

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <h1 style="margin: 0;">2024</h1> This Form is Open to Public Inspection
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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.)

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan <u>KOHLER CO. PENSION PLAN</u>	1b Three-digit plan number (PN) ▶ <u>004</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>KOHLER CO. & SUBSIDIARIES</u> <u>444 HIGHLAND DRIVE</u> <u>MAIL STOP 007</u> <u>KOHLER, WI 53044</u>	1c Effective date of plan <u>01/01/1975</u> 2b Employer Identification Number (EIN) <u>39-0402810</u> 2c Plan Sponsor's telephone number <u>920-457-4442</u> 2d Business code (see instructions) <u>339900</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2025	ERIC THOELE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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	24292
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)	9560
	6a(2)	7552
	6b	7231
	6c	7567
	6d	22350
	6e	1136
	6f	23486
	6g(1)	
6g(2)		
6h		714
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

- (1) **R** (Retirement Plan Information)
- (2) **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) **DCG** (Individual Plan Information) – Number Attached _____
- (5) **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) **H** (Financial Information)
- (2) **I** (Financial Information – Small Plan)
- (3) **A** (Insurance Information) – Number Attached 0
- (4) **C** (Service Provider Information)
- (5) **D** (DFE/Participating Plan Information)
- (6) **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>KOHLER CO. PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>KOHLER CO. & SUBSIDIARIES</u>	D Employer Identification Number (EIN) <u>39-0402810</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information

1	Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>		
2	Assets:		
	a Market value	2a	<u>1595158526</u>
	b Actuarial value	2b	<u>1597474050</u>
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target
	a For retired participants and beneficiaries receiving payment	<u>8051</u>	<u>705446903</u>
	b For terminated vested participants	<u>6936</u>	<u>241789145</u>
	c For active participants	<u>9560</u>	<u>358427781</u>
	d Total	<u>24547</u>	<u>1305663829</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>5.19 %</u>
6	Target normal cost		
	a Present value of current plan year accruals	6a	<u>32177052</u>
	b Expected plan-related expenses	6b	<u>2600000</u>
	c Target normal cost	6c	<u>34777052</u>

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

SIGN HERE		
	Signature of actuary	<u>10/07/2025</u> Date
	<u>ERIN M. MALONE, ASA, EA</u> Type or print name of actuary	<u>23-08152</u> Most recent enrollment number
	<u>MERCER</u> Firm name	<u>713-276-2127</u> Telephone number (including area code)
	<u>500 DALLAS STREET, SUITE 1400 HOUSTON, TX 77002</u> Address of the firm	

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

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	203326381
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	203326381
10	Interest on line 9 using prior year's actual return of <u>17.44</u> %	0	35460121
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>5.32</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	238786502

Part III Funding Percentages			
14	Funding target attainment percentage	14	102.28 %
15	Adjusted funding target attainment percentage	15	120.26 %
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	106.83 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? Yes No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

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

Part VI Miscellaneous Items

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	34777052	
b Excess assets, if applicable, but not greater than line 31a	31b	30353529	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment.....	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	4423523	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	4423523	4423523
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input checked="" type="checkbox"/> 2021
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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 KOHLER CO. PENSION PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLER CO. & SUBSIDIARIES	D Employer Identification Number (EIN) 39-0402810	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

MIDWEST INSTITUTIONAL TRUST COMPANY

93-1799133

(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?
21	NONE	229731	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)

HECK CAPITAL ADVISORS

26-0202276

(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	NONE	108750	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)

BLACKROCK

94-3112180

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21 24 28 50 51	NONE	94116	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"/>

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)

FRANCIS INVESTMENT COUNSEL LLC

90-0142264

(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	NONE	28026	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"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <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>KOHLER CO. PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>KOHLER CO. & SUBSIDIARIES</u>	D Employer Identification Number (EIN) <u>39-0402810</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>MCSI EQUITY INDEX FUND RUSSIA</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, NA</u>		
c EIN-PN <u>94-3300062-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>710</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MCSI WORLD MULTI-FACTOR FUND</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, NA</u>		
c EIN-PN <u>47-4575155-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>964781</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>ACWI EX-US SUPERFUND</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, NA</u>		
c EIN-PN <u>94-3112180-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>145125474</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

a Plan name

b Name of plan sponsor **c** EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 KOHLER CO. PENSION PLAN	B Three-digit plan number (PN) ▶ 004
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLER CO. & SUBSIDIARIES	D Employer Identification Number (EIN) 39-0402810

