LOOMIS SAYLES **P.O. BOX 219594**
KANSAS, MA 64121-9594

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

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

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

FIDELITY MANAGEMENT TRUST CO.

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
25 50 51	NONE	364347	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

SLC MANAGEMENT

13-3451974

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	259329	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MERCER

13-2834414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	233824	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

CLEARSTEAD

34-1597728

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	100000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

INTEGRITY ASSET MANAGEMENT

13-2700161

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	58139	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

FIDELITY INSTITUTIONAL ASSET MGMT

20-4659714

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	40744	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

BLACKROCK INST TRUST COMPANY, NA

94-3112180

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	21782	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

WARREN AVERETT, LLC

45-4084437

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	13000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>TRAVELPORT, LP</u>	D Employer Identification Number (EIN) <u>43-1537250</u>	

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

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>SPARTAN 500 INDEX POOL - C</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY MANAGEMENT TRUST COMPANY</u>		
c EIN-PN <u>82-6293122-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>60466075</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FIAM SELECT INTL EQUITY</u>		
b Name of sponsor of entity listed in (a): <u>FIAM FORMERLY PYRAMIS</u>		
c EIN-PN <u>20-4659714-021</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>7471379</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRAVELPORT VICTORY CAPITAL SEP ACC</u>		
b Name of sponsor of entity listed in (a): <u>VICTORY CAPITAL MANAGEMENT</u>		
c EIN-PN <u>13-2700161-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4619394</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK FKA BGI LT GOV R BOND</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPA</u>		
c EIN-PN <u>94-3289737-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14010980</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRAVELPORT RYAN LABS SEP ACC</u>		
b Name of sponsor of entity listed in (a): <u>RYAN LABS ASSET MANAGEMENT</u>		
c EIN-PN <u>13-3451794-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>163309473</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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 GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN	B Three-digit plan number (PN) ▶ 004
C Plan sponsor's name as shown on line 2a of Form 5500 TRAVELPORT, LP	D Employer Identification Number (EIN) 43-1537250

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

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	116281	175980
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	10293000	4324000
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	14400	73146
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1533783	16452933
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	101451591	163309473
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	6463589	4619394
(5) Partnership/joint venture interests	1c(5)	13554100	1078398
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	120964677	81948434
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	41778574	17648346
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	296169995	289630104
Liabilities			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	0	73146
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	73146
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	296169995	289556958

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)	8917000	
(B) Participants.....	2a(1)(B)	0	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		8917000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	0	
(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)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1164628	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1164628
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	10980	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	18644423
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	-2072914
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	3441739
c Other income	2c	29143
d Total income. Add all income amounts in column (b) and enter total	2d	30134999

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	33221083
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	33221083
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)	0
(2) Contract administrator fees	2i(2)	551527
(3) Recordkeeping fees	2i(3)	0
(4) IQPA audit fees	2i(4)	0
(5) Investment advisory and investment management fees	2i(5)	418339
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	164425
(8) Legal fees	2i(8)	11621
(9) Valuation/appraisal fees	2i(9)	0
(10) Other trustee fees and expenses	2i(10)	
(11) Other expenses	2i(11)	2381041
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	3526953
j Total expenses. Add all expense amounts in column (b) and enter total	2j	36748036

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	-6613037
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: **WARREN AVERETT LLC**

(2) EIN: **45-4084437**

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		15000000
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 556772.

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

A Name of plan <u>GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TRAVELPORT, LP</u>	D Employer Identification Number (EIN) <u>43-1537250</u>	

Part I	Distributions
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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): 04-3275867

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	35
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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: 31.7 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 57.2 %
 High-Yield Debt: 0.0 % Real Assets: 0.3 % Cash or Cash Equivalents: 5.8 % Other: 5.0 %

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

**GALILEO & WORLDSPAN U.S. LEGACY
PENSION PLAN**

**FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION**

DECEMBER 31, 2024 AND 2023

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
TABLE OF CONTENTS
DECEMBER 31, 2024 AND 2023

INDEPENDENT AUDITORS' REPORT	1
FINANCIAL STATEMENTS	
Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to the Financial Statements	6
SUPPLEMENTARY INFORMATION	
Schedule H, Part IV, Line 4(i) – Schedule of Assets (Held at End of Year)	15
Schedule H, Part IV, Line 4(j) – Schedule of Reportable Transactions	24

INDEPENDENT AUDITORS' REPORT

To the Employee Benefits Committee and Participants of
Galileo & Worldspan U.S. Legacy Pension Plan

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

We have performed audits of the accompanying financial statements of Galileo & Worldspan U.S. Legacy Pension Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion on the Financial Statements

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audits of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) 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 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 audits in accordance with GAAS, we:

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

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

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 GAAP.

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 audits.

Other Matters

Supplemental Schedules Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2024, and Schedule of Reportable Transactions for the year ended December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedules 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).

Warren Averett, LLC

Atlanta, Georgia
September 29, 2025

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at fair value		
Common collective trust funds	\$ 81,948,434	\$ 120,964,677
Partnership/joint venture interest	1,078,398	13,554,100
Mutual funds	17,648,346	41,778,574
Money market fund	16,452,933	1,533,783
Separate accounts	<u>167,928,867</u>	<u>107,915,180</u>
Total investments, at fair value	285,056,978	285,746,314
Cash	175,980	116,281
Employer contribution receivable	4,324,000	10,293,000
Accrued interest and dividends	<u>73,146</u>	<u>14,400</u>
TOTAL ASSETS	289,630,104	296,169,995
LIABILITIES		
Due to broker	<u>(73,146)</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 289,556,958</u></u>	<u><u>\$ 296,169,995</u></u>

See notes to the financial statements.

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2024 AND 2023**

	2024	2023
ADDITIONS/DEDUCTIONS TO NET ASSETS		
Interest and dividends	\$ 1,164,628	\$ 1,655,141
Sponsor contributions	8,917,000	10,293,000
Net appreciation in fair value of investments	20,053,371	33,565,569
Benefits paid to participants	(33,221,083)	(52,816,808)
Administrative expenses	(3,526,953)	(4,203,659)
	(6,613,037)	(11,506,757)
NET DECREASE IN NET ASSETS		
NET ASSETS AVAILABLE FOR BENEFITS AT:		
BEGINNING OF YEAR	296,169,995	307,676,752
END OF YEAR	\$ 289,556,958	\$ 296,169,995

See notes to the financial statements.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

1. DESCRIPTION OF PLAN

The following description of the Galileo & Worldspan U.S. Legacy Pension Plan (the Plan) and is provided for general information purposes only. Participants should refer to the official Plan document for complete information.

General

The Plan is a defined benefit pension plan covering substantially all U.S. employees of Travelport, LP (the Company) hired on or before December 31, 2001, and for former Worldspan employees (a Worldspan participant) hired on or before April 30, 2003, and for former Galileo employees (a Galileo participant). The Plan is sponsored by the Company.

Prior to January 1, 2008, the Plan was named Galileo International Employees' Pension Plan (the Galileo Plan). Effective January 1, 2008, the Worldspan Employees' Pension Plan (the Worldspan Plan) merged into the Galileo Plan. Effective April 1, 2008, the name of the Plan was changed to the Galileo & Worldspan U.S. Legacy Pension Plan.

Prior to the merger, the Company ceased all further benefit accruals under the Worldspan Plan effective on December 31, 2003, and the Galileo Plan effective June 30, 2003. As a result, employees who had already become participants in either the Worldspan Plan or the Galileo Plan no longer earn any additional benefits under the Plan. No new participants were allowed after December 31, 2001, for the Worldspan Plan or April 30, 2003, for the Galileo Plan.

However, employees will continue to receive vesting credit for their future years of service for purposes of determining vesting of their discontinued accrued benefit. Similarly, future service in the Company will be taken into consideration for purposes of determining a participant's eligibility to receive early retirement and similar benefits that are conditioned on the number of a participant's years of service. However, only years of service and earnings history prior to January 1, 2004, for the Worldspan Plan and July 1, 2003, for the Galileo Plan will be considered for determining the amount of accrued benefit.

The Plan was amended in December 2021 to allow for the purchase of one or more annuity contracts for annuitized individuals, as defined.

Plan Administration

The Company's Employee Benefits Committee (the Plan Administrator) is responsible for governance and administration of the Plan. Fidelity Management Trust Company (the Trustee) serves as the Trustee of the Plan, and together with several investment managers, manages the Plan's investments. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Funding Policy

Contributions to provide benefits under the Plan are made solely by the Company. The Company's funding policy is to make cash contributions to the Plan in amounts as determined by the Plan's independent actuary. The Company met the minimum funding requirements of ERISA for the years ended December 31, 2024 and 2023.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to provisions set forth in ERISA.

Pension Benefits

For Galileo participants, the amount of annual benefit to be paid in monthly installments for life is the greater of: (a) 1/12th of 1.6% of final earnings multiplied by pension service up to 40 years; or (b) accrued benefit in the Covia Pension Plan (formerly the Covia Mirror Pension Plan) as of December 31, 1992. Participants become fully vested after five years of credited service. Benefits were frozen as of June 30, 2003.

For Worldspan participants, the amount of annual benefit to be paid in monthly installments for life is based on credited service to normal retirement date and is generally 60% of average monthly compensation multiplied by a fraction, not greater than one, the numerator of which is the participant's benefit service in years and the denominator of which is 30, minus 50% of estimated social security benefit, up to a maximum of 30% of average monthly compensation, multiplied by a fraction, not greater than one, the numerator of which is the participant's benefit service in years and the denominator of which is 30. Participants become fully vested after five years of credited service. Benefits were frozen as of December 31, 2003.

Vesting

Vested benefits include only the benefits in which an active participant retains a right, independent of continuation of employment beyond the calculation date. Non-vested benefits include any additional benefits which might arise because of future death or disability that would not become payable if the participant had terminated employment before the occurrence of the death or disability.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

Use of Estimates

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

Risks and Uncertainties

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

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

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.

Investment Valuation and Income Recognition

All investments held by the Plan are stated at fair value. Fair value of a financial instrument is the amount 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 mutual funds and money market fund are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

The common collective trust funds are valued at the NAV of units of a trust fund. The NAV, as provided by the custodian of the fund, is used as the 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 is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV.

The partnership/joint venture fund is valued at the estimated fair value of the fund and is based upon NAV as the practical expedient. NAV is based on the proportionate share of the fair value as recorded in the fund's audited financial statements. The fund invests primarily in readily marketable securities and allocates gains, losses and expenses to the partners based on the ownership percentage as described in the partnership agreement.

