

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES
1b Three-digit plan number (PN): 002
1c Effective date of plan: 05/16/2016
2a Plan sponsor's name (employer, if for a single-employer plan): INGEVITY CORPORATION
2b Employer Identification Number (EIN): 47-4027764
2c Plan Sponsor's telephone number: 800-458-4034
2d Business code (see instructions): 325100

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	399
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)	299
	6a(2)	271
	6b	52
	6c	58
	6d	381
	6e	8
	6f	389
	6g(1)	
6g(2)		
6h		9
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

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>INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>INGEVITY CORPORATION</u>	D Employer Identification Number (EIN) <u>47-4027764</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 checked="" type="checkbox"/> 101-500 <input 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>26589386</u>
	b Actuarial value	2b	<u>28857915</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>46</u>	<u>9593812</u>
	b For terminated vested participants	<u>54</u>	<u>2043303</u>
	c For active participants	<u>299</u>	<u>16997643</u>
	d Total	<u>399</u>	<u>28634758</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>5.24 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>707402</u>
	b Expected plan-related expenses	6b	<u>394197</u>
	c Target normal cost	6c	<u>1101599</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>DEBBIE P. SICHKO, E.A., F.S.A.</u> Type or print name of actuary <u>USI CONSULTING GROUP</u> Firm name <u>1001 LAKESIDE AVENUE</u> <u>SUITE 1200</u> <u>CLEVELAND, OH 44114</u> Address of the firm	<u>10/02/2025</u> Date <u>23-07411</u> Most recent enrollment number <u>216-343-0225</u> Telephone number (including area code)
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If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	1202473
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	375302
9	Amount remaining (line 7 minus line 8)	0	827171
10	Interest on line 9 using prior year's actual return of <u>11.39</u> %	0	94215
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.37</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	921386

Part III Funding Percentages			
14	Funding target attainment percentage	14	92.91 %
15	Adjusted funding target attainment percentage	15	92.91 %
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	90.23 %
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		
01/15/2025	228000	0					
04/14/2025	517684	0					
07/14/2025	293664	0					
09/05/2025	300000	0					
			Totals ▶	18(b)	1339348	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 1248041	
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 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 4
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

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

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

Part VIII Minimum Required Contribution For Current Year				
31 Target normal cost and excess assets (see instructions):				
a Target normal cost (line 6c)				31a 1101599
b Excess assets, if applicable, but not greater than line 31a				31b 0
32 Amortization installments:	Outstanding Balance		Installment	
a Net shortfall amortization installment	2130542		205517	
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 1307116
	Carryover balance	Prefunding balance	Total balance	
35 Balances elected for use to offset funding requirement	0	921386	921386	
36 Additional cash requirement (line 34 minus line 35)				36 385730
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)				37 1248041
38 Present value of excess contributions for current year (see instructions)				
a Total (excess, if any, of line 37 over line 36)				38a 862311
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....				38b 862311
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)				39 0
40 Unpaid minimum required contributions for all years				40 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)				
41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input 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 INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 INGEVITY CORPORATION	D Employer Identification Number (EIN) 47-4027764	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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)

ROCATON INVESTMENT ADVISORS LLC

04-3638035

(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 28 50	NONE	56250	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)

USI CONSULTING GROUP

06-1053228

(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	46740	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)

FORVIS MAZARS, LLP

44-0160260

(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	NONE	23625	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)

PRINCIPAL FINANCIAL GROUP, INC.

42-1522034

(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?
15 21 25 50 51 59 63 64	TRUSTEE	11589	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)

PRUDENTIAL TRUST COMPANY

23-6994310

(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?
28 50 51	NONE	7307	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)
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a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES</u>	B Three-digit plan number (PN)	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>INGEVITY CORPORATION</u>	D Employer Identification Number (EIN) <u>47-4027764</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>20 YR US TREAS. STRPS INDX NL(CMCA)</u>	b Name of sponsor of entity listed in (a): <u>STATE STREET BANK AND TRUST COMPANY</u>	
c EIN-PN <u>90-0337987-169</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>7695546</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>US LONG DURATION CORPORATE BOND FD</u>	b Name of sponsor of entity listed in (a): <u>PRUDENTIAL TRUST COMPANY</u>	
c EIN-PN <u>23-6994310-159</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>2602067</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WESTERN ASSET LONG DURATION CR. CL</u>	b Name of sponsor of entity listed in (a): <u>HAND BENEFITS & TRUST COMPANY</u>	
c EIN-PN <u>74-2008758-155</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>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MSCI ACWI IMI INDEX NL FUND</u>	b Name of sponsor of entity listed in (a): <u>STATE STREET GLOBAL ADVISORS</u>	
c EIN-PN <u>90-0337987-161</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>10264834</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)

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 INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 INGEVITY CORPORATION	D Employer Identification Number (EIN) 47-4027764

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
a Total noninterest-bearing cash	1a	75836	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	1339348
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	4755	5389
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	118019	90604
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	16590637	20562448
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	7936736	3296152
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	1863403	2007818

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	26589386	27301759
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	0	5243
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	5243
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	26589386	27296516

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)	1339348	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1339348
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	8777	
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	54745	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	38677130	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	37265497	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-841039	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		251
d Total income. Add all income amounts in column (b) and enter total.....	2d		1973715

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	801479	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		801479
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	23625	
(5) Investment advisory and investment management fees	2i(5)	69139	
(6) Bank or trust company trustee/custodial fees	2i(6)	11589	
(7) Actuarial fees	2i(7)	46740	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)	314013	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		465106
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1266585

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		707130
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: **FORVIS MAZARS, LLP**

(2) EIN: **44-0160260**

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		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 554940.

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>INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES</u>	B Three-digit plan number (PN)	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>INGEVITY CORPORATION</u>	D Employer Identification Number (EIN) <u>47-4027764</u>	

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

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

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

1	0
---	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 56-1354495

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	0
---	---

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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




Ingevity Corporation Retirement Plan for Bargained Hourly Employees

EIN 47-4027764 | PN 002

**Independent Auditor's Report, Financial Statements,
and Supplementary Information**

December 31, 2024 and 2023



Ingevity Corporation Retirement Plan for Bargained Hourly Employees
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December 31, 2024 and 2023

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Independent Auditor's Report

Administration Committee
Ingevity Corporation Retirement Plan for Bargained Hourly Employees
North Charleston, South Carolina

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

We have performed audits of the financial statements of Ingevity Corporation Retirement Plan for Bargained Hourly Employees (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 statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the 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 a certification from a qualified institution as of December 31, 2024 and 2023 and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 that these financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

Other Matter – 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 analysis and are not a required part of the financial statements but is 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 audit 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 its form and content, is 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 schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule 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).

Forvis Mazars, LLP

**Charleston, South Carolina
October 10, 2025
Federal Employer Identification Number: 44-0160260**

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Statements of Net Assets Available for Benefits
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments at fair value	\$ 25,951,779	\$ 26,584,631
Receivables		
Contribution receivable	1,339,348	-
Accrued interest receivable	5,389	4,755
Total Receivables	<u>1,344,737</u>	<u>4,755</u>
Net Assets Available for Benefits	<u>\$ 27,296,516</u>	<u>\$ 26,589,386</u>

**Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2024**

Additions

Contributions

Employer \$ 1,339,348

Investment income

Net appreciation in fair value of investments 571,477

Interest and dividends 62,889

Total Additions

1,973,714

Deductions

Benefits paid to participants 801,479

Administrative expenses 465,105

Total Deductions

1,266,584

Net Increase

707,130

Net Assets Available for Benefits, Beginning of Year

26,589,386

Net Assets Available for Benefits, End of Year

\$ 27,296,516

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

Note 1. Description of Plan

The following description of the Ingevity Corporation Retirement Plan for Bargained Hourly Employees, (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit pension plan covering eligible union employees of Ingevity Corporation (the "Company"). The Company's Administration Committee controls and manages the operation and administration of the Plan. Principal Financial Group ("PFG" or "Trustee") serves as Trustee and recordkeeper of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Pension benefits

Participants with five years of continuous service, as defined by the Plan, are entitled to pension benefits upon retirement. If employees terminate before rendering five years of continuous service, they forfeit the right to receive pension benefits upon retirement. Pension benefits are provided to participants under several types of retirement options based upon years of continuous service and age, as defined by the Plan. Retirement benefits are paid to pensioners or beneficiaries in various forms of joint and survivor annuities.

Death and disability benefits

In the event of a vested employee's death, his or her designated beneficiary will be entitled to receive a survivor benefit equal to the specified percentage of the participant's accrued benefit according to the Plan provisions. The survivor benefit commences on the earliest date that the deceased participant could have elected to receive retirement benefits. In the event of a vested employee becoming totally and permanently disabled, he or she will be entitled to receive a monthly disability retirement pension distribution without actuarial reduction on account of retirement prior to his or her normal retirement date.

Note 2. Summary of Significant Accounting Policies

Basis of accounting

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

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts of net assets available for benefits, and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Accordingly, actual results may differ from those estimates and assumptions.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Plan management determines the Plan's valuation policies utilizing information provided by the trustee. See Note 6 for discussion of fair value measurements.

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the 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.

Administrative expenses

The Plan's administrative expenses are paid by either the Plan or the Company, as provided by the plan document. Certain administrative functions are performed by employees of the Company. No such employee receives compensation from the Plan.

Subsequent Events

The Plan has evaluated subsequent events through October 10, 2025, the date the financial statements were available to be issued.

Note 3. Funding Policy

Contributions to provide benefits under the Plan are made solely by the Company. The Company's funding policy is to make contributions to the Plan in an amount that will meet or exceed the annual ERISA minimum funding requirements, as determined by the Plan's independent actuary. The minimum funding requirement for the year ended December 31, 2024 was met. The Company made \$1,339,348 in contributions for the year ended December 31, 2024.

Although it has not expressed any intent 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.