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a 0	0
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1) 0	0
(2) Participant contributions	1b(2) 0	0
(3) Other	1b(3) 900675	342691
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1) 77184139	105550524
(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) 460826084	146090965
(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) 1056247628	1493847401
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14) 0	0
(15) Other	1c(15) 0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(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	1595158526	1745831581
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	1595158526	1745831581

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	735456	
(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)		735456
(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)	18863088	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		18863088
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(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)		205865037
c Other income	2c		-557984
d Total income. Add all income amounts in column (b) and enter total	2d		224905597

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	71411853	
(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)		71411853
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	229731	
(6) Bank or trust company trustee/custodial fees	2i(6)	230892	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	2360066	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		2820689
j Total expenses. Add all expense amounts in column (b) and enter total	2j		74232542

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		150673055
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: CLIFTON LARSON ALLEN LLP

(2) EIN: 41-0746749

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 552185.

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>KOHLER CO. PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>004</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>KOHLER CO. & SUBSIDIARIES</u>	D Employer Identification Number (EIN) <u>39-0402810</u>	

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): <u>36-2085229</u>		
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	827

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.)
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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
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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.
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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: 80.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 14.0 %
 High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 6.0 % Other: 0.0 %

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

KOHLER CO. PENSION PLAN
FINANCIAL STATEMENTS AND
ERISA-REQUIRED SUPPLEMENTAL SCHEDULES
YEARS ENDED DECEMBER 31, 2024 AND 2023



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**KOHLER CO. PENSION PLAN
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YEARS ENDED DECEMBER 31, 2024 AND 2023**

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INDEPENDENT AUDITORS' REPORT

Plan Administrator
Kohler Co. Pension Plan
Kohler, Wisconsin

Report on the Audit of the Financial Statements

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

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

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the years then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Kohler Co. Pension 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 Kohler Co. Pension Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter — Supplemental Schedules Required by ERISA

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

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

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Wauwatosa, Wisconsin
October 10, 2025

**KOHLER CO. PENSION PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

	2024	2023
ASSETS		
INVESTMENTS, AT FAIR VALUE	\$ 1,745,488,890	\$ 1,594,257,851
ACCRUED INCOME	342,691	900,675
Total Assets	1,745,831,581	1,595,158,526
 NET ASSETS AVAILABLE FOR BENEFITS	 \$ 1,745,831,581	 \$ 1,595,158,526

See accompanying Notes to Financial Statements.

KOHLER CO. PENSION PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2024 AND 2023

	2024	2023
ADDITIONS:		
INVESTMENT INCOME		
Net Appreciation in Fair Value of Investments	\$ 205,865,037	\$ 221,835,970
Interest and Dividends	<u>19,315,478</u>	<u>21,563,332</u>
Total Investment Income	<u>225,180,515</u>	<u>243,399,302</u>
Total Additions	225,180,515	243,399,302
DEDUCTIONS:		
BENEFITS PAID TO PARTICIPANTS	71,686,770	67,063,731
ADMINISTRATIVE EXPENSES	<u>2,820,690</u>	<u>13,546,575</u>
Total Deductions	<u>74,507,460</u>	<u>80,610,306</u>
NET INCREASE	150,673,055	162,788,996
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	<u>1,595,158,526</u>	<u>1,432,369,530</u>
End of Year	<u>\$ 1,745,831,581</u>	<u>\$ 1,595,158,526</u>

See accompanying Notes to Financial Statements.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN

The following description of the Kohler Co. Pension Plan (the Plan) provides only general information. Participants should refer to the Summary Plan Description for more complete information. Copies of this booklet are available from the Employee Benefits department.

General

The Plan is a defined benefit pension plan covering most employees of Kohler Co. (the Company) and its subsidiaries who are not participants in another defined benefit pension plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Plan was amended and restated throughout the years to comply with tax legislation and most recently amended effective January 1, 2025.

Effective May 1, 2024, Kohler Co. sold their wholly owned Kohler Energy Division to Discovery Energy, LLC. As of the effective date, Discover Energy, LLC became a separate company, and as a result of the sale, employees of the Energy Division became employees of Discovery Energy, LLC and participants in the Discovery Energy Pension Plan. Benefits accrued by these participants in the Plan were frozen as of April 30, 2024. As of this date, these participants are deemed to have attained their vested retirement age in the Plan.