The separate accounts are valued daily based on the NAVs as the practical expedient of the funds, which are determined by closing prices of the underlying securities on national exchanges.

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

Payment of Benefits

Benefits are recorded upon distribution.

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

3. FAIR VALUE MEASUREMENT

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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under Financial Accounting Standards Board (FASB), Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, are described as follows:

- Level 1 – Observable inputs such as quoted prices in active markets;
- Level 2 – Inputs, other than quoted prices in active markets, that are observable either directly or indirectly; and
- Level 3 – Unobservable inputs in which there is little or no market data, which require the reporting entity to develop its own assumptions.

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

The following table sets forth by level, the Plan’s investment assets at fair value as of December 31, 2024. There were no Level 2 or 3 investments.

	Level 1	Total
December 31, 2024		
Mutual funds	\$ 17,648,346	\$ 17,648,346
Money market fund	16,452,933	16,452,933
Total investments, in fair value hierarchy	\$ 34,101,279	34,101,279
Investments measured at NAV ⁽¹⁾		
Common collective trust funds		81,948,434
Partnership/joint venture interest ⁽²⁾		1,078,398
Separate accounts ⁽³⁾		167,928,867
Total investments, at fair value		\$ 285,056,978

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

The following table sets forth by level, the Plan's investment assets at fair value as of December 31, 2023. There were no Level 2 or 3 investments.

	<u>Level 1</u>	<u>Total</u>
December 31, 2023		
Mutual funds	\$ 41,778,574	\$ 41,778,574
Money market fund	1,533,783	1,533,783
Total investments, in fair value hierarchy	<u>\$ 43,312,357</u>	43,312,357
Investments measured at NAV ⁽¹⁾		
Common collective trust funds		120,964,677
Partnership/joint venture interest ⁽²⁾		13,554,100
Separate accounts ⁽³⁾		<u>107,915,180</u>
Total investments, at fair value		<u>\$ 285,746,314</u>

⁽¹⁾ In accordance with FASB ASC Subtopic 820-10, certain investments that were measured at NAV (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits. In accordance with the adoption of FASB Accounting Standards Update (ASU) 2015-12, if an investment is measured using the NAV (or its equivalent) as the practical expedient in ASC 820 and that investment is in a fund that files a U.S. Department of Labor Form 5500, *Annual Return/Report of Employee Benefit Plan*, as a direct filing entity, disclosure of that investment's strategy will no longer be required. The Plan holds the right to liquidate its positions in these investments, subject only to a brief notification period. No redemption restrictions or unfunded commitments existed with respect to these investments at December 31, 2024 or 2023.

The investment strategies for the investments that did not file a U.S. Department of Labor Form 5500, *Annual Return/Report of Employee Benefit Plan*, as a direct filing entity, are as follows:

⁽²⁾ The partnership/joint interest fund held as of December 31, 2024 and 2023, mainly invested in fixed income securities. The Plan held the right to liquidate its positions in the limited partnership interest in corporate fixed-income securities at the end of each calendar quarter subject only to a 15-day notification period. No unfunded commitments existed with respect to this investment at December 31, 2024 or 2023. The partnership fund held as of December 31, 2024 and 2023, is a single-strategy event-driven fund. Event-driven strategies center on investing in securities of companies facing a major corporate event. The event-driven team primarily focuses on companies involved in mergers or acquisitions but may also seek investment opportunities driven by companies experiencing restructuring, bankruptcies, spin-offs or significant litigation. There is a 15-day notification period for redemptions and no unfunded commitments.

⁽³⁾ The separate accounts hold underlying fixed income and equity securities. The Plan holds the right to liquidate its positions in these investments, subject only to a brief notification period. No unfunded commitments existed with respect to these investments at December 31, 2024 or 2023.

Transfers Between Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such circumstances, the transfer is reported at the beginning of the reporting periods. There were no transfers between levels as of December 31, 2024 and 2023.

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

4. ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the service that employees have rendered. Accumulated plan benefits include benefits expected to be paid to: (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died and (c) present employees or their beneficiaries. For purposes of determining the amount of the accumulated plan benefit, only years of service and earnings history prior to January 1, 2004, for the Worldspan Plan, and July 1, 2003, for the Galileo Plan are considered. Benefits payable under all circumstances (retirement, death, disability and termination of employment) are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from Plan assets are excluded from accumulated plan benefits.

The actuarial present value of accumulated plan benefits is determined by the Plan's independent consulting actuary and 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. It is at least reasonably possible that the actuarial assumptions used to calculate accumulated plan benefits will change in the near term and that the effect of such change could be significant. The accumulated plan benefit valuation was performed as of January 1, 2024. In the event the valuation would have been performed as of December 31, there would be no substantial differences.

The Plan's actuary determined actuarial present value of accumulated benefits as of January 1, 2024, as follows:

Actuarial present value of accumulated plan benefits	
Vested benefits	
Participants currently receiving benefits	\$ 290,575,481
Participants with deferred benefits	46,676,680
Active participants	<u>11,512,225</u>
Total vested benefits	348,764,386
Nonvested benefits	<u>120,619</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 348,885,005</u></u>

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

The changes in actuarial present value of accumulated plan benefits for the year ended January 1, 2024, are as follows:

Actuarial present value of accumulated plan benefits	
Beginning of year	\$ 387,789,140
Interest accumulation	19,768,173
Benefits paid	(52,816,808)
Change in assumption	(9,856,819)
Benefits accumulated	<u>4,001,319</u>
End of Year	<u>\$ 348,885,005</u>

The significant actuarial assumptions used in the most recent valuations dated January 1, 2024 were:

Mortality basis:	Pri-2012 sex-distinct, separate employee and retiree tables with contingent survivor adjustments for participants and beneficiaries and no collar adjustments applied future improvement using the MP-2021 projection scale
Actuarial cost method:	Projected Unit Cost Method
Retirement:	Various rates from ages 52 to 70
Discount rate:	5.85% in 2024 (5.50% in 2023)

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

5. INFORMATION CERTIFIED BY THE TRUSTEE

Certain information related to investments disclosed in the accompanying financial statements and ERISA-required supplemental schedules, including investments, interest receivable at December 31, 2024 and 2023, and net appreciation in fair value of investments, interest and dividends for the years ended December 31, 2024 and 2023, was obtained by management and agreed to or derived from information certified as complete and accurate by the Trustee.

6. PLAN TERMINATION

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA and its related regulations. In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

1. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC), a U.S. governmental agency, up to the applicable limitations discussed below.
3. All other vested benefits (vested benefits not insured by the PBGC).
4. All non-vested benefits.

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 of 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. However, there is a statutory ceiling on the amount of an individual's monthly benefit that the PBGC guarantees.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid, and on the level of benefits guaranteed by the PBGC. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guaranty while other benefits may not be provided for at all.

7. FEDERAL INCOME TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company, by a letter dated February 1, 2017, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, the Company and the Plan Administrator believe that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC and that the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions. The Plan is currently under an audit with the Department of Labor in which no issues have been raised to date.

**GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

8. PARTY-IN-INTEREST TRANSACTIONS

A portion of the Plan's investments include a money market fund and common collective trust funds that are managed by the Trustee or its affiliates. The Trustee is the custodian of these investments as defined by the Plan, and, therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for the investment management services are included as a reduction of the return on each fund.

9. SUBSEQUENT EVENTS

Management has evaluated subsequent events through September 29, 2025, which is the date the financial statements were available to be issued and has determined there are no subsequent events that require disclosure under FASB ASC Topic 855, *Subsequent Events*.

SUPPLEMENTARY INFORMATION

Schedule SB, line 26a — Schedule of Active Participant Data

Attained age	Years of credited service										Total
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	
Under 25											
25–29											
30–34											
35–39											
40–44											
45–49		9									9
50–54		24 1,822	13	8							44
55–59		11	18	32 12,569	9						70
60–64		5	6	11	4	1					27
65–69		1	5	6	2		1				15
70 & up			1	1							2
Total		49	43	58	15	1	1				167

In each cell, the top number is the count of active participants for each age/service combination and the bottom number is the average annual frozen benefit. The plan is “hard frozen” and the average benefits shown are in lieu of compensation. The average frozen benefit is not shown for cells with fewer than 20 participants.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Actuarial assumptions for January 1, 2024 funding valuation**

Discount rate sponsor elections			
• Segment rates or full yield curve	Segment		
• Look-back months	4		
	Stabilized	Nonstabilized	PBGC
• First 5 years	4.75%	3.62%	5.01%
• Next 15 years	4.87%	4.46%	5.13%
• Over 20 years	5.59%	4.52%	5.15%
Mortality sponsor elections			
• Healthy participants	Section 430(h)(3) prescribed separate generational annuitant and nonannuitant mortality tables.		
	These tables are based on the Pri-2012 mortality tables projected with mortality improvements using the IRS-modified MP-2021 mortality improvement scale, in accordance with IRS regulation 1.430(h)(3)-1.		
• Disabled participants	Same as healthy		
Other economic assumptions			
• Salary increases	Not applicable		
• Flat-dollar benefit increases	Not applicable		
• Social Security taxable wage base increase	Not applicable		
• Inflation	Not applicable		
• Expected investment return	4.62% per year for 2022 and 5.95% per year for 2023		
• Expenses	Estimated based on actual prior year's administrative expenses, adjusted to reflect current year PBGC premiums, added to current year normal cost (\$3,250,000 for January 1, 2024 plan year).		

Rationale for economic assumptions

Expected investment return – The expected rate of return is based on the median simulated investment return (net of investment expenses) using capital market assumptions published in Mercer Investment Consulting's Capital Market Outlook for the plan's target asset mix.

Expenses – Based on actual prior year's administrative expenses paid from trust, adjusted to reflect the current year's PBGC premium.