Note 4. Certification of Plan Trustee

The Plan Administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Delaware Charter Guarantee and Trust Company, d/b/a Principal Trust Company, a qualified institution, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate:

- Investments of \$21,394,246 and \$24,721,228 as shown in the statements of net assets available for benefits as of December 31, 2024 and 2023, respectively
- Investment income of \$377,347 as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2024
- Investment information of \$21,394,246 included in the accompanying schedule of assets held at end of year as of December 31, 2024 and the accompanying schedule of reportable transactions for the year ended December 31, 2024

The Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedules. The Plan's investments in limited partnerships were excluded from certification provided by the Plan's Trustee.

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

Note 5. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, which are attributable under the Plan's provisions to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. Benefits under the Plan are based on employees' benefit rate based on union affiliation as well as years of service at benefit. 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.

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

The significant actuarial assumptions used in the valuations as of December 31, 2024 and 2023 were:

	<u>2024</u>	<u>2023</u>
Funding method	Unit credit	Unit credit
Discount rate	6.5%	6.5%
Assumed return on plan assets	6.5%	6.5%
Mortality rate	Pri-2012 Blue Collar Mortality Tables Projected with Scale MP-2021	Pri-2012 Blue Collar Mortality Tables Projected with Scale MP-2021
Retirement age	Weighted average retirement age is 62	Weighted average retirement age is 62

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

The actuarial present value of accumulated plan benefits as of December 31, 2024 and 2023 was as follows:

	<u>2024</u>	<u>2023</u>
Vested benefits:		
Participants currently receiving benefits	\$ 9,906,784	\$ 8,311,238
Other participants	<u>15,050,166</u>	<u>15,191,704</u>
Total vested benefits	24,956,950	23,502,942
Non-vested benefits	<u>1,141,804</u>	<u>1,273,245</u>
Total actuarial present value of accumulated plan benefits	<u>\$ 26,098,754</u>	<u>\$ 24,776,187</u>

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

The actuarial present value of accumulated plan benefits increased as follows:

Actuarial present value of accumulated plan benefits, as of December 31, 2023	\$ 24,776,187
Increase (decrease) attributable to:	
Benefits accumulated	539,232
Increase for interest due to decrease in discount period	1,584,814
Benefits paid	<u>(801,479)</u>
	1,322,567
Actuarial present value of accumulated plan benefits, as of December 31, 2024	<u>\$ 26,098,754</u>

Note 6. Fair Value Measurements

Fair value as defined under GAAP is an exit price, representing the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. GAAP establishes a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value. These tiers include:

- Level 1:** Observable inputs such as quoted prices in active markets.
- Level 2:** Inputs other than quoted prices in active markets that are either directly or indirectly observable.
- Level 3:** Unobservable inputs about which little or no market data exists, therefore requiring an entity to develop its own assumptions.

Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment and may affect the valuation of fair value assets and liabilities and their placement within the fair value hierarchy levels.

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds

Mutual funds are publicly traded investments and are valued daily at the closing price reported on the active market on which the funds are traded.

Common collective trust funds

These funds are valued at the net asset value ("NAV") of units of the collective fund. The NAV is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the funds will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require daily notification in order to ensure that securities liquidations will be carried out in an orderly business manner.

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

Investment in Limited Partnerships

The Plan invests in limited partnerships for which quoted prices are not available in active markets for identical instruments. The Plan utilizes NAV, as determined by the general partners, as the estimated fair value. Because quoted prices in active markets for identical assets are not available, these prices are determined using observable market information such as quotes from less active markets and/or quoted prices in securities with similar characteristics. The following tables set forth by level within the fair value hierarchy the Plan's assets accounted for at fair value on a recurring basis.

	Assets at Fair Value as of December 31, 2024			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 746,436	\$ -	\$ -	\$ 746,436
Interest-bearing cash	85,361	-	-	85,361
Total assets in the fair value hierarchy	<u>\$ 831,797</u>	<u>\$ -</u>	<u>\$ -</u>	831,797
Investments measured at NAV (a)				<u>25,119,982</u>
Investments at fair value				<u>\$ 25,951,779</u>

	Assets at Fair Value as of December 31, 2023			
	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 7,936,737	\$ -	\$ -	\$ 7,936,737
Interest-bearing cash	193,854	-	-	193,854
Total assets in the fair value hierarchy	<u>\$ 8,130,591</u>	<u>\$ -</u>	<u>\$ -</u>	8,130,591
Investments measured at NAV (a)				<u>18,454,040</u>
Investments at fair value				<u>\$ 26,584,631</u>

(a) *In accordance with GAAP, certain investments that were measured at net asset value per share (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 statement of net assets available for benefits.*

The following table summarizes investments for which fair value is measured using the NAV per share practical expedient as of December 31, 2024 and 2023. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

	<u>Fair Value at December 31, 2024</u>	<u>Fair Value at December 31, 2023</u>	<u>Unfunded Commitments</u>	<u>Other Redemption Restrictions</u>	<u>Redemption Notice Period</u>
Common collective trusts	\$ 20,562,448	\$ 16,590,637	None	Monthly	Up to 1 Month
Limited partnerships (b)	\$ 4,557,534	\$ 1,863,403	None	(b)	(b)

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

(b) *The Marathon Emerging Markets Bond Fund (“MEMBF”) is an open-end fund that invests in sovereign debt, quasi sovereign debt and corporate debt of entities domiciled in emerging markets. The Company held \$1,184,845 and \$1,106,277 in MEMBF as of December 31, 2024 and 2023, respectively. The fund has monthly liquidity and requires a 5-day redemption restriction period.*

The Pacific Asset Management Bank Loan Fund (“PAMBLF”) invests in a selectively constructed portfolio of senior-secured loans. The PAMBLF focuses on floating rate bank loans. The Company held \$822,973 and \$757,126 in PAMBLF as of December 31, 2024 and 2023, respectively. The fund has monthly liquidity and requires a 10-day redemption restriction period.

The IR&M Long Credit Fund (“IRM”) invests primarily in investment-grade fixed income securities. The Company held \$2,549,716 and \$0 in IRM as of December 31, 2024 and 2023, respectively. The fund has daily liquidity.

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

Note 7. Tax Status

The Internal Revenue Service (the “IRS”) has determined and informed the Company by a letter dated October 10, 2017, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (the “IRC”). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRC. Therefore, the Plan administrator believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8. Risks and Uncertainties

The Plan invests in various investment securities. 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 at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants’ account balances and the amounts reported in the statements of net assets available for benefits.

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

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Notes to Financial Statements
December 31, 2024 and 2023

Note 9. Plan Termination

In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder, and the Plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (“PBGC”) if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor’s pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan’s termination, subject to a statutory ceiling on the amount of an individual’s monthly benefit.

Whether all participants receive their benefits should the Plan be terminated 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 the level and type of benefits guaranteed by the PBGC at that time. 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.

Note 10. Related-Party and Party-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50% or more of such an employer or employee association or relatives of such persons.

The Plan has a number of service providers. Such providers are parties in interest under ERISA. The Plan paid \$11,589 of administrative fees to the Trustee during the year ended December 31, 2024. Actuarial fees paid by the Plan to USI Consulting Group were \$46,740 for the year ended December 31, 2024. PBGC premiums totaled \$314,013 for the year ended December 31, 2024. Individually nonmaterial expenses paid to other services providers that are parties in interest aggregated \$92,763 during the year ended December 31, 2024.

Supplementary Information

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Schedule of Assets (Held at End of Year)
Schedule H, Line 4i
EIN: 47-4027764 Plan: 002
December 31, 2024

(a)	(b) Identity 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
	Mutual Funds: PGIM	High Yield Fund	\$ 811,770	\$ 746,436
	Common Collective Trusts:			
	Prudential Trust Company	US Long Duration Corporate Bond	3,044,245	2,602,067
	SSGA	MSCI ACWI IMI Index	9,149,973	10,264,834
	State Street	20+ Year U.S. Treasury Strips Index Non-Lending Fund	10,330,053	7,695,547
	Alternative Funds:			
	Marathon	Emerging Markets Bond Fund	1,170,000	1,184,845
	Pacific Asset Management	Bank Loan Fund	650,000	822,973
	IR&M	Long Credit Fund	2,500,000	2,549,716
	Interest Bearing Cash	Institutional bank deposit account	85,361	85,361
			<u>\$ 27,741,402</u>	<u>\$ 25,951,779</u>

REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		26,589,385.71			
	COMPARATIVE VALUE (5%)		1,329,469.29			
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						
02/23/24 B	9,376,792	1.000	0	9,376,792-*	9,376,792	
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						
02/26/24 S	6,200,528	1.000	0	6,200,528 *	6,200,528	0
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						
02/26/24 S	2,500,000	1.000	0	2,500,000 *	2,500,000	0
ISSUE: 05587K717 - BNY MELLON GLOBAL STOCK FUND						
02/22/24 S	155,656	22.130	0	3,444,670 *	3,526,426	-81,756
ISSUE: 256206202 - DODGE & COX GLOBAL STOCK FUND#1049						
02/22/24 S	226,486	15.040	0	3,406,342 *	2,902,964	503,378
ISSUE: 41024C513 - HAND COMP EMPLO/WESTN ASSET LONG DU						
02/22/24 S	210,306	12.010	0	2,525,780 *	2,426,853	98,927
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/15/24 B	644,005	15.675	\$10095053	10,095,053-*	10,095,053	
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
02/22/24 S	77,299	47.859	0	3,699,472 *	2,786,638	912,834
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
11/15/24 S	644,005	15.675	0	10,095,053 *	10,095,053	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/26/24 B	653,293	15.154	9,900,000	9,900,000-*	9,900,000	
GRAND TOTAL			\$19995053	61,243,690	59,810,307	1,433,383

FOOTNOTES

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	SERIES / BY BROKER	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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BEGINNING MARKET VALUE	26,589,385.71
COMPARATIVE VALUE (5%)	1,329,469.29