Effective May 1, 2024, Kohler Interiors Group, LTD and its subsidiaries, including Kohler Interiors Furniture Company, are no longer participating employers in the Plan.

Effective January 1, 2024, the Plan was amended to increase the mandatory cash out limit to \$7,000; to allow for optional lump sum payments if the benefit amount is \$10,000 or less and the participant has established residency outside of the United States; to waive the early withdrawal penalty for terminally ill participants; and to increase benefit multipliers for Kohler Factory Hourly Associates and Tenured Associates.

Effective June 14, 2023, the Plan was amended to increase benefit multipliers for Huntsville employees.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Participation

The eligibility requirements by location or division are as follows:

- An administrative employee who becomes an eligible employee (as defined by the Plan) will become a participant on the latter of:
 - The first day of the Plan year following attainment of age 21.
 - The first day of the Plan year immediately preceding or next following the last day of a 12-month period following his or her date of employment during which he or she completes at least 1,000 hours of service, whichever is nearest to such completion date.
 - The first day of the Plan year immediately following the first Plan year during which he or she completes at least 1,000 hours of service.
- UAW Local 833 factory hourly employee who becomes an eligible employee (as defined by the Plan) will become a participant on the latter of:
 - The first day of the Plan year immediately preceding or next following the last day of a 12-month period following his or her date of employment during which he or she completes at least 1,000 hours of service, whichever is nearest to such completion date.
 - The first day of the Plan year immediately following the first Plan year during which he or she completes at least 1,000 hours of service.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Participation (Continued)

- Kohler Interiors Furniture Company (formerly Baker, Knapp & Tubbs, Inc.) employee who becomes an eligible employee (as defined by the Plan) will become a participant on:
 - The first day of the month coincident with or next following the latest of the following dates:
 - The effective date of coverage applicable to such participating group;
 - The date the participant becomes a member of such participating group;
 - The date determined under a) or b):
 - a) Employment date, if customary employment is at least 1,000 hours of service during a 12- month period.
 - b) If customary employment is not at least 1,000 hours of service during a 12-month period, then the date as of which the employee completes his initial 12-month period of employment provided the employee has been credited with at least 1,000 hours of service for such 12-month period or, if later, the first day of any Plan year following a Plan year for which the employee has been credited with at least 1,000 hours of service.
 - Notwithstanding the above, for Kohler Interiors Furniture Company Steelworkers Group and Kohler Interiors Furniture Company Carpenters Group employees, the date determined under a) or b) shall be the first anniversary of the date the employee was hired, if the employee completes at least 1,000 hours of service during his initial 12-month period of employment, or, if the employee does not have at least 1,000 hours of service in such period, the first January 1 following a Plan year in which the employee has at least 1,000 hours of service.
- Sheridan factory hourly employee who becomes an eligible employee (as defined by the Plan) will become a participant on the latter of:
 - The date determined under a) or b):
 - a) Employment date if customary employment is at least 1,000 hours of service during a 12-month period.
 - b) If customary employment is not at least 1,000 hours of service during a 12-month period, then the date as of which the employee completes his initial 12-month period of employment provided the employee has been credited with at least 1,000 hours of service for such 12-month period or, if later, the first day of any Plan year following a Plan year for which the employee has been credited with at least 1,000 hours of service.
- Huntsville, Union City, and Malvern factory hourly employee who becomes an eligible employee (as defined by the Plan) will become a participant on the latter of:
 - The first day of the Plan year closest to attainment of age 21.
 - The January 1 closest to the last day of the first 12-month period (beginning on his or her date of hire and then switching to any Plan year) during which the employee completes at least 1,000 hours of service.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Participation (Continued)

- Local Union No. 387 of the Glass, Molders, Pottery, Plastics & Allied Workers International Union, AFL-CIO, CLC of the Spartanburg plant employee and Brownwood hourly employee who becomes an eligible employee (as defined by the Plan) will become a participant on the latter of:
 - The first day of the Plan year closest to attainment of age 21.
 - The last day of the 12-month period following date of employment during which employee completes at least 1,000 hours of service, or if the eligible employee does not have 1,000 hours of service during the 12-month period following date of employment, the last day of the Plan year during which employee completes at least 1,000 hours of service.

Vesting

Participants are immediately vested to the extent of their contributions and accrued interest. Participants become fully vested in the Plan benefits after attaining five years of vesting service, with no vesting prior to that date.