Demographic assumptions	
• Withdrawal	See table of sample rates.
• Disability incidence	None

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

<ul style="list-style-type: none"> Retirement age 	Percentage			
	Attained age	Galileo	Worldspan	
	52-54	N/A	9.0%	
	55	11.0%	9.0%	
	56	4.0%	3.0%	
	57	7.0%	3.0%	
	58-59	7.0%	6.0%	
	60	10.0%	6.0%	
	61	5.0%	6.0%	
	62	18.0%	21.0%	
	63	13.0%	21.0%	
	64-65	36.0%	21.0%	
66-69	36.0%	33.0%		
70+	100.0%	100.0%		
<ul style="list-style-type: none"> Benefit commencement age for <ul style="list-style-type: none"> Future vested deferred Galileo: 65 Worldspan: 65, or Age 63 if 10 plus years of service Current vested deferred Galileo: 65 Worldspan: 65, or Age 63 if 10 plus years of service 				
<ul style="list-style-type: none"> Spouse assumptions 	Male participants	Female participants		
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Percentage married 	65%	45%		
<ul style="list-style-type: none"> <ul style="list-style-type: none"> Spouse age difference 	1 year younger	1 year older		
Form of payment	Lump sum	Single life	50% J&S	100% J&S
<ul style="list-style-type: none"> Active retirements 	0%	60%	20%	20%
<ul style="list-style-type: none"> Future vested deferred 	0%	60%	20%	20%
<ul style="list-style-type: none"> Future deaths- Married 	0%	100%	0%	0%
<ul style="list-style-type: none"> Future deaths – Unmarried Worldspan 	100%	0%	0%	0%
<ul style="list-style-type: none"> Future deaths – Unmarried Galileo 	Not applicable	Not applicable	Not applicable	Not applicable
<ul style="list-style-type: none"> Current vested deferred 	0%	60%	20%	20%
Unpredictable contingent event assumptions	Not applicable			
At-risk assumptions				
Special retirement rates	Active and deferred inactive participants who are eligible for immediate retirement and withdrawal benefits in the first 11 plan years are assumed to 100% retire in the first year of eligibility following the valuation year.			
Most valuable form of payment	All participants who have not yet commenced benefits are assumed to take a life annuity form of payment.			

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods**Table of sample rates**

Attained age	Withdrawal	
	Galileo	Worldspan
40	6.00%	6.00%
45	10.00%	10.00%
50	8.00%	8.00%
55	8.00%	8.00%

Rationale for demographic assumptions

- **Withdrawal** – This assumption was developed based on an experience study completed in 2024 based on the plan’s experience from 2019 through 2023 and is expected to be representative of anticipated future experience.
- **Retirement age** – This assumption was developed based on an experience study completed in 2024 based on the plan’s experience from 2019 through 2023 and is expected to be representative of anticipated future experience.
- **Benefit commencement age** – This assumption was developed based on an experience study completed in 2024 based on the plan’s experience from 2019 through 2023 and is expected to be representative of anticipated future experience.
- **Form of payment** – This assumption was developed based on an experience study completed in 2024 based on the plan’s experience from 2019 through 2023 and is expected to be representative of anticipated future experience.
- **Spouse assumptions** - These assumptions were developed based on an experience study completed in 2024 based on the plan’s experience from 2019 through 2023 and are expected to be representative of anticipated future experience.

Actuarial methods for funding**Asset methods**

The asset valuation method is an average of the current market value of assets and the adjusted market value for the year preceding the valuation date, beginning with a fresh start as of January 1, 2022. The adjusted market value for the year preceding the valuation date is based on the market value at the beginning of the prior year, adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. The resulting average is adjusted to be no greater than 110% and no less than 90% of the fair market value, as required by IRC Section 430.

Participant methods

Participants or former participants are included or excluded from the valuation as described below:

- **Participants included:** The plan sponsor provides us with data on all employees as of the valuation date, but only those employees who have completed the plan’s eligibility requirements are included in the valuation of liabilities.
- **Participants excluded:** No actuarial liability is included for nonvested participants who terminated prior to the valuation date. For this purpose, participants with a break-in-service on the valuation date are treated as terminated participants.

Schedule SB, Part V — Statement of Actuarial Assumptions/Methods

- **Insurance contracts:** Certain participants had a portion of their benefit funded through a Group Annuity Contract (GAC) with Met Life or John Hancock. The value of GACs is not included as a Plan asset, but represents an irrevocable commitment from the insurers to fund the benefits on behalf of the named participants, so the portion of the benefit that will be paid by GAC is subtracted from the Galileo benefit.

Minimum funding methods

The funding target for minimum funding calculations is computed using the traditional unit credit method of funding. The objective under this method is to fund each participant's benefits under the plan as they accrue. Thus, the total pension to which each participant is expected to become entitled at retirement is broken down into units, each associated with a year of past or future credited service.

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(j)
SCHEDULE OF REPORTABLE TRANSACTIONS
FOR THE YEAR ENDED DECEMBER 31, 2024

(a) Identity of Issue	(b) Description	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset at Date of Transaction	(i) Net Gain (Loss)
Single						
Fidelity Investments Money Market	Mutual Fund	\$ 17,258,056	\$ -	\$ 17,258,056	\$ 17,258,056	\$ -
Spartan 500 Index Pool	CCT	-	16,000,000	8,484,948	16,000,000	7,515,052
Series						
Fidelity Investments Money Market	Mutual Fund	46,221,117	-	46,221,117	46,221,117	-
Fidelity Investments Money Market	Mutual Fund	-	31,301,971	31,301,971	31,301,971	-
Spartan 500 Index Pool	CCT	3,375,498	-	3,375,498	3,375,498	-
Spartan 500 Index Pool	CCT	-	29,835,830	16,297,368	29,835,830	13,538,462

+

This schedule is presented in compliance with DOL filing requirements.

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 GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF TRAVELPORT, LP	D Employer Identification Number (EIN) 43-1537250	
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		298,547,977
b Actuarial value	2b		289,601,441
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	2,511	306,164,265	306,164,265
b For terminated vested participants	773	50,130,935	50,130,935
c For active participants	167	12,442,177	12,570,723
d Total	3,451	368,737,377	368,865,923
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	5.03%	
6 Target normal cost			
a Present value of current plan year accruals	6a	0	
b Expected plan-related expenses	6b	3,250,000	
c Target normal cost	6c	3,250,000	

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	 Signature of actuary	MRF Date <u>9/26/2025</u>	
MATTHEW FISHEL	Type or print name of actuary	2308172	Most recent enrollment number
MERCER	Firm name	215-982-4212	Telephone number (including area code)
30 SOUTH 17TH STREET, 19TH FLOOR			
PHILADELPHIA PA 19103			
Address of the firm			

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

21 Discount rate:

a Segment rates:	1st segment: 4.75%	2nd segment: 4.87%	3rd segment: 5.59%	<input type="checkbox"/> N/A, full yield curve used
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b Applicable month (enter code)..... **21b** 4

22 Weighted average retirement age **22** 61

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	3,250,000
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	81,717,110	7,702,851
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	10,952,851
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	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	2,452,628	2,452,628
36 Additional cash requirement (line 34 minus line 35).....	36	8,500,223	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	8,501,293	

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

a Total (excess, if any, of line 37 over line 36)	38a	1,070
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	1,070

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

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

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

Schedule SB, line 26b — Schedule of Projection of Expected Benefit Payments

Schedule SB, line 26b Schedule of Projection of Expected Benefit Payments				
Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	145,594	3,351,381	30,246,399	33,743,374
2025	286,862	1,492,267	29,334,373	31,113,502
2026	399,020	1,887,776	28,405,804	30,692,600
2027	517,546	2,404,560	27,478,568	30,400,674
2028	618,464	2,832,238	26,583,748	30,034,450
2029	721,876	3,174,820	25,638,893	29,535,589
2030	811,384	3,395,035	24,678,698	28,885,117
2031	887,580	3,545,923	23,695,539	28,129,042
2032	950,083	3,676,428	22,664,018	27,290,529
2033	994,251	3,826,167	21,598,793	26,419,211
2034	1,023,244	3,860,059	20,510,072	25,393,375
2035	1,052,683	3,867,255	19,396,753	24,316,691
2036	1,064,418	3,837,587	18,262,341	23,164,346
2037	1,066,514	3,816,393	17,113,665	21,996,572
2038	1,062,121	3,776,182	15,958,026	20,796,329
2039	1,052,160	3,727,965	14,802,960	19,583,085
2040	1,036,384	3,653,168	13,656,083	18,345,635
2041	1,017,431	3,565,916	12,524,997	17,108,344
2042	995,713	3,467,910	11,417,182	15,880,805
2043	970,641	3,359,745	10,339,822	14,670,208
2044	942,749	3,242,222	9,299,662	13,484,633
2045	912,550	3,116,312	8,303,016	12,331,878
2046	880,066	2,981,979	7,355,697	11,217,742
2047	845,064	2,839,352	6,462,918	10,147,334
2048	807,850	2,688,744	5,629,207	9,125,801
2049	768,519	2,530,703	4,858,283	8,157,505
2050	727,197	2,366,067	4,152,822	7,246,086
2051	684,043	2,195,997	3,514,376	6,394,416
2052	639,253	2,021,986	2,943,339	5,604,578
2053	593,065	1,845,845	2,438,886	4,877,796
2054	545,776	1,669,651	1,998,989	4,214,416
2055	497,764	1,495,652	1,620,498	3,613,914
2056	449,531	1,326,161	1,299,335	3,075,027
2057	401,688	1,163,421	1,030,687	2,595,796

Schedule SB, line 26b — Schedule of Projection of Expected Benefit Payments

Schedule SB, line 26b Schedule of Projection of Expected Benefit Payments				
Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2058	354,889	1,009,456	809,232	2,173,577
2059	309,813	865,986	629,363	1,805,162
2060	267,090	734,339	485,414	1,486,843
2061	227,266	615,394	371,894	1,214,554
2062	190,787	509,571	283,660	984,018
2063	157,952	416,849	216,037	790,838
2064	128,908	336,827	164,890	630,625
2065	103,666	268,799	126,672	499,137
2066	82,117	211,826	98,413	392,356
2067	64,053	164,817	77,693	306,563
2068	49,187	126,594	62,588	238,369
2069	37,177	95,967	51,599	184,743
2070	27,653	71,783	43,581	143,017
2071	20,238	52,968	37,680	110,886
2072	14,568	38,542	33,271	86,381
2073	10,313	27,643	29,899	67,855

Schedule SB, line 22 — Description of Weighted Average Retirement Age

Each employee is assumed to retire in accordance with the table of retirement rates. The proportion of employees expected to retire at each potential retirement age is shown below. The average retirement age is 61. Based on the distribution of the active population as of January 1, 2024, the average retirement age is a blend of the assumed Worldspan and Galileo retirement rates (60% Worldspan and 40% Galileo).