BROKER: MISCELLANEOUS

01/03/24 S	758	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.205	0	1,672	1,883	-212
01/31/24 S	2,389	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	46.037	0	110,000	86,138	23,862
01/31/24 B	110,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	110,000	110,000-	110,000	
01/31/24 B	51,363	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.850	660,000	660,000-	660,000	
02/01/24 S	110,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	0	110,000	110,000	0
02/22/24 S	77,299	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.859	0	3,699,472 *	2,786,638	912,834
02/22/24 S	5	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.855	0	257	193	63
02/22/24 S	3	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.858	0	158	119	39
02/26/24 B	653,293	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.154	9,900,000	9,900,000-*	9,900,000	
02/28/24 B	29,683	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.160	450,000	450,000-	450,000	
02/29/24 B	69,430	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.161	150,000	150,000-	150,000	
03/18/24 S	38	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.255	0	470	613	-143
03/28/24 B	155,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	155,000	155,000-	155,000	
03/28/24 B	7,866	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.714	100,000	100,000-	100,000	
03/28/24 S	9,904	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.650	0	155,000	150,093	4,908
04/01/24 S	155,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	0	155,000	155,000	0
04/02/24 S	836	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.162	0	1,806	2,083	-277

REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY BROKER						
DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
04/30/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 260,000	1.000	260,000	260,000-	260,000	
04/30/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 19,189	11.465	220,000	220,000-	220,000	
04/30/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 17,162	15.150	0	260,000	260,076	-76
05/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 260,000	1.000	0	260,000	260,000	0
05/31/24 B	ISSUE: 956990AG0 - CASH HELD AT OUTSIDE FUND 50,000	1.000	50,000	50,000-	50,000	
05/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 3,171	15.770	0	50,000	48,047	1,953
06/03/24 S	ISSUE: 956990AG0 - CASH HELD AT OUTSIDE FUND 50,000	1.000	0	50,000	50,000	0
06/28/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 250,000	1.000	250,000	250,000-	250,000	
06/28/24 S	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 20,546	12.168	0	250,000	325,008	-75,008
06/28/24 B	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 9,303	16.123	150,000	150,000-	150,000	
07/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 250,000	1.000	0	250,000	250,000	0
07/31/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 150,000	1.000	150,000	150,000-	150,000	
07/31/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S. 856	2.162	0	1,852	2,159	-307
07/31/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 5,904	12.703	75,000	75,000-	75,000	
07/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 9,155	16.385	0	150,000	138,858	11,142
08/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 150,000	1.000	0	150,000	150,000	0
08/30/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 200,000	1.000	200,000	200,000-	200,000	
08/30/24 S	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 15,259	13.107	0	200,000	240,943	-40,943
08/30/24 B	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 8,335	16.796	140,000	140,000-	140,000	
09/01/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 200,000	1.000	200,000	200,000-	200,000	
09/03/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 200,000	1.000	0	200,000	200,000	0
09/03/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 200,000	1.000	0	200,000	200,000	0

REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY BROKER						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: MS6912823 - CASH HELD AT SSGA						
09/30/24 B	60,000	1.000	60,000	60,000-	60,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/30/24 S	3,491	17.189	0	60,000	53,017	6,983
ISSUE: MS6912823 - CASH HELD AT SSGA						
10/01/24 S	60,000	1.000	0	60,000	60,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/07/24 S	14,371	17.048	0	245,000	218,275	26,725
ISSUE: MS6912823 - CASH HELD AT SSGA						
10/31/24 B	340,000	1.000	340,000	340,000-	340,000	
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/24 S	51,800	2.317	0	120,000	132,053	-12,053
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/24 S	842	2.349	0	1,977	2,146	-168
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
10/31/24 B	22,402	12.499	280,000	280,000-	280,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/31/24 S	20,221	16.814	0	340,000	307,128	32,872
ISSUE: MS6912823 - CASH HELD AT SSGA						
11/01/24 S	340,000	1.000	0	340,000	340,000	0
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
11/15/24 S	644,005	15.675	0	10,095,053 *	10,095,053	0
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/15/24 B	644,005	15.675	\$10095053	10,095,053-*	10,095,053	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/29/24 S	6,330	17.377	0	110,000	96,146	13,854
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/29/24 B	4,007	12.477	50,000	50,000-	50,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
12/30/24 S	14,339	17.087	0	245,000	217,784	27,216
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
12/31/24 S	40	17.246	0	686	604	82
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/31/24 B	15,798	11.711	185,000	185,000-	185,000	
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SUB-TOTAL			\$24230053	42,103,456	41,170,110	933,347
GRAND TOTAL			\$24230053	42,103,456	41,170,110	933,347

REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	SERIES / BY BROKER	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
BEGINNING MARKET VALUE			26,589,385.71			
COMPARATIVE VALUE (5%)			1,329,469.29			

ISSUE: MS6912823 - CASH HELD AT SSGA						
01/31/24 B	110,000	1.000	110,000	110,000-	110,000	
03/28/24 B	155,000	1.000	155,000	155,000-	155,000	
04/30/24 B	260,000	1.000	260,000	260,000-	260,000	
06/28/24 B	250,000	1.000	250,000	250,000-	250,000	
07/31/24 B	150,000	1.000	150,000	150,000-	150,000	
08/30/24 B	200,000	1.000	200,000	200,000-	200,000	
09/01/24 B	200,000	1.000	200,000	200,000-	200,000	
09/30/24 B	60,000	1.000	60,000	60,000-	60,000	
10/31/24 B	340,000	1.000	340,000	340,000-	340,000	
SUB-TOTAL OF BUYS # 9			1,725,000	1,725,000	1,725,000	
02/01/24 S	110,000	1.000	0	110,000	110,000	0
04/01/24 S	155,000	1.000	0	155,000	155,000	0
05/01/24 S	260,000	1.000	0	260,000	260,000	0
07/01/24 S	250,000	1.000	0	250,000	250,000	0
08/01/24 S	150,000	1.000	0	150,000	150,000	0
09/03/24 S	200,000	1.000	0	200,000	200,000	0
09/03/24 S	200,000	1.000	0	200,000	200,000	0
10/01/24 S	60,000	1.000	0	60,000	60,000	0
11/01/24 S	340,000	1.000	0	340,000	340,000	0
SUB-TOTAL OF SALES # 9			0	1,725,000	1,725,000	0
SUB-TOTAL			1,725,000	3,450,000	3,450,000	0
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						
01/02/24 B	18,621	1.000	0	18,621-	18,621	
01/03/24 B	20	1.000	0	20-	20	
02/01/24 B	520,334	1.000	0	520,334-	520,334	
02/01/24 B	0	1.000	0	0-	0	
02/02/24 B	16	1.000	0	16-	16	
02/23/24 B	9,376,792	1.000	0	9,376,792-*	9,376,792	

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
03/04/24 B	16	1.000	0	16-	16	
04/02/24 B	91,773	1.000	0	91,773-	91,773	
04/03/24 B	125	1.000	0	125-	125	
05/01/24 B	40,000	1.000	0	40,000-	40,000	
05/03/24 B	40,000	1.000	0	40,000-	40,000	
06/03/24 B	50,000	1.000	0	50,000-	50,000	
06/04/24 B	9	1.000	0	9-	9	
07/02/24 B	98,660	1.000	0	98,660-	98,660	
08/01/24 B	74,070	1.000	0	74,070-	74,070	
08/05/24 B	8	1.000	0	8-	8	
08/13/24 B	75,000	1.000	0	75,000-	75,000	
09/03/24 B	60,000	1.000	0	60,000-	60,000	
09/04/24 B	11	1.000	0	11-	11	
10/01/24 B	46,520	1.000	0	46,520-	46,520	
10/02/24 B	10	1.000	0	10-	10	
10/08/24 B	97,517	1.000	0	97,517-	97,517	
11/01/24 B	60,000	1.000	0	60,000-	60,000	
11/04/24 B	9	1.000	0	9-	9	
11/29/24 B	60,000	1.000	0	60,000-	60,000	
12/03/24 B	9	1.000	0	9-	9	
12/31/24 B	60,000	1.000	0	60,000-	60,000	
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SUB-TOTAL OF BUYS	# 27		0	10,769,520	10,769,520	
01/05/24 S	1,552	1.000	0	1,552	1,552	0
01/22/24 S	3,077	1.000	0	3,077	3,077	0
01/23/24 S	1,572	1.000	0	1,572	1,572	0
01/31/24 S	1,552	1.000	0	1,552	1,552	0
02/01/24 S	550,000	1.000	0	550,000	550,000	0
02/15/24 S	2,993	1.000	0	2,993	2,993	0
02/26/24 S	6,200,528	1.000	0	6,200,528 *	6,200,528	0
02/26/24 S	2,500,000	1.000	0	2,500,000 *	2,500,000	0
02/28/24 S	450,000	1.000	0	450,000	450,000	0
02/29/24 S	18,750	1.000	0	18,750	18,750	0
02/29/24 S	150,000	1.000	0	150,000	150,000	0
03/01/24 S	55,631	1.000	0	55,631	55,631	0
03/01/24 S	1,560	1.000	0	1,560	1,560	0
04/01/24 S	59,830	1.000	0	59,830	59,830	0
04/01/24 S	36,773	1.000	0	36,773	36,773	0
04/04/24 S	2,208	1.000	0	2,208	2,208	0
04/04/24 S	1,552	1.000	0	1,552	1,552	0
04/10/24 S	2,853	1.000	0	2,853	2,853	0
04/17/24 S	367	1.000	0	367	367	0
04/22/24 S	2,813	1.000	0	2,813	2,813	0