Pension Benefits and Eligibility

Eligibility and benefits under the Plan vary based on the group to which a participant belongs. The following summarizes the key provisions for the various groups:

Administrative Pension Benefits

Normal monthly retirement benefits are paid to participants who have reached Social Security Normal Retirement Age and for whom five years have elapsed since the employee first became a participant in the Plan. The normal monthly retirement benefit is defined as the greater of:

- 50% of final average pay reduced by the lesser of 21% of three-year final average earnings recognizing pay up to covered compensation or 50% of final average pay up to covered compensation. This amount is reduced proportionately for benefit service less than 35 years.
- The multiplier is \$35 per month for each year of service. The multiplier for Real Estate Nonexempt Associates is \$16 per month for each year of service. For Kohler Interiors Furniture Company and Sterling administrative associates, the multiplier is \$20 per month for each year of service.

In addition to normal retirement benefits, the Plan provides for certain early, special early, deferred, disability, and death benefits, and various payment options. If the participant's accrued benefit is less than \$7,000, the participant is paid a lump sum. Preretirement surviving spouse benefits are provided if a vested member dies before his or her annuity starting date (as described in the Plan and applicable supplements).

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Kohler Factory Pension Benefits

Normal monthly retirement benefits are paid to participants who have reached age 65 and completed five years of vesting service or for whom five years have elapsed since the member first became a participant in the Plan, whichever is earlier.

The normal monthly retirement benefit equals the monthly benefit level times all years of benefit service. The Plan benefit levels are as follows:

Tenured Associates

<u>Retirement Date</u>	<u>Monthly Benefit Level</u>
January 1, 2000 - December 31, 2000	\$ 25.00
January 1, 2001 - December 31, 2001	26.00
January 1, 2002 - December 31, 2002	27.00
January 1, 2003 - December 31, 2003	28.00
January 1, 2004 - December 31, 2004	29.00
January 1, 2005 - December 31, 2005	30.00
January 1, 2006 - December 31, 2006	31.00
January 1, 2007 - December 31, 2007	32.00
January 1, 2008 - December 31, 2008	33.00
January 1, 2009 - December 31, 2009	34.00
January 1, 2010 - December 31, 2010	35.00
January 1, 2011 - December 31, 2012	35.50
January 1, 2013 - December 31, 2014	36.00
January 1, 2015 - December 31, 2015	36.50
January 1, 2016 - December 31, 2016	37.50
January 1, 2017 - December 31, 2017	38.50
January 1, 2018 - December 31, 2018	39.50
January 1, 2019 - December 31, 2019	40.50
January 1, 2020 - December 31, 2020	42.00
January 1, 2021 - December 31, 2021	42.50
January 1, 2022 - December 31, 2022	44.00
January 1, 2023 - December 31, 2023	44.50
January 1, 2024 - December 31, 2024	45.50

Associates

<u>Retirement Date</u>	<u>Monthly Benefit Level</u>
On or After December 20, 2010	\$ 22.75

Effective January 1, 2024, the monthly benefit level for Associates increased to \$23.00 per year of service.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Kohler Factory Pension Benefits (Continued)

In addition to normal retirement benefits, the Plan provides for certain early retirement and death benefits, and various payment options. Participants may receive their benefit payments in the form of a straight-line annuity or, if applicable, qualified joint and survivor annuity. In lieu of these, a participant may also elect to receive his or her benefit in an optional form of payment (as described in the Plan document). If the value of the participant's accrued benefit is less than \$5,000, the participant is paid a lump sum. Preretirement surviving spouse benefits are provided if a member dies before his or her annuity starting date (as described in the Plan and applicable supplements).

Kohler Interiors Furniture Company Pension Benefits

Normal retirement is age 65 with five years of vesting service or when five years have elapsed after the member has first become a participant in the Plan. Benefits are received at normal retirement age or, if elected, at early retirement. Benefits are determined based on years of benefit service and the benefit dollar multipliers shown on the following page. Preretirement surviving spouse benefits are provided if a member dies before his or her annuity starting date (as described in the Plan and applicable supplements).