Worldspan

(A) Retirement age	(B) Retirement percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
52	9%	10,000	900	46,800
53	9%	9,100	819	43,407
54	9%	8,281	745	40,246
55	9%	7,536	678	37,302
56	3%	6,857	206	11,521
57	3%	6,652	200	11,375
58	6%	6,452	387	22,454
59	6%	6,065	364	21,470
60	6%	5,701	342	20,524
61	6%	5,359	322	19,614
62	21%	5,038	1,058	65,589
63	21%	3,980	836	52,651
64	21%	3,144	660	42,255
65	21%	2,484	522	33,903
66	33%	1,962	648	42,735
67	33%	1,315	434	29,066
68	33%	881	291	19,765
69	33%	590	195	13,437
70	100%	395	395	27,677
Total			10,000	601,792
Average				60.18

Schedule SB, line 22 — Description of Weighted Average Retirement Age

Galileo

(A) Retirement age	(B) Retirement percent	(C) Lx	(D) Number of employees expected to retire (B) x (C)	(E) (A) x (D)
55	11%	10,000	1,100	60,500
56	4%	8,900	356	19,936
57	7%	8,544	598	34,091
58	7%	7,946	556	32,260
59	7%	7,390	517	30,519
60	10%	6,872	687	41,235
61	5%	6,185	309	18,865
62	18%	5,876	1,058	65,575
63	13%	4,818	626	39,462
64	36%	4,192	1,509	96,581
65	36%	2,683	966	62,778
66	36%	1,717	618	40,796
67	36%	1,099	396	26,505
68	36%	703	253	17,216
69	36%	450	162	11,180
70	100%	288	288	20,164
Total			10,000	617,663
Average				61.77

Total Weighted Retirement Age = (60% x 60.18) + (40% x 61.77) = 60.81

Schedule SB, Part V — Summary of Plan Provisions

Summary of major plan provisions (Galileo)

Effective date and plan year	<p>1993:</p> <ul style="list-style-type: none"> a) Covia Partnership (“Covia”) established the Covia Employees Pension Plan. This replaced the Covia Pension Plan that was originally established August 5, 1988 b) Certain assets and business of Covia were assumed by Apollo Travel Services, and Covia Partnership was renamed Galileo International Partnership. Plan was renamed the Galileo International Employees Pension Plan <p>1994:</p> <ul style="list-style-type: none"> c) Apollo established the Apollo Travel Services Pension Plan (the “Apollo Plan”) <p>1997:</p> <ul style="list-style-type: none"> a) Galileo International Partnership was merged into Galileo International, L.L.C. b) Galileo International L.L.C. purchased all of the outstanding interests of Apollo. c) The Apollo Plan was merged into the Galileo Plan effective January 1, 1997. <p>2008:</p> <ul style="list-style-type: none"> a) The Worldspan Plan was merged into this Plan. The name was changed to the Galileo & Worldspan U.S. Legacy Pension Plan <p>Restated plan: January 1, 2015 Plan year: January 1 through December 31</p>
Status of the plan	The plan was frozen for any new participant effective April 30, 2003. Benefit accruals were frozen effective June 30, 2003.
Significant events that occurred during the year	None
Definitions	
<ul style="list-style-type: none"> • Covered employees 	Employee of Galileo or any of its affiliated companies
<ul style="list-style-type: none"> • Participation 	Prior Plan Participants: Date of transfer from UAL prior plan All Other Participants: Later of age 21 with one year of service or 1/1/1993
<ul style="list-style-type: none"> • Vesting service 	One year for each full calendar year of employment measured from hire date to each anniversary of hire date.
<ul style="list-style-type: none"> • Credited service 	One month for each month of participation. Prior plan participants are credited for pension service under the UAL plan as of December 31, 1992. As of January 1, 1993, prior plan participants receive additional pension service equal to additional amount that would have been credited under UAL

Schedule SB, Part V — Summary of Plan Provisions

	prior plan if eligibility were based on age 21 with one year of service rather than age 25 with one year of service. No credited service after June 30, 2003.
• Final average earnings	Average earnings based on the highest 60 consecutive months out of the last 120 months. If the participant has less than 60 consecutive months, average monthly earning will be based on the number of consecutive months. Earnings after June 30, 2003 are disregarded.
• Accrued benefit	The monthly benefit to be paid for life is greater of (a) or (b): (a) 1/12 of 1.6% of final earnings multiplied by pension service up to 40 years (a) Accrued benefit in the prior plan as of 12/31/1992
• Actuarial equivalence for non-lump sum forms of payment	Based on an interest rate of 7% and the 1984 Uninsured Pensioner Mortality Table, with an age adjustment of positive 1 for participants and negative 4 for beneficiaries.
Normal retirement	
• Eligibility	Age 65
• Benefit	Accrued benefit as of Normal Retirement Date. Benefits were frozen as of June 30, 2003.
Early retirement	
• Eligibility	Age 55 and 10 years of vesting service
• Benefit	Monthly pension benefit determined as of early retirement date, unreduced benefit starting at 62, reduced 3% for each year for ages 60 and 61, and 4.5% for each year for ages 55 to 59
Late retirement	
• Eligibility	Retirement from employment after Normal Retirement Date.
• Benefit	Monthly pension benefit determined as of actual retirement date
Deferred vested	
• Eligibility	5 years of vesting service
• Benefit	Accrued Normal Retirement Benefit payable at age 65, or reduced benefit payable on or after attainment of age 55 and 5 years of service. Benefit payable to a terminated vested participant is reduced by 3/5% for each of the first 60 months and by 3/10% for each of the additional months between the date benefits commence and the Normal Retirement Date.
Disability	
• Eligibility	Not applicable
• Benefit	Not applicable
Pre-retirement death	
• Eligibility	Married participant, deceased before retirement

Schedule SB, Part V — Summary of Plan Provisions

• Benefit prior to early retirement	50% of the monthly pension as of date of death, reduced for the 50% J&S election and reduced for payment at the participant’s earliest retirement age
• Benefit after early but before normal retirement	Same as benefit on death prior to early retirement
• Benefit after normal retirement	Same as benefit on death prior to early retirement
Form of benefits	
• Automatic form for unmarried participants	Single life annuity
• Automatic form for married participants	50% Joint and survivor annuity
• Optional forms	10-year certain and life annuity 100% joint and survivor annuity
Miscellaneous	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually.

Schedule SB, Part V — Summary of Plan Provisions**Summary of major plan provisions (Worldspan)**

Effective date and plan year	Effective: January 1, 2008 merged with the Galileo Plan Restated plan: January 1, 2015 Plan year: January 1 through December 31
Status of the plan	Plan is frozen for any new participant effective January 1, 2002. Benefit accruals are frozen effective December 31, 2003.
Significant events that occurred during the year	None
Definitions	
• Covered employees	All employees, except leased employees
• Participation	Each employee who works 1,000 hours per year or more are eligible to participate in the plan on January 1 or July 1 following the later of the attainment of age 21 and completion of one year of service. Employees hired on or after January 1, 2002 may not participate.
• Vesting service	Completion of twelve consecutive months of service with Travelport, Worldspan or any of its affiliated companies.
• Credited service	One year of service for each full calendar year of participation in the Worldspan Pension Plan credited with 1,000 or more Hours of Service. Months of Benefit Service may be credited during your first year of participation and during your year of termination. If the employee was a direct transfer to Worldspan from an affiliate and was a participant in one of the affiliate plans, the service used to determine the benefit from that plan may also be credited as service under this plan. If the employee was a participant in the PSP Pension Plan (now merged into this plan) the employee will be credited with service from his transfer date to the PSP Pension Plan or, if later, the date he met the requirements for participation in the PSP Pension Plan. In addition, if the employee was a direct transfer to PSP and was a participant in an affiliate plan, the service used to determine the benefit from that plan may also be credited as service under this plan. Effective December 31, 2003, credited service was frozen for all employees.
• Final average earnings	Average monthly compensation based on the highest 60 consecutive months out of the last 120 months. If the participant has less than 60 consecutive months, final average earnings will be based on the number of consecutive months. Earnings after December 31, 2003 are disregarded.
• Accrued benefit	The annual benefit based on credited service to normal retirement date is (a) minus (b) but not less than (e) minus (c) plus (d): a) 60% of final average earnings x (participant's benefit service/30), where the fraction is not greater than 1

Schedule SB, Part V — Summary of Plan Provisions

	<ul style="list-style-type: none"> b) 50% of estimated Social Security benefit, up to a maximum of 30% of final average earnings x (participant's benefit service/30), where the fraction is not greater than 1 c) Monthly normal retirement benefit attributable to benefit service recognized by the Worldspan plan, payable in single life annuity under any other defined benefit pension plan d) Monthly scheduled accrued benefit for eight plan participants e) Monthly benefit of \$50.00
<ul style="list-style-type: none"> • Actuarial equivalence for lump sum forms of payment 	Based on Section 417(e) of the Code.

Normal retirement

<ul style="list-style-type: none"> • Eligibility 	Age 65 and 5 years of vesting service
<ul style="list-style-type: none"> • Benefit 	Accrued benefit as of Normal Retirement Date. Benefits were frozen as of December 31, 2003.

Early retirement

<ul style="list-style-type: none"> • Eligibility 	Age 52 and 10 years of vesting service
<ul style="list-style-type: none"> • Benefit 	<p>The accrued normal retirement benefit is reduced 1/3% for each month preceding age 62 and the age 62 Social Security offset is only applied to payments after age 62.</p> <p>For any early retirement prior to age 62, participant will receive two different benefits:</p> <ul style="list-style-type: none"> b) From early retirement date to age 62, the benefit amount before PIA offset amount, reduced by ER factor c) Starting at age 62, (a) minus the PIA offset amount (not less than zero) <p>For early retirement after age 62 and before age 65, the monthly Social Security Benefit used in the accrued benefit formula is the Social Security Benefit amount at the later of age 62 or the age as of which the early retirement benefit is first payable.</p> <p>If you begin to receive a benefit from one of the Affiliate Plans within 35 days of your Early Retirement Date, a special rule called the 35-day rule may apply. The 35-day rule provides that the Affiliate Plan Benefit used in the accrued benefit formula will be the monthly single life benefit determined under the Affiliate Plan as of early retirement (not age 65). The 35-day rule will be applied only if it increases the amount of your early retirement benefit.</p>

Late retirement

<ul style="list-style-type: none"> • Eligibility 	Retirement from employment after Normal Retirement Date.
<ul style="list-style-type: none"> • Benefit 	Monthly pension benefit determined as of actual retirement date

Schedule SB, Part V — Summary of Plan Provisions

Deferred vested	
• Eligibility	5 years of vesting service
• Benefit	Normal Retirement Benefit payable at age 65, or reduced benefit payable on or after attainment of age 52 and 5 years of service. Benefit payable to a terminated vested participant is reduced by 7/12% for each of the first 60 months and by 1/3% for each of the additional months between the date benefits commence and the Normal Retirement Date.
Disability	
• Eligibility	10 years of vesting service
• Benefit	Same as Normal Retirement Benefit
Pre-retirement death	
• Eligibility	Deceased before retirement after the attainment of age 52 and 10 years of service, or after becoming normal retirement eligible
• Benefit prior to early retirement	The benefit payable to the spouse if the participant had separated from service, survived to their earliest retirement date and elected a joint and one-half survivor benefit and died the day after. Benefit will be payable as Lump Sum to single participants.
• Benefit after early but before normal retirement	Same as benefit on death prior to early retirement, except the participant would be assumed to retire and elect the joint and one-half survivor benefit on the date of death.
• Benefit after normal retirement	Same as benefit on death after early retirement
Form of benefits	
• Automatic form for unmarried participants	Single life annuity
• Automatic form for married participants	50% Joint and survivor annuity
• Optional forms	10-year certain and life annuity 100%, 67%, 50% joint and survivor annuity Level income Lump Sum if accrued benefit is less than or equal to \$5,000
Miscellaneous	
• Maximum benefits	Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually.
• Small Cashouts	If the present value of a participant’s benefit is under \$5,000, it may be paid as a lump sum.