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
05/01/24 S	63,313	1.000	0	63,313	63,313	0
05/02/24 S	2,384	1.000	0	2,384	2,384	0
05/03/24 S	40,000	1.000	0	40,000	40,000	0
05/08/24 S	418	1.000	0	418	418	0
05/13/24 S	1,552	1.000	0	1,552	1,552	0
05/31/24 S	1,552	1.000	0	1,552	1,552	0
06/03/24 S	16,235	1.000	0	16,235	16,235	0
06/03/24 S	18,750	1.000	0	18,750	18,750	0
06/11/24 S	1,509	1.000	0	1,509	1,509	0
06/28/24 S	1,552	1.000	0	1,552	1,552	0
07/01/24 S	64,850	1.000	0	64,850	64,850	0
07/10/24 S	1,601	1.000	0	1,601	1,601	0
07/11/24 S	687	1.000	0	687	687	0
07/22/24 S	2,794	1.000	0	2,794	2,794	0
07/22/24 S	7,875	1.000	0	7,875	7,875	0
07/30/24 S	1,552	1.000	0	1,552	1,552	0
08/01/24 S	69,823	1.000	0	69,823	69,823	0
08/13/24 S	75,000	1.000	0	75,000	75,000	0
09/03/24 S	69,832	1.000	0	69,832	69,832	0
09/03/24 S	1,552	1.000	0	1,552	1,552	0
09/12/24 S	868	1.000	0	868	868	0
09/30/24 S	19,864	1.000	0	19,864	19,864	0
10/01/24 S	56,301	1.000	0	56,301	56,301	0
10/03/24 S	46,530	1.000	0	46,530	46,530	0
10/21/24 S	2,906	1.000	0	2,906	2,906	0
11/01/24 S	69,785	1.000	0	69,785	69,785	0
11/01/24 S	1,560	1.000	0	1,560	1,560	0
11/05/24 S	15,750	1.000	0	15,750	15,750	0
11/26/24 S	18,750	1.000	0	18,750	18,750	0
11/27/24 S	1,548	1.000	0	1,548	1,548	0
12/02/24 S	69,832	1.000	0	69,832	69,832	0
12/18/24 S	6,800	1.000	0	6,800	6,800	0
SUB-TOTAL OF SALES # 52			0	10,796,936	10,796,936	0
SUB-TOTAL			0	21,566,456	21,566,456	0
ISSUE: 05587K717 - BNY MELLON GLOBAL STOCK FUND						
01/31/24 S	27,217	21.310	0	580,000	616,614	-36,614
02/22/24 S	155,656	22.130	0	3,444,670 *	3,526,426	-81,756

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
SUB-TOTAL OF SALES # 2			0	4,024,670	4,143,040	-118,369
SUB-TOTAL			0	4,024,670	4,143,040	-118,369
ISSUE: 256206202 - DODGE & COX GLOBAL STOCK FUND#1049						
02/22/24 S	226,486	15.040	0	3,406,342 *	2,902,964	503,378
SUB-TOTAL OF SALES # 1			0	3,406,342	2,902,964	503,378
SUB-TOTAL			0	3,406,342	2,902,964	503,378
ISSUE: 41024C513 - HAND COMP EMPLO/WESTN ASSET LONG DU						
02/22/24 S	210,306	12.010	0	2,525,780 *	2,426,853	98,927
SUB-TOTAL OF SALES # 1			0	2,525,780	2,426,853	98,927
SUB-TOTAL			0	2,525,780	2,426,853	98,927
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/15/24 B	644,005	15.675	\$10095053	10,095,053-*	10,095,053	
11/29/24 B	4,007	12.477	50,000	50,000-	50,000	
12/31/24 B	15,798	11.711	185,000	185,000-	185,000	
SUB-TOTAL OF BUYS # 3			\$10330053	10,330,053	10,330,053	
SUB-TOTAL			\$10330053	10,330,053	10,330,053	0
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
01/31/24 S	2,389	46.037	0	110,000	86,138	23,862
02/22/24 S	77,299	47.859	0	3,699,472 *	2,786,638	912,834
02/22/24 S	5	47.855	0	257	193	63
02/22/24 S	3	47.858	0	158	119	39
SUB-TOTAL OF SALES # 4			0	3,809,887	2,873,088	936,799

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SERIES / BY ISSUE						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
SUB-TOTAL			0	3,809,887	2,873,088	936,799
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
01/31/24 B	51,363	12.850	660,000	660,000-	660,000	
03/28/24 B	7,866	12.714	100,000	100,000-	100,000	
04/30/24 B	19,189	11.465	220,000	220,000-	220,000	
07/31/24 B	5,904	12.703	75,000	75,000-	75,000	
10/31/24 B	22,402	12.499	280,000	280,000-	280,000	
SUB-TOTAL OF BUYS # 5			1,335,000	1,335,000	1,335,000	
03/18/24 S	38	12.255	0	470	613	-143
06/28/24 S	20,546	12.168	0	250,000	325,008	-75,008
08/30/24 S	15,259	13.107	0	200,000	240,943	-40,943
11/15/24 S	644,005	15.675	0	10,095,053 *	10,095,053	0
SUB-TOTAL OF SALES # 4			0	10,545,523	10,661,617	-116,094
SUB-TOTAL			1,335,000	11,880,523	11,996,617	-116,094
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/26/24 B	653,293	15.154	9,900,000	9,900,000-*	9,900,000	
02/28/24 B	29,683	15.160	450,000	450,000-	450,000	
06/28/24 B	9,303	16.123	150,000	150,000-	150,000	
08/30/24 B	8,335	16.796	140,000	140,000-	140,000	
SUB-TOTAL OF BUYS # 4			\$10640000	10,640,000	10,640,000	
03/28/24 S	9,904	15.650	0	155,000	150,093	4,908
04/30/24 S	17,162	15.150	0	260,000	260,076	-76
05/31/24 S	3,171	15.770	0	50,000	48,047	1,953
07/31/24 S	9,155	16.385	0	150,000	138,858	11,142
09/30/24 S	3,491	17.189	0	60,000	53,017	6,983
10/07/24 S	14,371	17.048	0	245,000	218,275	26,725
10/31/24 S	20,221	16.814	0	340,000	307,128	32,872
11/29/24 S	6,330	17.377	0	110,000	96,146	13,854
12/30/24 S	14,339	17.087	0	245,000	217,784	27,216
12/31/24 S	40	17.246	0	686	604	82

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	SERIES / BY ISSUE		PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
		UNIT PRICE -----	EXPENSE INCURRED -----			
	SUB-TOTAL OF SALES # 10		0	1,615,686	1,490,028	125,659
	SUB-TOTAL		\$10640000	12,255,686	12,130,028	125,659
	GRAND TOTAL		\$24030053	73,249,397	71,819,099	1,430,299

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SINGLE / BY BROKER						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----

BEGINNING MARKET VALUE	26,589,385.71
COMPARATIVE VALUE (5%)	1,329,469.29

BROKER: MISCELLANEOUS

ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
01/03/24 S	758	2.205	0	1,672	1,883	-212
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
01/31/24 S	2,389	46.037	0	110,000	86,138	23,862
ISSUE: MS6912823 - CASH HELD AT SSGA						
01/31/24 B	110,000	1.000	110,000	110,000-	110,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
01/31/24 B	51,363	12.850	660,000	660,000-	660,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
02/01/24 S	110,000	1.000	0	110,000	110,000	0
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
02/22/24 S	77,299	47.859	0	3,699,472 *	2,786,638	912,834
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
02/22/24 S	5	47.855	0	257	193	63
ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING						
02/22/24 S	3	47.858	0	158	119	39
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/26/24 B	653,293	15.154	9,900,000	9,900,000-*	9,900,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/28/24 B	29,683	15.160	450,000	450,000-	450,000	
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
02/29/24 B	69,430	2.161	150,000	150,000-	150,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
03/18/24 S	38	12.255	0	470	613	-143
ISSUE: MS6912823 - CASH HELD AT SSGA						
03/28/24 B	155,000	1.000	155,000	155,000-	155,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
03/28/24 B	7,866	12.714	100,000	100,000-	100,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
03/28/24 S	9,904	15.650	0	155,000	150,093	4,908
ISSUE: MS6912823 - CASH HELD AT SSGA						
04/01/24 S	155,000	1.000	0	155,000	155,000	0
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
04/02/24 S	836	2.162	0	1,806	2,083	-277

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: MS6912823 - CASH HELD AT SSGA						
04/30/24 B	260,000	1.000	260,000	260,000-	260,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
04/30/24 B	19,189	11.465	220,000	220,000-	220,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/30/24 S	17,162	15.150	0	260,000	260,076	-76
ISSUE: MS6912823 - CASH HELD AT SSGA						
05/01/24 S	260,000	1.000	0	260,000	260,000	0
ISSUE: 956990AG0 - CASH HELD AT OUTSIDE FUND						
05/31/24 B	50,000	1.000	50,000	50,000-	50,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/31/24 S	3,171	15.770	0	50,000	48,047	1,953
ISSUE: 956990AG0 - CASH HELD AT OUTSIDE FUND						
06/03/24 S	50,000	1.000	0	50,000	50,000	0
ISSUE: MS6912823 - CASH HELD AT SSGA						
06/28/24 B	250,000	1.000	250,000	250,000-	250,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
06/28/24 S	20,546	12.168	0	250,000	325,008	-75,008
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/28/24 B	9,303	16.123	150,000	150,000-	150,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
07/01/24 S	250,000	1.000	0	250,000	250,000	0
ISSUE: MS6912823 - CASH HELD AT SSGA						
07/31/24 B	150,000	1.000	150,000	150,000-	150,000	
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/24 S	856	2.162	0	1,852	2,159	-307
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
07/31/24 B	5,904	12.703	75,000	75,000-	75,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/24 S	9,155	16.385	0	150,000	138,858	11,142
ISSUE: MS6912823 - CASH HELD AT SSGA						
08/01/24 S	150,000	1.000	0	150,000	150,000	0
ISSUE: MS6912823 - CASH HELD AT SSGA						
08/30/24 B	200,000	1.000	200,000	200,000-	200,000	
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
08/30/24 S	15,259	13.107	0	200,000	240,943	-40,943
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/30/24 B	8,335	16.796	140,000	140,000-	140,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
09/01/24 B	200,000	1.000	200,000	200,000-	200,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	0	200,000	200,000	0
ISSUE: MS6912823 - CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	0	200,000	200,000	0