The monthly normal retirement benefit multipliers by location are as follows:

Andrews	\$13.00 multiplied by benefit service (maximum 32 years). The multiplier increased to \$14.00 effective July 19, 1997 (maximum 33 years), \$15.00 effective July 19, 1998 (maximum 34 years), and \$16.00 effective July 19, 1999 (maximum 35 years).
Grand Rapids	\$12.50 multiplied by benefit service (maximum 30 years).
High Point	\$10.00 multiplied by benefit service (maximum 30 years).
Holland	\$13.00 multiplied by benefit service (no maximum). The multiplier increased to: \$14.00 effective December 12, 1997, \$15.00 effective December 12, 1998, \$15.75 effective December 12, 2000, \$16.50 effective December 12, 2001, and \$17.25 effective December 12, 2002.
Mocksville	\$11.00 multiplied by benefit service (maximum 30 years).

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Kohler Interiors Furniture Company Pension Benefits (Continued)

Kohler Interiors Furniture Company Steelworkers Group	For employees hired after December 31, 1994. \$20.00 multiplied by benefit service (no maximum). Effective September 16, 2000, \$21.00 multiplied by benefit service (no maximum); Effective September 16, 2001, \$22.00 multiplied by benefit service (no maximum); Effective February 1, 2005, \$22.50 multiplied by benefit service (no maximum); Effective February 1, 2006, \$23.00 multiplied by benefit service (no maximum).
Kohler Interiors Furniture Company Carpenters Group	For employees hired after December 31, 1995. \$20.00 multiplied by benefit service (no maximum). Effective September 1, 2001, \$22.00 multiplied by benefit service (no maximum).
Hildebran	\$9.00 multiplied by benefit service (maximum 30 years).

In addition to normal retirement benefits, the Plan provides for certain defined early, special early, deferred, disability, and death benefits and various payment options. If the value of the participant's accrued benefit is less than \$5,000, the participant is paid a lump sum. Preretirement surviving spouse benefits are provided if a vested member dies before his or her annuity starting date (as described in the Plan and applicable supplements).

Sterling Hourly Pension Benefits

Normal monthly retirement benefits are paid to members who have reached age 65 and for whom five years of vesting service or five years have elapsed after they first became participants in the Plan, whichever is earlier (Morgantown, Sheridan, Huntsville, Searcy, and Malvern). At the Union City plant, normal monthly retirement benefits are paid to members who attain their Social Security Normal Retirement Age and have completed five years of vesting service, or when five years have elapsed after they first became participants in the Plan, whichever is earlier. Employees at the Huntsville and Malvern plants may elect to retire with unreduced benefits at age 62 with 30 years or more of vesting service. Employees at the Morgantown plants may elect to retire with unreduced benefits at age 62 with 10 years of continuous service.

The normal monthly retirement benefits by location or division are as follows:

Morgantown \$14.00 multiplied by the participant's years of benefit service.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Sterling Hourly Pension Benefits (Continued)

Sheridan The appropriate dollar amount indicated below multiplied by the participant's years of benefit service (not in excess of 30 years):

\$11.50 for terminations on or after January 1, 1993, but before January 1, 1994

\$12.00 for terminations on or after January 1, 1994, but before January 1, 1995

\$12.50 for terminations on or after January 1, 1995, but before January 1, 1996

\$13.00 for terminations on or after January 1, 1996, but before January 1, 1997

\$14.00 for terminations on or after January 1, 1997, but before January 1, 1999

\$15.00 for terminations on or after January 1, 1999, but before January 1, 2003

\$16.00 for terminations on or after January 1, 2003

Huntsville The appropriate dollar amount indicated below multiplied by the participant's years of benefit service:

\$15.00 for terminations on or after January 1, 1990, but before June 1, 1993

\$16.00 for terminations on or after June 1, 1993, but before June 1, 1994

\$17.00 for terminations on or after June 1, 1994, but before June 1, 1995

\$18.00 for terminations on or after June 1, 1995, but before June 1, 1996

\$19.00 for terminations on or after June 1, 1996, but before June 1, 1999

\$19.50 for terminations on or after June 1, 1999, but before June 1, 2000

\$20.50 for terminations on or after June 1, 2000, but before June 1, 2002

\$21.00 for terminations on or after June 1, 2002, but before June 1, 2003

\$21.50 for terminations on or after June 1, 2003, but before June 1, 2004

\$22.00 for terminations on or after June 1, 2004, but before June 1, 2005

\$23.00 for terminations on or after June 1, 2005, but before June 1, 2006

\$24.00 for terminations on or after June 1, 2006, but before June 1, 2007

\$25.00 for terminations on or after June 1, 2007, but before June 1, 2008

\$26.00 for terminations on or after June 1, 2008, but before June 1, 2009

\$27.00 for terminations on or after June 1, 2009, but before June 1, 2010

\$28.00 for terminations on or after June 1, 2010, but before June 1, 2012

\$28.50 for terminations on or after June 1, 2012, but before June 1, 2013

\$29.00 for terminations on or after June 1, 2013

Effective June 14, 2023, for additional years of service after 19 years, the dollar multiplier is \$32.00 per month.