Schedule SB, Part V — Summary of Plan Provisions

Benefits included or excluded

Unless noted below, all benefits provided by the plan, as restated and amended through are included in this valuation:

- **Most recent plan amendments included:** Sixth amendment to amend the Plan effective August 1, 2023 to provide an immediate lump sum distribution option and certain immediate annuity options to participants who terminated employment on or before July 1, 2023 and did not have an annuity start date between August 1, 2023 and November 1, 2023.
- Plan amendments excluded: None
- Late retirement increases:
 - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement; therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70½. The retirement decrements in the valuation do not extend beyond age 70 ½. This valuation doesn't include increases for current participants over age 70.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are valued for their missed benefit payment after normal retirement age.
- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Plan provisions specific to funding

Additional benefits included or excluded

IRC Section 436 benefit restrictions:

- *Unpredictable contingent event benefits:* This valuation excludes restricted contingent event benefits for events that occurred before the valuation date but includes contingent event benefits for events that are expected to occur on or after the valuation date regardless of anticipated funding-based limitations.
- Plan amendments: See above.

Schedule SB, Part V — Summary of Plan Provisions

- *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
- *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.
- **Unpredictable contingent event benefits:** The plan does not have any unpredictable contingent event benefits.

Plan provision changes since prior valuation

Maximum compensation amounts and maximum benefit amounts under IRS rules were updated from 2023 to 2024.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250 / PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Common Collective Trust Funds			
	BlackRock Inst Trust Co.	Long-term Govt/Credit Bond Index	\$ 14,000,000	\$ 14,010,980
	FIAM	FIAM Select International pool	3,857,245	7,471,379
*	Fidelity Mgmt Trust Co	FIAM Spartan 500 Index Pool - C	<u>31,040,724</u>	<u>60,466,075</u>
	Total Common Collective Trust Funds		<u>48,897,969</u>	<u>81,948,434</u>
	Partnership/Joint Venture Interest			
	Carlson Diamond	Black Diamond Arbitrage Offshore Fund	316,571	364,491
	MRP	Value Offshore Fund II	<u>713,907</u>	<u>713,907</u>
	Total Partnership and Joint Venture Funds		<u>1,030,478</u>	<u>1,078,398</u>
	Mutual and Money Market Funds			
	Dodge & Cox	International Stock Fund	6,069,965	7,394,951
	Loomis Sayles	Small Cap Growth Fund	4,665,186	4,937,625
	Fidelity	Money Market Portfolio	16,452,933	16,452,933
*	Fidelity	Mid Cap Index - Premium	<u>3,530,800</u>	<u>5,315,770</u>
	Total Mutual and Money Market Funds		<u>30,718,884</u>	<u>34,101,279</u>
	Separate Account - Ryan Labs			
	Receivable	Interest	<u>1,596,318</u>	<u>1,596,318</u>
	Corporate and Other Bonds:			
	Abbvie Inc	300,000 Par Value, 5.35% 03/15/2034	272,002	256,875
	Abbvie Inc	260,000 Par Value, 5.05% 03/15/2044	320,886	292,441
	Aercap Ireland Cap LTD	1,075,000 Par Value, 3.00% 10/29/2028	1,001,563	995,407
	Alexandria Real Est Equits Inc	490,000 Par Value, 2.950% 03/15/2034	411,237	403,394
	Allstate Corp	1,225,000 Par Value, 4.200% 12/15/2046	1,356,417	983,454
	Amazon.com Inc	1,220,000 Par Value, 2.500%, 6/3/2050	1,077,289	727,851
	Ameren III Co	2,065,000 Par Value, 3.700% 12/1/2047	1,811,905	1,555,563
	American Movil Sab DE CV	300,000 Par Value, 6.125% 03/30/2040	329,949	306,789
	American Electric Power Inc.	415,000 Par Value, 5.75% 11/01/2027	413,900	425,284
	American Express Co	1,055,000 Par Value, 5.282% 07/27/2029	1,081,718	1,066,867
	American Honda Finance Corp	675,000 Par Value, 4.400% 09/05/2029	678,048	656,320
	American Honda Finance Corp	540,000 Par Value, 5.850% 10/04/2030	577,296	562,502
	American Tower Corp	500,000 Par Value, 1.3000% 9/15/2025	507,600	488,112
	American Tower Corp	1,165,000 Par Value, 2.750% 01/15/2027	1,169,251	1,118,957
	Amgen Inc	960,000 Par Value, 2.300% 02/25/2031	853,162	817,372
	Analog Devices Inc	300,000 Par Value, 2.950% 10/01/2051	215,878	190,502
	Anheuser-Busch	805,000 Par Value, 5.450% 01/23/2039	805,231	806,725
	Anheuser-Busch	300,000 Par Value, 5.80% 01/23/2059	344,965	305,482
	Anheuser-Busch	278,000 Par Value, 4.90% 02/01/2046	279,166	252,804
	Apple Inc	500,000 Par Value, 3.45% 02/09/2045	426,688	383,019
	Apple Inc	300,000 Par Value, 4.100% 08/08/2062	271,396	238,856
	Apple Inc	1,365,000 Par Value, 4.375% 05/13/2045	1,647,979	1,204,935
	Ares Capital Corp	1,365,000 Par Value, 7.00% 01/15/2027	1,404,810	1,414,826
	Astrazeneca PLC	490,000 Par Value, 3.00% 05/28/2051	343,485	320,409
	AT&T Inc.	205,000 Par Value, 1.650% 2/1/2028	206,007	186,411
	AT&T Inc.	1,470,000 Par Value, 2.300% 03/01/2029	1,544,517	1,438,159

This schedule is presented in compliance with DOL filing requirements.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Avalonbay Communities Inc.	305,000 Par Value, 2.3000% 03/01/2030	\$ 298,988	\$ 268,378
	Avalonbay Communities Inc.	875,000 Par Value, 5.350% 06/01/2034	904,883	879,696
	Avis Budget RentCar	660,000 Par Value, 6.020% 2/20/2030	659,741	684,219
	Bank of America	2,225,000 Par Value, 2.087% 06/14/2029	2,148,101	2,019,339
	Bank of Nova Scotia	1,070,000 Par Value, 2.45% 02/02/2032	904,665	893,079
	BBCMS MTG TR	345,000 Par Value, 7.363626% 11/15/2056	355,867	379,834
	Benchmark 2020-IG2	510,000 Par Value, Monthly Floating 9/15/2048	538,818	288,766
	Benchmark 2020-IG3	300,000 Par Value, Monthly Floating 9/15/2048	322,980	205,990
	Berkshire Hathaway Energy Company	300,000 Par Value, 4.600% 05/01/2053	273,797	248,907
	BHP Billiton Fin USA LTD	910,000 Par Value, 4.9% 02/28/2033	928,111	893,961
	Black Diamond LTD	515,000 Par Value, Quarterly Floating 11/22/2034	515,000	514,979
	Blackstone Private Credit Fund	805,000 Par Value, 2.625% 12/15/2026	739,218	767,119
	BMO 2023-C7 MTG TR	575,000 Par Value, 6.160% 12/15/2056	592,247	608,868
	BNP Paribas	1,190,000 Par Value, Floating 01/13/2031	1,142,384	1,061,630
	Borgwarner Inc	835,000 Par Value, 4.950 08/15/2029	846,932	830,372
	Boston Gas Co	995,000 Par Value, 3.001% 08/01/2029	1,033,822	902,920
	BP Capital Markets	1,415,000 Par Value, 2.721% 01/12/2032	1,288,043	1,210,810
	BP Capital Markets	41,000 Par Value, 2.939% 06/04/2051	36,983	25,383
	Brean Asset Backed Securities Trust 2023	351,068 Par Value, Monthly Floating 01/25/2063	334,214	343,910
	Brean Asset Backed Securities Trust 2024	490,000 Par Value, 4.500% 03/25/2078	409,590	449,249
	Brighthouse Financial Inc	595,000 Par Value, 3.700% 06/22/2027	582,277	577,293
	Bristol-Myers Squibb Co	755,000 Par Value, 5.900% 11/15/2033	803,782	792,167
	Brookfield Fin Inc	175,000 Par Value, 4.25% 06/02/2026	166,548	173,842
	Burlington Northn Santa Fe LLC	300,000 Par Value, 4.400% 03/15/2042	283,460	260,166
	Burlington Northn Santa Fe LLC	885,000 Par Value, 5.150% 09/01/2043	1,071,652	846,975
	CA ST	280,000 Par Value, 7.300% 10/01/2039	400,478	318,810
	Cameron LNG LLC	950,000 Par Value, 2.902% 07/15/2031	885,431	827,212
	Canadian National Railway	584,000 Par Value, 3.650% 02/03/2048	528,589	438,960
	Canadian National Railway	300,000 Par Value, 4.400% 08/05/2052	282,952	250,911
	Capital One Financial Group	830,000 Par Value, Floating 05/10/2028	803,785	827,329
	Centerpoint Energy RES Corp	785,000 Par Value, 1.750% 10/01/2030	692,443	658,063
	CF Hippolyta Issuer LLC	306,295 Par Value, 1.530% 03/15/2061	306,237	290,378
	Chubb Ina Holdings Inc	410,000 Par Value, 5.00% 03/15/2034	424,190	404,894
	Cigna Corp	713,000 Par Value, 2.4000% 03/15/2030	673,796	623,969
	Cisco Systems Inc	75,000 Par Value, 5.500% 02/26/2034	74,924	74,729
	Cisco Systems Inc	1,010,000 Par Value, 5.500% 01/15/2040	1,247,809	1,018,239
	Citigroup Inc.	815,000 Par Value, 2.666% 01/29/2031	793,843	721,072
	Citigroup Inc.	300,000 Par Value, 2.666% 01/24/2039	268,815	250,078
	CNO Global Funding	270,000 Par Value, 1.650% 01/06/2025	253,391	269,899
	Comcast Corp New	555,000 Par Value, 3.400% 07/15/2046	595,906	389,715
	Comcast Corp New	1,885,000 Par Value, 4.250% 01/15/2033	1,860,781	1,758,638
	Commonwealth Edison Co	300,000 Par Value, 3.000% 03/01/2050	212,641	193,427
	Commonwealth Edison Co	815,000 Par Value, 3.700% 03/1/2045	650,158	621,831
	Conagra Brands Inc	1,845,000 Par Value. 1.375% 11/01/2027	1,704,918	1,675,003