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SINGLE / BY BROKER

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
ISSUE: MS6912823 - CASH HELD AT SSGA						
09/30/24 B	60,000	1.000	60,000	60,000-	60,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/30/24 S	3,491	17.189	0	60,000	53,017	6,983
ISSUE: MS6912823 - CASH HELD AT SSGA						
10/01/24 S	60,000	1.000	0	60,000	60,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/07/24 S	14,371	17.048	0	245,000	218,275	26,725
ISSUE: MS6912823 - CASH HELD AT SSGA						
10/31/24 B	340,000	1.000	340,000	340,000-	340,000	
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/24 S	51,800	2.317	0	120,000	132,053	-12,053
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/24 S	842	2.349	0	1,977	2,146	-168
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
10/31/24 B	22,402	12.499	280,000	280,000-	280,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/31/24 S	20,221	16.814	0	340,000	307,128	32,872
ISSUE: MS6912823 - CASH HELD AT SSGA						
11/01/24 S	340,000	1.000	0	340,000	340,000	0
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
11/15/24 S	644,005	15.675	0	10,095,053 *	10,095,053	0
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/15/24 B	644,005	15.675	\$10095053	10,095,053-*	10,095,053	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/29/24 S	6,330	17.377	0	110,000	96,146	13,854
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/29/24 B	4,007	12.477	50,000	50,000-	50,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
12/30/24 S	14,339	17.087	0	245,000	217,784	27,216
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
12/31/24 S	40	17.246	0	686	604	82
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/31/24 B	15,798	11.711	185,000	185,000-	185,000	
				-----	-----	-----
SUB-TOTAL			\$24230053	42,103,456	41,170,110	933,347
GRAND TOTAL			\$24230053	42,103,456	41,170,110	933,347

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

INGEVITY CORP RETIREMENT PLAN
 ACCOUNT NUMBER 26020300

SINGLE / BY BROKER						
DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

Schedule SB, Line 26 - Schedule of Active Participant Data

January 1, 2024 Valuation
 Ingevity Corporation Retirement Plan for Bargained Hourly Employees
 (EIN: 47-4027764; PN: 002)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	4 (*)	-	-	-	-	-	-	-	-
25 to 29	1 (*)	13 (*)	8 (*)	-	-	-	-	-	-	-
30 to 34	3 (*)	20 (*)	25 (*)	5 (*)	-	-	-	-	-	-
35 to 39	1 (*)	9 (*)	9 (*)	7 (*)	2 (*)	-	-	-	-	-
40 to 44	1 (*)	7 (*)	9 (*)	11 (*)	2 (*)	1 (*)	-	-	-	-
45 to 49	-	8 (*)	10 (*)	6 (*)	4 (*)	5 (*)	-	-	-	-
50 to 54	-	5 (*)	12 (*)	7 (*)	9 (*)	8 (*)	7 (*)	3 (*)	-	-
55 to 59	-	1 (*)	4 (*)	6 (*)	5 (*)	7 (*)	10 (*)	10 (*)	2 (*)	-
60 to 64	1 (*)	-	1 (*)	4 (*)	1 (*)	3 (*)	5 (*)	6 (*)	2 (*)	3 (*)
65 to 69	-	-	1 (*)	-	1 (*)	-	3 (*)	-	-	-
70 & up	-	-	-	-	-	-	-	-	-	1 (*)

* Average frozen benefits are not shown since there are fewer than 1,000 active participants in this plan

Appendix B

Statement of Actuarial Assumptions and Methods

Minimum Funding Annual Interest Rates	24-month segment rates averaged through the end of August 2023 and published in September 2023 (as prescribed by IRC 430) and adjusted to reflect ARPA: <ul style="list-style-type: none">• Segment 1 (0 – 5 years) 4.75%• Segment 2 (5 to 20 years) 4.87%• Segment 3 (more than 20 years) 5.59%• Effective Interest Rate 5.24%
Maximum Deductible Annual Interest Rates	24-month segment rates averaged through the end of August 2023 and published in September 2023 (as prescribed by IRC 430) as follows: <ul style="list-style-type: none">• Segment 1 (0 – 5 years) 3.62%• Segment 2 (5 to 20 years) 4.46%• Segment 3 (more than 20 years) 4.52%• Effective Interest Rate 4.47%
Annual Expected Return on Assets	Interest Rate for developing Actuarial Value of Assets; limited to third segment rate 6.50% Rationale: as selected by the Plan Sponsor
PBGC Annual Interest Rates	24-month segment rates averaged through the end of August 2023 and published in September 2023 using the Alternative Method (as prescribed by IRC 430) as follows: <ul style="list-style-type: none">• Segment 1 (0 – 5 years) 3.62%• Segment 2 (5 to 20 years) 4.46%• Segment 3 (more than 20 years) 4.52%• Effective Interest Rate 4.47%
Salary Scale	Not applicable
Mortality	Funding: IRS Mortality Tables for 2024 based on Pri-2012 Tables and projected generationally with adjusted Scale MP-2021, with different rates for annuitants and nonannuitants (as prescribed by IRC 430).

Appendix B (Continued)

Rates of Retirement	Age	Rate
	55-60	6%
	61	15
	62	35
	63-64	25
	65	40
	66-69	30
	70+	100

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Turnover	Service	Turnover
	0	.2500
	3	.1300
	6	.0700
	9	.0400
	12+	.0250

Rates of Disability	Age	Male	Female
	20	.00040	.00040
	25	.00040	.00050
	30	.00040	.00060
	35	.00050	.00100
	40	.00110	.00180
	45	.00220	.00340
	50	.00460	.00560
	55	.00960	.00890
	60	.01610	.01270
	65	.00000	.00000

Assumptions Made In Valuing Spouse's Benefit Eighty percent of employees included in the valuation are assumed to be married. The wife is assumed to be three years younger than the husband.

Optional Form Selection All employees are assumed to elect the life annuity form of benefit.

Annual Increases to Benefit Multiplier The benefit multiplier in effect as of the valuation date is valued.

Standing Elections The client has not signed an election that provides for the automatic use of the Carryover Balance and/or Prefunding Balance if necessary to meet the minimum funding requirement.

Appendix B (Continued)

Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.

Funding Method

Pure Unit Credit

The actuarial liabilities shown in this report are determined using software purchased from an outside vendor which was developed for this purpose. Certain information is entered into this model in order to generate the liabilities. These inputs include economic and non-economic assumptions, plan provisions, and census information. We rely on the coding within the software to value the liabilities using the actuarial methods and assumptions selected. Both the input to and the output from the model are checked for accuracy and reviewed for reasonableness.

Employees Valued

Only participants as of the valuation date were valued.

Changes in Assumptions and Methods since the Last Actuarial Valuation

The interest rates used for determining the funding target were 4.75%, 5.00% and 5.74%. These rates were updated to the rates required for the current plan year.

The mortality table for the funding target was changed as required under PPA '06.

Justification for Changes in Actuarial Assumptions

The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any "Change in Actuarial Assumptions."

REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE / INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		26,589,385.71			
	COMPARATIVE VALUE (5%)		1,329,469.29			
ISSUE: 02/23/24 B	VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751	9,376,792	0	9,376,792*	9,376,792	
ISSUE: 02/26/24 S	VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751	6,200,528	0	6,200,528*	6,200,528	0
ISSUE: 02/26/24 S	VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751	2,500,000	0	2,500,000*	2,500,000	0
ISSUE: 02/22/24 S	05587K717 - BNY MELLON GLOBAL STOCK FUND	155,656	0	3,444,670*	3,526,426	-81,756
ISSUE: 02/22/24 S	256206202 - DODGE & COX GLOBAL STOCK FUND#1049	226,486	0	3,406,342*	2,902,964	503,378
ISSUE: 02/22/24 S	41024C513 - HAND COMP EMPLO/WESTIN ASSET LONG DU	210,306	0	2,525,780*	2,426,853	98,927
ISSUE: 11/15/24 B	600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1	644,005	\$10095053	10,095,053*	10,095,053	
ISSUE: 02/22/24 S	657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	77,299	0	3,699,472*	2,786,638	912,834
ISSUE: 11/15/24 S	781999438 - STATE STREET 20+ YEAR U.S.	644,005	0	10,095,053*	10,095,053	0
ISSUE: 02/26/24 B	932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	653,293	9,900,000	9,900,000*	9,900,000	
	GRAND TOTAL		\$19995053	61,243,690	59,810,307	1,433,383

FOOTNOTES

- * = SINGLE TRANSACTION IS 5% REPORTABLE
- B = BUY TRANSACTION
- S = SELL TRANSACTION
- R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY BROKER THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY BROKER	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		BEGINNING MARKET VALUE		26,589,385.71			
		COMPARATIVE VALUE (5%)		1,329,469.29			
BROKER: MISCELLANEOUS							
01/03/24 S	758	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.205	0	1,672	1,883	-212
01/31/24 S	2,389	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	46.037	0	110,000	86,138	23,862
01/31/24 B	110,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	110,000	110,000	110,000	0
01/31/24 B	51,363	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.850	660,000	660,000	660,000	0
02/01/24 S	110,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	0	110,000	110,000	0
02/22/24 S	77,299	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.859	0	3,699,472 *	2,786,638	912,834
02/22/24 S	3	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.855	0	257	193	63
02/22/24 S	3	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING	47.858	0	158	119	39
02/26/24 B	653,293	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.154	9,900,000	9,900,000	9,900,000	0
02/28/24 B	29,683	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.160	450,000	450,000	450,000	0
02/29/24 B	69,430	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.161	150,000	150,000	150,000	0
03/18/24 S	38	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.255	0	470	613	-143
03/28/24 B	155,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	155,000	155,000	155,000	0
03/28/24 B	7,866	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	12.714	100,000	100,000	100,000	0
03/28/24 S	9,904	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	15.650	0	155,000	150,093	4,908
04/01/24 S	155,000	ISSUE: MS6912823 - CASH HELD AT SSGA	1.000	0	155,000	155,000	0
04/02/24 S	836	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	2.162	0	1,806	2,083	-277