The Huntsville Plan provides two benefit formulas. The benefit is the greater of:

- i. A monthly benefit equal to the participant's years of benefit service, treating his or her years of benefit service under the Owens-Corning Plan as years of benefit service under this Plan, multiplied by the benefit level as described above.
- ii. A monthly benefit equal to the member's accrued benefit (if any) as of January 31, 1987, under the Owens-Corning Plan.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Sterling Hourly Pension Benefits (Continued)

Union City The appropriate dollar amount indicated below multiplied by the participant's years of benefit service:

\$12.50 for terminations on or after January 1, 1994, but before January 1, 1995
\$13.00 for terminations on or after January 1, 1995, but before January 1, 1996
\$13.50 for terminations on or after January 1, 1996, but before January 1, 1997
\$14.00 for terminations on or after January 1, 1997, but before January 1, 1999
\$15.00 for terminations on or after January 1, 1999, but before January 1, 2000
\$16.00 for terminations on or after January 1, 2000, but before January 1, 2001
\$17.00 for terminations on or after January 1, 2001, but before January 1, 2002
\$18.00 for terminations on or after January 1, 2002, but before January 1, 2003
\$19.00 for terminations on or after January 1, 2003, but before January 1, 2004
\$20.00 for terminations on or after January 1, 2004, but before January 1, 2005
\$21.00 for terminations on or after January 1, 2005, but before January 1, 2006
\$22.00 for terminations on or after January 1, 2006

Malvern The appropriate dollar amount indicated below multiplied by the participant's years of benefit service:

\$11.50 for terminations on or after October 8, 1990, but before March 1, 1993
\$12.50 for terminations on or after March 1, 1993, but before March 1, 1994
\$13.50 for terminations on or after March 1, 1994, but before March 1, 1996
\$14.00 for terminations on or after March 1, 1996, but before March 1, 1997
\$15.00 for terminations on or after March 1, 1997, but before March 1, 2003
\$16.00 for terminations on or after March 1, 2003, but before March 1, 2004
\$17.00 for terminations on or after March 1, 2004, but before March 1, 2005
\$17.50 for terminations on or after March 1, 2005, but before March 1, 2006
\$18.00 for terminations on or after March 1, 2006, but before March 1, 2007
\$18.50 for terminations on or after March 1, 2007, but before March 1, 2008
\$19.00 for terminations on or after March 1, 2008, but before March 1, 2009
\$19.50 for terminations on or after March 1, 2009, but before March 1, 2011
\$21.00 for terminations on or after March 1, 2011, but before March 1, 2013
\$21.50 for terminations on or after March 1, 2013

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Sterling Hourly Pension Benefits (Continued)

Searcy The appropriate dollar amount indicated below multiplied by the participant's years of benefit service:

\$12.75 for terminations on or after January 1, 1991, but before January 1, 1992
\$13.25 for terminations on or after January 1, 1992, but before January 1, 1993
\$13.75 for terminations on or after January 1, 1993, but before January 1, 1994
\$15.75 for terminations on or after January 1, 1994, but before January 1, 1995
\$16.75 for terminations on or after January 1, 1995, but before January 1, 1996
\$17.25 for terminations on or after January 1, 1996, but before January 1, 1997
\$17.75 for terminations on or after January 1, 1997, but before January 1, 1998
\$18.75 for terminations on or after January 1, 1998, but before January 1, 1999
\$19.75 for terminations on or after January 1, 1999, but before January 1, 2000
\$20.75 for terminations on or after January 1, 2000, but before January 1, 2001
\$21.00 for terminations on or after January 1, 2001, but before January 1, 2002
\$22.00 for terminations on or after January 1, 2002, but before January 1, 2003
\$22.50 for terminations on or after January 1, 2003, but before January 1, 2005
\$23.00 for terminations on or after January 1, 2005, but before January 1, 2006
\$23.50 for terminations on or after January 1, 2006, but before March 10, 2008
\$24.00 for terminations on or after March 10, 2008, but before March 15, 2009
\$24.50 for terminations on or after March 15, 2009, but before March 14, 2010
\$25.00 for terminations on or after March 14, 2010

In addition to normal retirement benefits, the Plan provides for certain defined early, special early, deferred, disability, and death benefits, and various payment options. If the value of the participant's accrued benefit is less than \$5,000, the participant is paid a lump sum. Preretirement surviving spouse benefits are provided if a vested member dies before his or her annuity starting date (as described in the Plan and applicable supplements).