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GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Conocophillips Co	520,000 Par Value, 5.300% 05/15/2053	\$ 514,060	\$ 481,055
	Consolidated Edison Co of NY	1,105,000 Par Value, 4.450% 03/15/2044	1,181,517	943,763
	Copt Defense Properties LP	990,000 Par Value, 2.000% 01/15/2029	914,414	871,005
	Corebridge Financial Inc	970,000 Par Value, Floating 12/15/2052	993,363	995,433
	Credit Acceptance Auto Loan	301,918 Par Value, 1.740% 12/16/2030	301,847	301,327
	CVS Health Corp	995,000 Par Value, 1.7500% 8/21/2030	868,365	809,951
	DB Master Fin	344,350 Par Value, 2.045% 11/20/2051	344,350	325,918
	Deere & Co	80,000 Par Value, 3.100% 04/15/2030	91,424	73,584
	Deere John Capiral Corp	805,000 Par Value, 5.050% 06/12/2034	823,202	801,469
	DTE Electric Co	489,000 Par Value, 2.25% 03/01/2030	492,469	431,009
	DTE Electric Co	835,000 Par Value, 2.950% 03/01/2050	858,743	542,399
	DTE Electric Co	300,000 Par Value, 3.750% 08/15/2047	247,972	225,804
	Duke Energy Corp New	1,445,000 Par Value, 4.300% 03/15/2028	1,440,914	1,422,413
	Duke Energy Ind Inc	615,000 Par Value, 3.750% 05/15/2046	482,260	458,548
	Duke University	300,000 Par Value, 2.832% 10/01/2055	216,182	186,332
	Elevance Health	1,215,000 Par Value, 4.100% 05/15/2032	1,178,232	1,123,439
	Eli Lilly & Co	360,000 Par Value, 3.95% 03/15/2049	286,790	281,624
	Enel Finance INTL NV	865,000 Par Value, 3.500% 04/06/2028	885,538	823,901
	Energy Transfer LP	1,705,000 Par Value, 3.900% 07/15/2026	1,806,209	1,682,574
	Energy Transfer LP	400,000 Par Value, 6.400% 12/01/2030	429,520	422,653
	Enterprise Prods Oper LLC	905,000 Par Value, 2.800%, 01/31/2030	842,731	818,133
	Equinor ASA	950,000 Par Value, 3.950%, 05/15/2043	855,020	778,251
	Eversource Energy	350,000 Par Value, 2.900%, 03/01/2027	338,881	335,959
	Exeter Automobile Receivables TR 2021-3	1,350,000 Par Value, 4.560% 07/17/2028	1,343,672	1,345,205
	Exxon Mobil Corp	300,000 Par Value, 2.995% 08/16/2039	248,844	226,889
	Exxon Mobil Corp	365,000 Par Value, 3.095% 08/16/2049	262,775	243,158
	Finance Amer Structured Secs TR JR2 SER	221,491 Par Value, 3.000% 09/25/2061	202,252	215,785
	Florida PWR & LT	685,000 Par Value, 4.05% 10/01/2044	674,690	557,941
	Florida PWR & LT	620,000 Par Value 5.250% 02/01/2041	668,205	601,226
	FREMF 2015-K47 C CSTR	390,000 Par Value, Monthly Floating 06/25/2048	359,303	387,634
	FREMF 2018-K80 MTG TR C CSTR	500,000 Par Value, Monthly Floating 08/25/2050	513,887	475,803
	FREMF 2019-K103 MT CSTR	260,000 Par Value, Monthly Floating 12/25/2051	253,581	231,090
	Gallagher (Authur J.) & Co	455,000 Par Value ,5.150% 02/15/2035	449,231	443,604
	General Dynamics Corp	400,000 Par Value , 2.850% 06/01/2041	311,420	285,195
	General Dynamics Corp	540,000 Par Value , 4.250% 04/01/2040	592,288	471,285
	General MTRS FINL Co	1,275,000 Par Value, 4.300% 04/06/2029	1,201,844	1,231,269
	Georgia Power Co	215,000 Par Value, 2.650% 09/15/2029	231,723	195,006
	Gilead Sciences Inc	330,000 Par Value, 4.000% 09/01/2036	335,841	291,086
	Goldman Sachs	1,985,000 Par Value, Floating 01/27/2032	1,780,107	1,638,137
	Haleon US Capital LLC	1,265,000 Par Value, 3.625% 03/24/2032	1,183,255	1,145,461
	HCA Inc	1,220,000 Par Value, 5.200%, 06/01/2028	1,249,289	1,222,990
	Home Depot Inc	1,285,000 Par Value, 4.500% 12/06/2048	1,363,319	1,097,645
	Honeywell Intl Inc	530,000 Par Value, 5.250% 03/01/2054	531,829	496,335
	Hyundai Capital	1,130,000 Par Value, 5.680% 06/26/2028	1,159,592	1,146,408

This schedule is presented in compliance with DOL filing requirements.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	IBM Corporation	300,000 Par Value, 2.850% 05/15/2040	\$ 233,726	\$ 213,712
	Intel	1,005,000, Par Value, 3.734% 12/08/2047	983,589	662,797
	Intercontinental Exchange Inc	525,000 Par Value, 3.50% 09/15/2040	846,968	782,399
	Johnson & Johnson	525,000, Par Value, 3.50% 01/15/2048	489,309	394,367
	Johnson & Johnson	805,000, Par Value, 3.55%, 03/01/2036	778,888	702,951
	JPMC Co	120,000 Par Value, 2.069% 06/01/2029	120,554	109,039
	JPMC Co	300,000 Par Value, 3.157% 04/22/2042	242,041	220,278
	JPMC Co	1,850,000 Par Value, 3.882% 07/24/2038	1,815,825	1,578,402
	Katayma Clo I LTD	825,000 Par Value, Floating 10/20/2036	825,000	831,933
	Kimco Realty Corp	445,000 Par Value, 2.800% 10/01/2026	450,564	430,424
	Kimco Realty Corp	680,000 Par Value, 6.400% 03/01/2034	759,762	723,628
	Kinder Morgan Inc.	655,000 Par Value, 5.100% 08/01/2029	673,595	654,910
	Lockheed Martin Corp	300,000 Par Value 4.090% 09/15/2052	267,178	237,300
	Magnetite XIX	850,000 Par Value, Quarterly Floating, 04/17/2034	850,000	851,162
	Manufacturer & Trader	1,820,000 Par Value, 3.40% 08/17/2027	1,784,281	1,751,517
	Manulife Financial Corp	1,035,000 Par Value, Floating, 02/24/2032	1,049,961	1,009,287
	Marsh & McLennan Cos Inc	300,000 Par Value, 4.750% 03/15/2039	299,524	277,722
	MasterCard Inc.	515,000 Par Value, 3.650% 06/01/2049	564,411	388,518
	Mayo Clinic	300,000 Par Value, 3.196% 11/15/2061	221,579	193,370
	Memorial Sloan Kttrng Cntr Ctr	300,000 Par Value, 4.125% 07/01/2052	274,233	242,840
	Merck & Co Inc	300,000 Par Value, 4.150% 05/18/2043	277,262	251,213
	Meta Platforms Inc	300,000 Par Value, 5.750% 05/15/2063	335,690	302,924
	Metropolitan Life Gbl	890,000 Par Value, 3.050%, 06/17/2029	853,486	822,716
	Microsoft Corp	255,000 Par Value 2.5250% 06/01/2050	234,466	138,464
	Microsoft Corp	955,000 Par Value, 2.921% 03/17/2052	953,515	630,905
	MidAmerican Energy	480,000 Par Value, 4.25% 07/15/2049	392,366	389,061
	MidAmerican Energy	220,000, Par Value, 4.800% 09/15/2043	262,282	197,534
	Mill City Mortgage Loan Trust	245,000 Par Value, 3.2500%, 07/25/2059	247,450	226,412
	Morgan Stanley	365,000 Par Value, 1.928% 04/28/2032	291,471	298,546
	Morgan Stanley	400,000 Par Value, 4.457% 04/22/2039	385,646	358,061
	Motorola Solutions Inc	1,175,000 Par Value, 5.400% 04/15/2034	1,222,956	1,175,475
	National Rural Utl Corp	920,000 Par Value, 3.900% 11/01/2028	1,055,348	888,313
	National Rural Utl Corp	700,000 Par Value, 5.800% 01/15/2033	761,054	724,137
	Natwest GRP	890,000 Par Value, Floating, 06/14/2027	861,695	849,233
	Nevada Power Co	440,000 Par Value, 3.700% 05/01/2029	467,869	419,811
	New York & Presbyterian Hosp	300,000 Par Value, 2.256%, 08/01/2040	218,426	197,932
	New York Life Insurance	535,000 Par Value, 3.750%, 05/15/2050	588,310	389,553
	Northrop Grumman Corp	485,000 Par Value, 3.250%, 01/15/2028	493,862	463,618
	Nstar Elec Co	300,000, Par Value, 4.400% 03/01/2044	275,487	253,249
	Oge Energy Corp	700,000, Par Value, 5.450% 05/15/2029	723,401	711,452
	Omnicom Group Inc	1,050,000, Par Value, 2.600% 08/01/2031	944,681	897,594
	Oncor Elec Delivery Co	300,000 Par Value, 3.100% 09/15/2049	217,672	196,390
	Oncor Elec Delivery Co	750,000 Par Value, 3.800% 06/01/2049	814,414	565,498