REPORTABLE TRANSACTIONS - SERIES / BY BROKER / BY BROKER INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY BROKER	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: MS6912823	- CASH HELD AT SSGA						
04/30/24 B	260,000	1.000	260,000	260,000	260,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
04/30/24 B	19,189	11.465	220,000	220,000	220,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/30/24 S	17,162	15.150	0	0	260,000	-76	
ISSUE: MS6912823	- CASH HELD AT SSGA						
05/01/24 S	260,000	1.000	0	0	260,000	0	
ISSUE: 956990AG0	- CASH HELD AT OUTSIDE FUND						
05/31/24 B	50,000	1.000	50,000	50,000	50,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/31/24 S	3,171	15.770	0	0	50,000	1,953	
ISSUE: 956990AG0	- CASH HELD AT OUTSIDE FUND						
06/03/24 S	50,000	1.000	0	0	50,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
06/28/24 B	250,000	1.000	250,000	250,000	250,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
06/28/24 S	20,546	12.168	0	0	250,000	-75,008	
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/28/24 B	9,303	16.123	150,000	150,000	150,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
07/01/24 S	250,000	1.000	0	0	250,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
07/31/24 B	150,000	1.000	150,000	150,000	150,000		
ISSUE: 628999427	- PRUDENTIAL TRUST COMPANY U.S.						
07/31/24 S	856	2.162	0	0	1,852	-307	
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
07/31/24 B	5,904	12.703	75,000	75,000	75,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/24 S	9,155	16.385	0	0	150,000	11,142	
ISSUE: MS6912823	- CASH HELD AT SSGA						
08/01/24 S	150,000	1.000	0	0	150,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
08/30/24 B	200,000	1.000	200,000	200,000	200,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
08/30/24 S	15,259	13.107	0	0	200,000	-40,943	
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/30/24 B	8,335	16.796	140,000	140,000	140,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/01/24 B	200,000	1.000	200,000	200,000	200,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	0	0	200,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	0	0	200,000	0	

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

REPORTABLE TRANSACTIONS - SERIES / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

DATE BOUGHT/SOLD	ISSUE	SHARES/ PAR VALUE	SERIES / BY BROKER		PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
			UNIT PRICE	EXPENSE INCURRED			
09/30/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA	60,000	1.000	60,000	60,000		
09/30/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	3,491	17.189	60,000	53,017	6,983	
10/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA	60,000	1.000	60,000	60,000	0	
10/07/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	14,371	17.048	245,000	218,275	26,725	
10/31/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA	340,000	1.000	340,000	340,000		
10/31/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	51,800	2.317	120,000	132,053	-12,053	
10/31/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	842	2.349	1,977	2,146	-168	
10/31/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	22,402	12.499	280,000	280,000		
10/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	20,221	16.814	340,000	307,128	32,872	
11/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA	340,000	1.000	340,000	340,000	0	
11/15/24 S	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	644,005	15.675	10,095,053	10,095,053	0	
11/15/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	644,005	15.675	10,095,053	10,095,053		
11/29/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	6,330	17.377	110,000	96,146	13,854	
11/29/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	4,007	12.477	50,000	50,000		
12/30/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	14,339	17.087	245,000	217,784	27,216	
12/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	40	17.246	686	604	82	
12/31/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	15,798	11.711	185,000	185,000		
SUB-TOTAL					42,103,456	41,170,110	933,347
GRAND TOTAL					42,103,456	41,170,110	933,347

REPORTABLE TRANSACTIONS - SERIES / BY BROKER THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
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S E R I E S / B Y B R O K E R

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

F O O T N O T E S

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE / BY ISSUE THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE				TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH			
			26,589,385.71				
			1,329,469.29				

		BEGINNING MARKET VALUE					
		COMPARATIVE VALUE (5%)					

ISSUE: MS6912823 - CASH HELD AT SSGA							
01/31/24 B	110,000	1.000	110,000	110,000--	110,000		
03/28/24 B	155,000	1.000	155,000	155,000--	155,000		
04/30/24 B	260,000	1.000	260,000	260,000--	260,000		
06/28/24 B	250,000	1.000	250,000	250,000--	250,000		
07/31/24 B	150,000	1.000	150,000	150,000--	150,000		
08/30/24 B	200,000	1.000	200,000	200,000--	200,000		
09/01/24 B	200,000	1.000	200,000	200,000--	200,000		
09/30/24 B	60,000	1.000	60,000	60,000--	60,000		
10/31/24 B	340,000	1.000	340,000	340,000--	340,000		
		SUB-TOTAL OF BUYS # 9	1,725,000	1,725,000	1,725,000		

02/01/24 S	110,000	1.000	0	110,000	110,000	0	0
04/01/24 S	155,000	1.000	0	155,000	155,000	0	0
05/01/24 S	260,000	1.000	0	260,000	260,000	0	0
07/01/24 S	250,000	1.000	0	250,000	250,000	0	0
08/01/24 S	150,000	1.000	0	150,000	150,000	0	0
09/03/24 S	200,000	1.000	0	200,000	200,000	0	0
09/03/24 S	200,000	1.000	0	200,000	200,000	0	0
10/01/24 S	60,000	1.000	0	60,000	60,000	0	0
11/01/24 S	340,000	1.000	0	340,000	340,000	0	0
		SUB-TOTAL OF SALES # 9	0	1,725,000	1,725,000	0	0

		SUB-TOTAL	1,725,000	3,450,000	3,450,000	0	0

ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751							
01/02/24 B	18,621	1.000	0	18,621--	18,621		
01/03/24 B	20	1.000	0	20--	20		
02/01/24 B	520,334	1.000	0	520,334--	520,334		
02/01/24 B	0	1.000	0	0--	0		
02/02/24 B	16	1.000	0	16--	16		
02/23/24 B	9,376,792	1.000	0	9,376,792--*	9,376,792		

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE			PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		UNIT PRICE	EXPENSE INCURRED				
05/01/24 S	63,313	1.000	0	63,313	63,313	0	
05/02/24 S	2,384	1.000	0	2,384	2,384	0	
05/03/24 S	40,000	1.000	0	40,000	40,000	0	
05/08/24 S	418	1.000	0	418	418	0	
05/13/24 S	1,552	1.000	0	1,552	1,552	0	
05/31/24 S	1,552	1.000	0	1,552	1,552	0	
06/03/24 S	16,235	1.000	0	16,235	16,235	0	
06/03/24 S	18,750	1.000	0	18,750	18,750	0	
06/11/24 S	1,509	1.000	0	1,509	1,509	0	
06/28/24 S	1,552	1.000	0	1,552	1,552	0	
07/01/24 S	64,850	1.000	0	64,850	64,850	0	
07/10/24 S	1,601	1.000	0	1,601	1,601	0	
07/11/24 S	687	1.000	0	687	687	0	
07/22/24 S	2,794	1.000	0	2,794	2,794	0	
07/22/24 S	7,875	1.000	0	7,875	7,875	0	
07/30/24 S	1,552	1.000	0	1,552	1,552	0	
08/01/24 S	69,823	1.000	0	69,823	69,823	0	
08/13/24 S	75,000	1.000	0	75,000	75,000	0	
09/03/24 S	69,832	1.000	0	69,832	69,832	0	
09/03/24 S	1,552	1.000	0	1,552	1,552	0	
09/12/24 S	868	1.000	0	868	868	0	
09/30/24 S	19,864	1.000	0	19,864	19,864	0	
10/01/24 S	56,301	1.000	0	56,301	56,301	0	
10/03/24 S	46,530	1.000	0	46,530	46,530	0	
10/21/24 S	2,906	1.000	0	2,906	2,906	0	
11/01/24 S	69,785	1.000	0	69,785	69,785	0	
11/01/24 S	1,560	1.000	0	1,560	1,560	0	
11/05/24 S	15,750	1.000	0	15,750	15,750	0	
11/26/24 S	18,750	1.000	0	18,750	18,750	0	
11/27/24 S	1,548	1.000	0	1,548	1,548	0	
12/02/24 S	69,832	1.000	0	69,832	69,832	0	
12/18/24 S	6,800	1.000	0	6,800	6,800	0	
SUB-TOTAL OF SALES # 52				10,796,936	10,796,936	0	
SUB-TOTAL				21,566,456	21,566,456	0	

ISSUE: 05587K717 - BNY MELLON GLOBAL STOCK FUND

01/31/24 S	27,217	21.310	0	580,000	616,614	-36,614
02/22/24 S	155,656	22.130	0	3,444,670 *	3,526,426	-81,756

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE / BY ISSUE THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SERIES / BY ISSUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
		SUB-TOTAL OF SALES # 2		0	4,024,670	4,143,040	-118,369
		SUB-TOTAL		0	4,024,670	4,143,040	-118,369
		ISSUE: 256206202 - DODGE & COX GLOBAL STOCK FUND#1049					
02/22/24 S	226,486		15.040	0	3,406,342 *	2,902,964	503,378
		SUB-TOTAL OF SALES # 1		0	3,406,342	2,902,964	503,378
		SUB-TOTAL		0	3,406,342	2,902,964	503,378
		ISSUE: 41024C513 - HAND COMP EMPLO/WESTN ASSET LONG DU					
02/22/24 S	210,306		12.010	0	2,525,780 *	2,426,853	98,927
		SUB-TOTAL OF SALES # 1		0	2,525,780	2,426,853	98,927
		SUB-TOTAL		0	2,525,780	2,426,853	98,927
		ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
11/15/24 B	644,005		15.675	\$10095053	10,095,053	10,095,053	
11/29/24 B	4,007		12.477	50,000	50,000	50,000	
12/31/24 B	15,798		11.711	185,000	185,000	185,000	
		SUB-TOTAL OF BUYS # 3		\$10330053	10,330,053	10,330,053	
		SUB-TOTAL		\$10330053	10,330,053	10,330,053	0
		ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING					
01/31/24 S	2,389		46.037	0	110,000	86,138	23,862
02/22/24 S	77,299		47.859	0	3,699,472 *	2,786,638	912,834
02/22/24 S	5		47.855	0	257	193	63
02/22/24 S	3		47.858	0	158	119	39
		SUB-TOTAL OF SALES # 4		0	3,809,887	2,873,088	936,799