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GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Oracle Corp	340,000 Par Value, 4.700% 09/27/2034	\$ 339,007	\$ 322,234
	Oracle Corp	430,000 Par Value, 6.500% 04/15/2038	622,684	462,076
	O'Reilly Automotive Inc	1,005,000 Par Value, 1.750%, 03/15/2031	912,529	824,247
	Pacific Gas & Electric Co	800,000 Par Value, 3.000%, 06/15/2028	761,146	749,615
	Paypal Hldgs Inc	575,000 Par Value, 5.150%, 06/01/2034	585,714	571,299
	Penske Truck Leasing Co	615,000 Par Value, 1.700%, 06/15/2026	599,471	587,118
	Pepsico Inc	490,000 Par Value, 2.875% 10/15/2049	323,830	319,565
	Pfizer Inc	1,235,000 Par Value, 5.300% 05/19/2053	1,244,492	1,156,359
	Phillip Morris Intl Inc	825,000 Par Value, 4.750% 11/01/2031	811,562	806,806
	Private Export Funding Corp	205,000 Par Value, 4.600% 02/15/2034	205,068	201,052
	Prologics LP	290,000 Par Value, 1.250% 10/15/2030	245,174	237,699
	Prologics LP	905,000 Par Value, 5.000% 03/15/2034	910,802	883,876
	Providence St Joseph Health Obligated G	300,000 Par Value, 3.744% 10/01/2047	244,731	221,487
	Prudential Finl Inc	300,000 Par Value, 3.000% 03/10/2040	554,281	476,053
	Prudential Finl Inc	645,000 Par Value, 4.418% 303/27/2048	271,336	247,633
	Public Service Electric	300,000 Par Value, 2.050% 08/01/2050	180,174	157,886
	Public Service Electric	185,000 Par Value, 3.200% 05/15/2029	170,191	173,737
	RR 7 LTD	595,000 Par Value, Quarterly Floating, 01/15/2037	595,000	596,269
	RTX Corp	185,000 Par Value, 4.70% 12/15/2041	287,508	217,459
	RTX Corp	310,000 Par Value, 6.000% 03/15/2031	338,343	325,200
	Santander Drive Auto			
	Receivables TR 2022	935,000 Par Value, 4.490%, 08/15/2029	934,821	932,983
	Receivables TR 2022	475,000 Par Value, 5.000%, 11/15/2029	474,787	477,239
	Santander Drive Auto			
	Receivables TR 2022	285,936 Par Value, 8.140%, 04/18/2028	285,923	290,435
	Receivables TR 2022	655,000 Par Value, 5.140%, 02/17/2032	654,944	648,378
	Santander Holdgs USA Inc	950,000 Par Value, 3.244%, 10/05/2026	916,997	921,710
	Santander UK Group Holdings PLC	380,000 Par Value, 1.532%, 08/21/2026	363,996	371,307
	Scott Trust 2023-SFS	270,000 Par Value, 5.90975%, 03/10/2040	270,000	274,108
	SFAVE 15-5AVE CSTR	280,000 Par Value, Monthly Floating, 01/05/2043	288,094	234,302
	Shops 2016-CSTL D CSTR	370,000 Par Value, Monthly Floating 07/05/2036	337,871	356,021
	Simon Property Group	125,000 Par Value, 3.375% 06/15/2027	125,003	121,541
	Simon Property Group	610,000 Par Value, 3.800% 07/15/2050	417,142	449,038
	SLG Office Tr	810,000 Par Value, 2.800% 07/15/2041	839,231	680,195
	SOHO China	430,000 Par Value, Monthly Floating 08/10/2038	431,596	323,423
	Sound PT Clo	770,000 Par Value, Quarterly Floating, 10/20/2030	770,963	771,036
	Southern California Edison Co	360,000 Par Value, 4.875%, 02/01/2027	360,648	361,112
	Southern California Edison Co	485,000 Par Value, 5.150%, 06/01/2029	505,996	487,839
	Stanford Healthcare	300,000 Par Value, 3.795% 11/15/2048	260,840	230,523
	State Street Corp	890,000 Par Value, 5.159% 05/18/2034	903,468	884,347
	Sumitomo Mitsui Finl Group Inc	895,000 Par Value, 5.520%, 01/13/2028	907,516	909,220

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GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	T-Mobile	575,000 Par Value, 5.150% 04/15/2034	\$ 577,392	\$ 565,714
	Telefonica Emisiones	689,000 Par Value, 4.103% 03/08/2027	720,960	678,088
	Texas Instruments Inc	300,000 Par Value, 3.875% 03/15/2039	282,112	257,575
	Toronto Dominion Bank	930,000 Par Value, 4.456% 06/08/2032	902,936	881,215
	Totalenergies Capital SA	600,000 Par Value, 4.724% 09/10/2034	593,943	576,729
	Toyota Motor Credit Corp	940,000 Par Value, 2.150% 02/13/2030	850,869	823,701
	Travelers Cos Inc	370,000 Par Value, 4.050% 03/07/2048	386,147	296,112
	United Parcel	1,040,000 Par Value, 3.75% 11/15/2047	903,159	787,010
	United States Treasury Bond	1,350,000 Par Value, 4.125% 08/15/2044	1,334,851	1,221,709
	United States Treasury Bond	475,000 Par Value, 4.500% 02/15/2044	469,828	453,373
	United States Treasury Bond	1,620,000 Par Value, 4.625% 05/15/2054	1,766,398	1,573,988
	United States Treasury Bond	205,000 Par Value, 4.625% 11/15/2044	206,473	198,770
	United Health Group	295,000, Par Value, 4.250% 06/15/2048	245,664	236,685
	United Health Group	1,380,000 Par Value, 4.625% 07/15/2035	1,450,251	1,302,984
	United Health Group	230,000 Par Value, 6.625% 11/15/2037	294,483	252,845
	US Bancorp	1,190,000 Par Value, 4.548% 07/22/2028	1,171,383	1,180,264
	Ust Notes	2,125,000 Par Value, 3.375% 09/15/2027	2,117,705	2,076,592
	Ust Notes	385,000 Par Value, 3.5% 09/30/2029	377,934	370,445
	Ust Notes	2,875,000 Par Value, 3.625% 08/31/2029	2,892,716	2,783,718
	Ust Notes	2,720,000 Par Value, 3.875% 08/15/2034	2,753,608	2,573,885
	Ust Notes	993,000 Par Value, 4.125% 11/30/2029	985,147	981,718
	Ust Coup	1,570,000 Par Value, 0.000% 02/15/2047	590,979	515,771
	Ust Coup	2,350,000 Par Value, 0.000% 02/15/2048	845,742	736,329
	Ust Coup	1,230,000 Par Value, 0.000% 02/15/2049	422,985	365,989
	Ust Coup	1,270,000 Par Value, 0.000% 02/15/2050	421,843	363,130
	Ust Coup	1,845,000 Par Value, 0.000% 02/15/2051	595,603	503,735
	Ust Coup	2,155,000 Par Value, 0.000% 02/15/2053	672,015	559,445
	Ust Coup	520,000 Par Value, 0.000% 05/15/2049	163,862	153,413
	Ust Coup	2,855,000 Par Value, 0.000% 05/15/2054	844,719	722,754
	Ust Coup	1,000,000 Par Value, 0.000% 08/15/2048	362,180	305,251
	Ust Coup	660,000 Par Value, 0.000% 08/15/2054	210,976	165,425
	Ust Coup	1,800,000 Par Value, 0.000% 11/15/2043	793,674	693,949
	Ust Coup	2,000,000 Par Value, 0.000% 11/15/2045	1,081,698	698,650
	Ust Coup	3,200,000 Par Value, 0.000% 11/15/2046	1,213,004	1,065,763
	Ust Coup	1,080,000 Par Value, 0.000% 11/15/2047	605,631	342,774
	Ust Coup	1,765,000 Par Value, 0.000% 11/15/2048	973,450	533,538
	Ust Coup	1,700,000 Par Value, 0.000% 11/15/2049	621,367	489,424
	Ust Coup	1,250,000 Par Value, 0.000% 11/15/2050	462,775	344,874
	Ust Coup	2,300,000 Par Value, 0.000% 11/15/2051	725,330	612,930
	Ust Coup	3,015,000 Par Value, 0.000% 02/15/2046	1,187,126	1,040,047
	Ust Coup	950,000 Par Value, 0.000% 02/15/2047	438,938	305,094
	Ust Coup	2,695,000 Par Value, 0.000% 02/15/2044	992,316	1,025,670
	Ust Coup	3,740,000 Par Value, 0.000% 02/15/2045	1,529,789	1,356,651

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GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Ust Coup	1,585,000 Par Value, 0.000% 05/15/2043	\$ 659,265	\$ 626,006
	Ust Coup	2,130,000 Par Value, 0.000% 05/15/2044	824,374	801,539
	Ust Coup	1,200,000 Par Value, 0.000% 08/15/2045	589,620	445,381
	Ust Coup	900,000 Par Value, 0.000% 11/15/2044	338,408	330,362
	Verizon Comm	265,000 Par Value, 2.55% 03/21/2031	263,911	228,273
	Verizon Comm	617,000 Par Value, 4.016% 12/03/2029	600,814	592,200
	Verizon Comm	1,280,000 Par Value, 4.400% 11/01/2034	1,372,661	1,185,877
	VICI Properties LP	300,000 Par Value, 5.125% 11/15/2031	298,980	292,637
	Virginia Electric and Power Co	490,000 Par Value, 5.300% 08/15/2033	494,720	487,565
	VMWare Inc	285,000 Par Value, 4.500% 05/15/2025	318,865	284,583
	Vulcan Materials Co	75,000 Par Value, 5.35% 12/01/2034	74,918	74,774
	Walmart	300,000 Par Value, 4.0500% 06/29/2048	389,346	246,427
	Walmart	365,000 Par Value, 4.500% 09/09/2052	326,712	318,383
	Wells Fargo & Co	1,680,000, Par Value, 4.300% 07/22/2027	1,774,174	1,657,529
	Wells Fargo Coml Mtg	70,000 Par Value, Monthly Floating 12/15/2059	71,339	66,654
	Westlake Automobile Receivables	515,000 Par Value, 5.480% 09/15/2027	514,999	517,709
	Dreyfus Government Cash Mgmt Instl	513592 Par Value, 0.000%	846,537	846,537
	PNC Bank NA Pittsburgh PA	1,445,000 Par Value, 4.050%, 07/26/2028	1,445,044	1,395,941
	Truist Bank	1,280,000 Par Value, Floating, 09/17/2029	1,285,522	1,248,008
	Total Corporate and Other Bonds		176,699,331	161,713,206
	Total Separate			
	Account – Ryan Labs		178,295,649	163,309,524
	Separate Account – Victory Capital			
	Receivables	Receivables	10,377	10,377
	Common Stock:			
	AGNG Investment Corp	3,418 shares	28,985	31,480
	Alight	5,460 shares	50,005	37,783
	American Eagle Outfitters Inc	1,747 Shares	42,536	29,122
	American Woodmark	385 Shares	35,438	30,619
	Ameris Bancorp	783 shares	24,954	48,992
	Andersons Inc	606 shares	28,927	24,555
	Arcbest Corp	254 shares	22,834	23,703
	Artisan Partners Asset Management	740 shares	33,420	31,857
	Atlantic UN Bankshares Corp	1,237 shares	48,474	46,858
	Atlas Energy Solutions	1,593 shares	30,197	35,333
	Avient Corp	761 shares	32,842	31,094
	Banc Hawaii Corp	788 shares	43,760	56,137
	Bank Ozk	830 shares	37,454	36,960
	Banner Corp	742 shares	33,536	49,543
	Belden Inc	262 shares	15,427	29,504
	Blooming Brands	1,767 shares	27,752	21,575