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE / BY ISSUE THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.						
SUB-TOTAL						
			0	3,809,887	2,873,088	936,799
01/31/24 B	51,363	12.850	660,000	660,000	660,000	
03/28/24 B	7,866	12.714	100,000	100,000	100,000	
04/30/24 B	19,189	11.465	220,000	220,000	220,000	
07/31/24 B	5,904	12.703	75,000	75,000	75,000	
10/31/24 B	22,402	12.499	280,000	280,000	280,000	
SUB-TOTAL OF BUYS # 5						
			1,335,000	1,335,000	1,335,000	
03/18/24 S	38	12.255	0	470	613	-143
06/28/24 S	20,546	12.168	0	250,000	325,008	-75,008
08/30/24 S	15,259	13.107	0	200,000	240,943	-40,943
11/15/24 S	644,005	15.675	0	10,095,053 *	10,095,053	0
SUB-TOTAL OF SALES # 4						
			0	10,545,523	10,661,617	-116,094
SUB-TOTAL						
			1,335,000	11,880,523	11,996,617	-116,094
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
SUB-TOTAL						
			9,900,000	9,900,000	9,900,000	
02/26/24 B	653,293	15.154	9,900,000	9,900,000	9,900,000	
02/28/24 B	29,683	15.160	450,000	450,000	450,000	
06/28/24 B	9,303	16.123	150,000	150,000	150,000	
08/30/24 B	8,335	16.796	140,000	140,000	140,000	
SUB-TOTAL OF BUYS # 4						
			\$10640000	10,640,000	10,640,000	
03/28/24 S	9,904	15.650	0	155,000	150,093	4,908
04/30/24 S	17,162	15.150	0	260,000	260,076	-76
05/31/24 S	3,171	15.770	0	50,000	48,047	1,953
07/31/24 S	9,155	16.385	0	150,000	138,858	11,142
09/30/24 S	3,491	17.189	0	60,000	53,017	6,983
10/07/24 S	14,371	17.048	0	245,000	218,275	26,725
10/31/24 S	20,221	16.814	0	340,000	307,128	32,872
11/29/24 S	6,330	17.377	0	110,000	96,146	13,854
12/30/24 S	14,339	17.087	0	245,000	217,784	27,216
12/31/24 S	40	17.246	0	686	604	82

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE / BY ISSUE THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	SUB-TOTAL OF SALES # 10		0	1,615,686	1,490,028	125,659
	SUB-TOTAL		\$10640000	12,255,686	12,130,028	125,659
	GRAND TOTAL		\$24030053	73,249,397	71,819,099	1,430,299

FOOTNOTES

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SINGLE / BY BROKER UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		26,589,385.71			
	COMPARATIVE VALUE (5%)		1,329,469.29			
BROKER: MISCELLANEOUS						
01/03/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S. 758	2.205	0	1,672	1,883	-212
01/31/24 S	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING 2,389	46.037	0	110,000	86,138	23,862
01/31/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 110,000	1.000	110,000	110,000	110,000	0
01/31/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 51,363	12.850	660,000	660,000	660,000	0
02/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 110,000	1.000	0	110,000	110,000	0
02/22/24 S	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING 77,299	47.859	0	3,699,472 *	2,786,638	912,834
02/22/24 S	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING 5	47.855	0	257	193	63
02/22/24 S	ISSUE: 657999512 - SSGA MSCI ACWI IMI INDEX NON-LENDING 3	47.858	0	158	119	39
02/26/24 B	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 653,293	15.154	9,900,000	9,900,000	9,900,000	0
02/28/24 B	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 29,683	15.160	450,000	450,000	450,000	0
02/29/24 B	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S. 69,430	2.161	150,000	150,000	150,000	0
03/18/24 S	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 38	12.255	0	470	613	-143
03/28/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA 155,000	1.000	155,000	155,000	155,000	0
03/28/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S. 7,866	12.714	100,000	100,000	100,000	0
03/28/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH) 9,904	15.650	0	155,000	150,093	4,908
04/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA 155,000	1.000	0	155,000	155,000	0
04/02/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S. 836	2.162	0	1,806	2,083	-277

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	SINGLE / BY BROKER	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: MS6912823	- CASH HELD AT SSGA						
04/30/24 B	260,000	1.000	260,000	260,000	260,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
04/30/24 B	19,189	11.465	220,000	220,000	220,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/30/24 S	17,162	15.150	260,000	0	260,000	-76	
ISSUE: MS6912823	- CASH HELD AT SSGA						
05/01/24 S	260,000	1.000	260,000	0	260,000	0	
ISSUE: 956990AG0	- CASH HELD AT OUTSIDE FUND						
05/31/24 B	50,000	1.000	50,000	50,000	50,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/31/24 S	3,171	15.770	50,000	0	50,000	1,953	
ISSUE: 956990AG0	- CASH HELD AT OUTSIDE FUND						
06/03/24 S	50,000	1.000	50,000	0	50,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
06/28/24 B	250,000	1.000	250,000	250,000	250,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
06/28/24 S	20,546	12.168	250,000	0	250,000	-75,008	
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/28/24 B	9,303	16.123	150,000	150,000	150,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
07/01/24 S	250,000	1.000	250,000	0	250,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
07/31/24 B	150,000	1.000	150,000	150,000	150,000		
ISSUE: 628999427	- PRUDENTIAL TRUST COMPANY U.S.						
07/31/24 S	856	2.162	1,852	0	1,852	-307	
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
07/31/24 B	5,904	12.703	75,000	75,000	75,000		
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/24 S	9,155	16.385	150,000	0	150,000	11,142	
ISSUE: MS6912823	- CASH HELD AT SSGA						
08/01/24 S	150,000	1.000	150,000	0	150,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
08/30/24 B	200,000	1.000	200,000	200,000	200,000		
ISSUE: 781999438	- STATE STREET 20+ YEAR U.S.						
08/30/24 S	15,259	13.107	200,000	0	200,000	-40,943	
ISSUE: 932991763	- SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/30/24 B	8,335	16.796	140,000	140,000	140,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/01/24 B	200,000	1.000	200,000	200,000	200,000		
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	200,000	0	200,000	0	
ISSUE: MS6912823	- CASH HELD AT SSGA						
09/03/24 S	200,000	1.000	200,000	0	200,000	0	

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2024 THROUGH DECEMBER 31, 2024

DATE BOUGHT/SOLD	ISSUE	SHARES/ PAR VALUE	SINGLE / BY BROKER		PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
			UNIT PRICE	EXPENSE INCURRED			
09/30/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA	60,000	1.000	60,000	60,000--	60,000	
09/30/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	3,491	17.189	0	60,000	53,017	6,983
10/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA	60,000	1.000	0	60,000	60,000	0
10/07/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	14,371	17.048	0	245,000	218,275	26,725
10/31/24 B	ISSUE: MS6912823 - CASH HELD AT SSGA	340,000	1.000	340,000	340,000--	340,000	
10/31/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	51,800	2.317	0	120,000	132,053	-12,053
10/31/24 S	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.	842	2.349	0	1,977	2,146	-168
10/31/24 B	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	22,402	12.499	280,000	280,000--	280,000	
10/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	20,221	16.814	0	340,000	307,128	32,872
11/01/24 S	ISSUE: MS6912823 - CASH HELD AT SSGA	340,000	1.000	0	340,000	340,000	0
11/15/24 S	ISSUE: 781999438 - STATE STREET 20+ YEAR U.S.	644,005	15.675	0	10,095,053 *	10,095,053	0
11/15/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	644,005	15.675	\$10095053	10,095,053--*	10,095,053	
11/29/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	6,330	17.377	0	110,000	96,146	13,854
11/29/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	4,007	12.477	50,000	50,000--	50,000	
12/30/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	14,339	17.087	0	245,000	217,784	27,216
12/31/24 S	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)	40	17.246	0	686	604	82
12/31/24 B	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCAL	15,798	11.711	185,000	185,000--	185,000	
SUB-TOTAL				\$24230053	42,103,456	41,170,110	933,347
GRAND TOTAL				\$24230053	42,103,456	41,170,110	933,347

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER THROUGH DECEMBER 31, 2024 INGEVITY CORP RETIREMENT PLAN
 FOR THE PERIOD JANUARY 1, 2024 ACCOUNT NUMBER 26020300

DATE BOUGHT/SOLD -----	SHARES/ PAR VALUE -----	UNIT PRICE -----	EXPENSE INCURRED -----	PRINCIPAL CASH -----	TRANSACTION COST -----	REALIZED GAIN/LOSS -----
SINGLE / BY BROKER						

FOOTNOTES

* = SINGLE TRANSACTION IS 5% REPORTABLE
 B = BUY TRANSACTION
 S = SELL TRANSACTION
 R = REINVESTMENT TRANSACTION

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 Ingevity Corporation Retirement Plan for Bargained Hourly Employees	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Ingevity Corporation	D Employer Identification Number (EIN) 47-4027764	
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 checked="" type="checkbox"/> 101-500 <input 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	26,589,386
	b Actuarial value	2b	28,857,915
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	46	9,593,812
	b For terminated vested participants	54	2,043,303
	c For active participants	299	16,997,643
	d Total	399	28,634,758
4	If the plan is in at-risk status, check the box and complete lines (a) and (b)		
	a Funding target disregarding prescribed at-risk assumptions	4a	
	b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5	Effective interest rate	5	5.24%
6	Target normal cost		
	a Present value of current plan year accruals	6a	707,402
	b Expected plan-related expenses	6b	394,197
	c Target normal cost	6c	1,101,599

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	Debbie Sichko <i>DPS</i> Signature of actuary DEBBIE P. SICHKO, E.A., F.S.A. Type or print name of actuary USI Consulting Group Firm name 1001 Lakeside Avenue SUITE 1200 CLEVELAND OH 44114 Address of the firm	<u>10/2/2025</u> Date 2307411 Most recent enrollment number 216-343-0225 Telephone number (including area code)
------------------	--	--

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

21 Discount rate:				
a Segment rates:	1st segment: 4.75%	2nd segment: 4.87%	3rd segment: 5.59%	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....				21b 4
22 Weighted average retirement age				22 62
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....	31a	1,101,599	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance		Installment
a Net shortfall amortization installment	2,130,542		205,517
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	1,307,116	
		Carryover balance	Prefunding balance
35 Balances elected for use to offset funding requirement		0	921,386
36 Additional cash requirement (line 34 minus line 35).....	36	385,730	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....	37	1,248,041	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	862,311	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	862,311	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

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

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Ingevity Corporation – Retirement Plan for Bargained Hourly Employees
January 1, 2024 Valuation
EIN/PN: 47-4027764 / 002

Rates of Retirement	Age	Retirement Rate
	55-60	.06
	61	.15
	62	.35
	63-64	.25
	65	.40
	66-69	.30
	70	1.00

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Appendix A

Summary of Principal Plan Provisions

Plan Sponsor	Ingevity Corporation																		
EIN/PN	47-4027764/002																		
Effective Date	May 16, 2016; Last amended effective January 1, 2023.																		
Plan Year	The 12-month period beginning each January 1.																		
Participation	<p>All hourly employees of the Employer, subject to the appropriate collective bargaining agreements, are eligible to participate in the Plan upon their date of hire.</p> <p>Effective July 1, 2018, participation is closed to new entrants in Locals 508 and 183.</p> <p>Effective January 1, 2019, participation is closed to entrants in Local 1753.</p> <p>Effective July 1, 2020, participation is close to entrants in Local 775.</p> <p>Effective April 15, 2021, participation is closed to entrants in Local 1362.</p> <p>Effective May 1, 2021, participation is closed to entrants in Local 464.</p>																		
Service	Service is elapsed time from hire date where partial months count as whole months. Benefit service does not include service when not under a bargaining agreement.																		
Accrued Benefit	<p>The Accrued Benefit at any time prior to a participant's Normal Retirement Date shall be determined by Union using Benefit Service and multiplier as of the date of determination:</p> <table><thead><tr><th>Covington Mill-PACE, Local 675</th><th>Multiplier</th></tr></thead><tbody><tr><td>If Termination Occurs</td><td></td></tr><tr><td>5/16/2016-9/13/2017</td><td>\$59.00</td></tr><tr><td>9/14/2017-3/31/2018</td><td>\$59.50</td></tr><tr><td>4/01/2018-3/31/2019</td><td>\$60.00</td></tr><tr><td>4/01/2019-3/31/2020</td><td>\$60.50</td></tr><tr><td>4/01/2020-3/31/2021</td><td>\$61.00</td></tr><tr><td>4/01/2021-8/30/2022</td><td>\$61.50</td></tr><tr><td>9/01/2022 onward</td><td>\$63.50</td></tr></tbody></table> <p>Effective September 1, 2022, accrued benefits are frozen for participants of Local 675 who elected to 'opt-out' of the plan.</p>	Covington Mill-PACE, Local 675	Multiplier	If Termination Occurs		5/16/2016-9/13/2017	\$59.00	9/14/2017-3/31/2018	\$59.50	4/01/2018-3/31/2019	\$60.00	4/01/2019-3/31/2020	\$60.50	4/01/2020-3/31/2021	\$61.00	4/01/2021-8/30/2022	\$61.50	9/01/2022 onward	\$63.50
Covington Mill-PACE, Local 675	Multiplier																		
If Termination Occurs																			
5/16/2016-9/13/2017	\$59.00																		
9/14/2017-3/31/2018	\$59.50																		
4/01/2018-3/31/2019	\$60.00																		
4/01/2019-3/31/2020	\$60.50																		
4/01/2020-3/31/2021	\$61.00																		
4/01/2021-8/30/2022	\$61.50																		
9/01/2022 onward	\$63.50																		

Appendix A (Continued)

Accrued Benefit (Continued)

Charleston Chemical Plant, Local 508

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	\$51.00
1/01/2017-6/30/2018	\$51.50
7/01/2018-12/31/2022	\$53.50
1/01/2023 onward	\$55.50

Effective October 31, 2018, accrued benefits are frozen for participants of Local 508 who elected to 'opt-out' of the plan.

Charleston Chemical Plant, Local 183

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	\$51.00
1/01/2017-6/30/2018	\$51.50
7/01/2018-12/31/2022	\$53.50
1/01/2023 onward	\$55.50

Effective December 31, 2018, accrued benefits are frozen for participants of Local 183 who elect to 'opt-out' of the plan.

Charleston Chemical Plant, Local 1753

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	\$51.00
1/01/2017-1/02/2019	\$51.50
1/03/2019-3/31/2023	\$53.50
4/1/2023 onward	\$55.50

Effective March 29, 2019, accrued benefits are frozen for participants of Local 1753 who elect to 'opt-out' of the plan.

Wickliffe Carbon Plant, Local 775

If Termination Occurs	Multiplier
5/16/2016-3/31/2017	\$39.00
4/01/2017-3/31/2018	\$40.00
4/01/2018-3/31/2019	\$41.00
4/01/2019-6/30/2020	\$42.00
7/01/2020-3/1/2023	\$45.00
4/1/2023 onward	\$49.00

Effective July 1, 2020 accrued benefits are frozen for participants of Local 775 who elect to 'opt-out' of the plan

Covington Mill-IBEW, Local 464

	Multiplier
5/16/2016-4/30/2021	\$59.00
5/1/2021 onward	\$63.00

Appendix A (Continued)

Accrued Benefit (Continued)

Effective June 30, 2021 accrued benefits are frozen for participants of Local 464 who elected to 'opt-out' of the plan.

Georgia-Pacific, Local 1362

If Termination Occurs	Multiplier
3/8/2018-12/31/2018	\$39.00
1/1/2019-12/31/2019	\$40.00
1/1/2020-2/28/2021	\$41.00
3/1/2021 onward	\$45.00

The Accrued Benefit for members of Local 1362 is offset by their accrued benefit as of March 8, 2018, the acquisition date.

Effective June 30, 2021 or August 31, 2021 accrued benefits are frozen for participants of Local 1362 who elected 'opt-out' of the plan.

Normal Retirement Benefit

Eligibility:

Age 65.

Monthly Benefit:

The amount of the monthly benefit to be paid for life is the product of the benefit service and the applicable benefit multiplier.

Early Retirement Benefit

Eligibility:

Age 55 and 5 Years of Service.

Monthly Benefit:

If the participant has at least 20 years of Benefit Service then the Accrued Benefit is reduced 6% per year from Age 62. Otherwise, the Accrued Benefit is reduced 3% per year for the first three years and 6% for the next seven years from the Normal Retirement Age.

Disability Benefit

Eligibility:

Must be totally and permanently disabled prior to retirement or separation from service and have at least 10 years of Service.

Monthly Benefit:

The unreduced Accrued Benefit as of the Disability Retirement Date.

Appendix A (Continued)

Death Benefit

Eligibility:

100% vested and married for at the time of death.

Monthly Benefit:

The surviving spouse benefit is determined assuming the participant terminates at the earlier of his actual termination date and his date of death and survives to his earliest retirement age and elects a joint and survivor annuity and then dies. If death occurs prior to 55 the survivor percent is 50%, otherwise, it's 75%.

Benefits Available As Lump Sums

This plan pays only small benefit amounts as lump sums (\$1,000 or less).

Maximum Benefit Limit

The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.

Changes in Plan Provisions

The benefit rate for Local 1753 was increased effective April 1, 2023.

The benefit rate for Local 775 was increased effective April 1, 2023.

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Schedule of Assets (Held at End of Year)
Schedule H, Line 4i
EIN: 47-4027764 Plan: 002
December 31, 2024

(a)	(b) Identity 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
	Mutual Funds: PGIM	High Yield Fund	\$ 811,770	\$ 746,436
	Common Collective Trusts:			
	Prudential Trust Company	US Long Duration Corporate Bond	3,044,245	2,602,067
	SSGA	MSCI ACWI IMI Index	9,149,973	10,264,834
	State Street	20+ Year U.S. Treasury Strips Index Non-Lending Fund	10,330,053	7,695,547
	Alternative Funds:			
	Marathon	Emerging Markets Bond Fund	1,170,000	1,184,845
	Pacific Asset Management	Bank Loan Fund	650,000	822,973
	IR&M	Long Credit Fund	2,500,000	2,549,716
	Interest Bearing Cash	Institutional bank deposit account	85,361	85,361
			<u>\$ 27,741,402</u>	<u>\$ 25,951,779</u>

Schedule SB, Line 32 – Schedule of Amortization Bases
 Ingevity Corporation – Retirement Plan for Bargained Hourly Employees
 January 1, 2024 Valuation
 EIN/PN: 47-4027764 / 002

Exhibit VIII

Schedule of Amortization Bases

Shortfall Amortization Bases¹

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2024	\$ (486,733)	15	\$ (44,283)
1/1/2023	<u>\$ 2,617,275</u>	14	<u>\$ 249,800</u>
Total	\$ 2,130,542		\$ 205,517

Waiver Amortization Bases

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2024	<u>\$ 0</u>	N/A	<u>\$ 0</u>
Total	\$ 0		\$ 0

¹ 15-year amortization was adopted effective with the 2022 plan year per the terms of ARPA.