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	Bluelinx Holdings Inc	302 shares	\$ 34,239	\$ 30,852
	Brighthouse Financial	700 shares	34,043	33,628
	Brinks Co	288 shares	21,156	26,718
	Broadstone Net Lease Inc	2688 shares	44,383	42,632
	Brookdale Senior Living Inc	3,811 shares	30,194	19,169
	Buckle Inc	527 shares	20,191	26,777
	California Res Corp	675 shares	37,106	35,026
	CareTrust REIT Inc	1,344 shares	30,070	36,355
	Chefs Warehouse Inc	779 shares	28,727	38,420
	Cinemark Holdings	998 shares	14,188	30,918
	Civitas Resources Inc	686 shares	39,267	31,467
	CNO Financial Group Inc	1,013 shares	26,245	37,694
	Collegium Pharmaceutical Inc	665 shares	14,614	19,052
	Columbus McKinnon Corp NY	1,171 shares	39,213	43,608
	Commercial Metals Co	799 shares	31,923	39,630
	Consol Energy Inc	354 shares	33,556	37,765
	Curblin Properties Corp	1,837 shares	41,153	42,655
	Cushman & Wakefield Plc	3,681 shares	39,328	48,147
	CVB Financial Corp	1,635 shares	37,571	35,005
	Diamondrock Hospitality Co	3314 shares	31,175	29,925
	Diodes Inc	582 shares	43,012	35,892
	Douglas Emmett Inc Reit	2,511 shares	37,797	46,604
	Dynex Cap Inc	3,161 shares	41,234	39,987
	Easterly Government Properties	2,940 shares	52,020	33,399
	Edgewell Personal Care Co	749 shares	31,281	25,166
	Essential Properties Realty Trust	1,418 shares	29,325	44,355
	Extreme Networks Inc	1,418 shares	26,596	33,731
	First Bancorp NC	930 shares	34,982	40,892
	First Intst Bancsyst Inc Cl A	800 shares	27,463	25,976
	First Merchants Corp	1,270 shares	48,478	50,660
	Flagstar Financial Inc	4,285 shares	45,385	39,979
	G-III Apparel Group LTD	762 shares	24,684	24,856
	Glacier Bancorp Inc	1,123 shares	39,027	56,397
	Goodyear Tire & Rubber Co	3,993 shares	47,870	35,937
	Greenbrier Companies Inc	649 shares	30,249	39,583
	Grocery Outlet Holding Corp	1,405 shares	34,185	21,932
	Haemonetics Corp Mass	421 shares	29,094	32,872
	Hancock Whitney Corp	831 shares	39,186	45,472
	Harmonic Inc	1,926 shares	19,580	25,481
	Hub Group Inc Cl A	748 shares	19,830	33,331
	ICU Medical Inc	222 shares	25,848	34,448
	Independent Bank Corp Mass	691 shares	36,413	44,355
	Ingevity Corp	792 shares	36,508	32,274
	Iridium Communications Inc	1,144 shares	34,140	33,199

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SPONSOR'S EIN# 43-1537250
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SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

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	Jack In The Box Inc	653 shares	\$ 35,475	\$ 27,191
	Kemper Corp	419 shares	21,006	27,838
	Knowles Corp	1,586 shares	26,977	31,609
	Korn Ferry	585 shares	33,638	39,458
	Kulicke & Soff Industries Inc	652 shares	33,093	30,422
	Ladder Capital Corp CI A	2,567 shares	34,090	28,725
	Lions Gate Entertainment	3,067 shares	31,894	23,156
	Livanova PLC	793 shares	41,733	36,724
	Lumen Technologies Inc	3,408 shares	22,693	18,096
	LXP Industrial Trust REIT	4,210 shares	44,452	34,185
	Magnite Inc	1,771 shares	19,236	28,194
	Manitowoc Co Inc	1,233 shares	13,274	11,257
	Manpowergroup Inc	370 shares	26,505	21,356
	Marriott Vacations	524 shares	43,681	47,055
	Maxlinear Inc	1,108 shares	20,962	21,916
	MGIC Investment Corp	1,753 shares	21,446	41,564
	Minerals Technologies Inc	459 shares	39,188	34,980
	MRC Global Inc	2,132 shares	26,344	27,247
	Murphy Oil Corp	1,087 shares	41,371	32,893
	Myers Industries	1,540 shares	30,083	17,002
	National Fuel Gas Co NJ	670 shares	35,324	40,656
	NBT Bancorp Inc	897 shares	33,815	42,841
	Newell Brands Inc	3,664 shares	29,313	36,493
	Noble Corp PLC	743 shares	26,964	23,330
	Northwest Bancshares Inc	3,578 shares	44,699	47,194
	Northwestern Energy Group Inc	920 shares	50,444	49,183
	One Gas Inc	670 shares	48,271	46,398
	Orion SA	1,840 shares	41,783	29,054
	Pacific Premier Bancorp Inc	1,939 shares	57,277	48,320
	Perrigo Co PLC	881 shares	31,764	22,651
	Plexus Corp	205 shares	15,704	32,078
	Portland General Electric	1,133 shares	52,806	49,421
	Prestige Consumer Healthcare	531 shares	31,361	41,466
	Prosperity Bancshares	492 shares	33,050	37,072
	PVH Corp	328 shares	25,029	34,686
	RLI Corp	181 shares	12,316	29,834
	Ryder System Inc	215 shares	20,023	33,724
	Ryerson Holding Corp	1,197 shares	29,188	22,156
	Sabra Healthcare REIT Inc	2,133 shares	35,326	36,944
	Sally Beauty Hldgs Inc	3,168 shares	34,633	33,106
	Sandy Spring Bancorp Inc	795 shares	19,079	26,799
	Sanmina Corp	525 shares	25,016	39,727

This schedule is presented in compliance with DOL filing requirements.

GALILEO & WORLDSPAN U.S. LEGACY PENSION PLAN
SPONSOR'S EIN# 43-1537250
PLAN NUMBER: 004
SCHEDULE H, LINE 4(i) –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identify of Issuer, Borrower Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Science Applications International Corp	234 shares	\$ 27,529	\$ 26,157
	Sealed Air Corp	680 shares	23,138	23,004
	Sila Realty Trust Inc	1,114 shares	28,165	27,092
	Skyward Specialty Insurance Group Inc	851 shares	25,520	43,010
	Skywest Inc	399 shares	29,213	39,952
	Southstate Corp	635 shares	47,219	63,170
	Spire Inc	687 shares	39,460	46,599
	Stag Industrial Inc	686 shares	21,548	23,201
	Steelcase Inc Class A	1,000 shares	11,651	11,820
	Steven Madden LTD	563 shares	18,263	23,939
	Stewart Information Services	473 shares	33,600	31,923
	Summit Hotel Properties Inc	4,211 shares	48,721	28,845
	Supernus Pharmaceuticals Inc	1,168 shares	32,056	42,235
	Surgery Partners Inc	1,334 shares	39,012	28,241
	Synaptic Inc	486 shares	44,740	37,092
	Talos Energy Inc	2,735 shares	32,861	26,557
	Terex Corp	529 shares	27,512	24,453
	Timken Co	493 shares	37,572	35,185
	Titan International Inc	3,146 shares	22,467	21,361
	Tronox Holdings PLC	2,446 shares	30,961	24,631
	TTM Technologies Inc	1,388 shares	27,627	34,353
	TXNM Energy Inc	1,122 shares	42,436	55,169
	Uranium Energy Corp	4,369 shares	32,632	29,229
	V2X Inc	488 shares	26,229	23,341
	Valley Natl Bancorp	5,532 shares	47,326	50,120
	Veeco Instrument	775 shares	19,938	20,770
	Veris Residential Inc	2,022 shares	40,510	33,626
	Veritex Holdings Inc	1,656 shares	32,938	44,977
	Victoria's Secret & Co	765 shares	19,130	31,686
	Virtus Investment Partners	153 shares	27,749	33,749
	Visteon Corp	374 shares	35,851	33,181
	Vital Energy Inc	760 shares	32,895	23,499
	Wabash National Corp	1,476 shares	26,070	25,284
	Dreyfus Government Cash Mgmt	30,178 shares	30,178	30,178
	Total Common Stock		<u>4,402,113</u>	<u>4,608,966</u>
	Total Separate Account – Victory Capital		<u>4,412,490</u>	<u>4,619,343</u>
	TOTAL INVESTMENTS		<u>\$ 262,641,563</u>	<u>\$ 285,056,978</u>

*A party-in-interest for which a statutory exemption exists

This schedule is presented in compliance with DOL filing requirements.

Schedule SB, line 32 - Schedule of Amortization Bases

Shortfall amortization charge

The total shortfall amortization charge is the sum of the individual shortfall amortization installments for each plan year since the IRC Section 430 changes made by ARPA took effect for the plan. Although an individual shortfall amortization installment can be negative, the combined shortfall amortization charge cannot be less than \$0.

Shortfall bases				
Year established	Outstanding balance	Years remaining	2024 installment	
2023	\$ 60,099,679	14	\$ 5,736,087	
2024	21,617,431	15	1,966,764	
Total	\$ 81,717,110		\$ 7,702,851	

Schedule SB, line 24 — Change in Actuarial Assumptions

- The expense component of normal cost was updated from \$3,710,000 to \$3,250,000 to reflect our expectations for the current plan year.
- The expected investment return increased from 4.62% for 2022 to 5.95% for 2023.
- The demographic assumptions for withdrawal, retirement, forms of payment, terminated vested benefit commencement age, and spouse assumptions were analyzed and updated based on an experience study conducted in 2024.