Huntsville participants eligible for either a normal or early retirement benefit may elect to receive the actuarial equivalent lump sum value of that portion of their monthly benefit to be paid from the Plan that was earned between February 1, 1978 and December 31, 1989 in an immediate distribution in a single, nonperiodic cash payment or a direct rollover.

Brownwood and Spartanburg Pension Benefits

Normal monthly retirement benefits are paid to members who have reached age 65 and completed five years of vesting service or for whom five years have elapsed since the employee first became a participant in the Plan, whichever is earlier. Normal retirement benefits are 5.542% of contributions to the Plan.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Pension Benefits and Eligibility (Continued)

Brownwood and Spartanburg Pension Benefits (Continued)

On and after January 1, 2017, the contributory requirement of the Plan is frozen and no further participant contributions to the Plan shall be required. Interest on participant contributions continues to accumulate after December 31, 2016, to the annuity starting date. Interest is currently credited to employee accounts at 120% of the federal midterm rate.

Participants are entitled to a monthly normal retirement benefit equal to their frozen normal retirement benefit determined as of December 31, 2016, plus the participant's years of benefit service credited after December 31, 2016, multiplied by \$18, or for participants making participant contributions to the Plan as of December 31, 2015, the monthly benefit multiplier determined in the table below based on full years of vesting service earned by the participant as of the first day of the Plan year to which the benefit accrual relates.

<u>Full Years of Vesting Service</u>	<u>Monthly Benefit Multiplier</u>
0 Through 9 Years	\$18.00
10 Through 19 Years	\$21.00
20 Years and Above	\$24.00

A participant who transfers into employment covered by either Brownwood's or Spartanburg's provisions after December 31, 2015 is not eligible for the monthly benefit multipliers as included in the Plan provisions.

In addition to normal retirement benefits, the Plan provides for certain early retirement and death benefits, and various payment options. Participants may receive their benefit payment in the form of a straight-line annuity or, if applicable, a qualified joint and survivor annuity. In lieu of these, a participant may also elect to receive his or her benefit in an optional form of payment (as described in the Plan document). If the value of the participant's accrued benefit is less than \$5,000, the participant is paid a lump sum. A terminated participant may request a lump-sum withdrawal of all his or her contributions made to the Plan plus interest (as described in the Plan). Preretirement surviving spouse benefits are provided if a member dies before his or her annuity starting date (as described in the Plan).

Casa Grande, Arizona Benefits

Effective June 1, 2023, Kohler Factory Hourly Associates employed at the Casa Grande, Arizona Plant are eligible for the plan. For termination dates on or after June 1, 2023, the benefit multiplier is \$22.00 multiplied by the participant's years of benefit service.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Trustee of the Plan Assets

Midwest Institutional Trust Company is the trustee of the Plan.

Funding Policy

Contributions to provide benefits under the Plan are made by the Company. It is the Company's policy to contribute no less than the ERISA minimum funding requirement annually. Based on calculations performed by the Plan's actuary, the Plan is in compliance with the ERISA minimum funding requirements for the Plan years ended December 31, 2024 and 2023. The Company made discretionary contributions of \$-0- for the years ended December 31, 2024 and 2023.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from these estimates.

Investment Valuation and Income Recognition

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

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 includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Benefit Payments

Benefit payments to participants and their beneficiaries are recorded upon distribution.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation in fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Subsequent Events

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

Effective January 1, 2025, the Plan was amended to change the dollar multiplier used to calculate normal retirement benefits earned on or after the effective date to \$22.00.

Effective January 1, 2025, the Plan was amended to add employees of Ann Sacks Tile & Stone Inc. and Kohler Stores as eligible employees with a benefit multiplier of \$35.00

Effective January 1, 2025, the Plan was amended to add manufacturing Associates of Ann Sacks Tile & Stone Inc. and Robern, Inc. as eligible employees with a benefit multiplier of \$22.00 for terminations on or after January 1, 2025.

In connection with the order of the United States District Court for Eastern Wisconsin's order dated December 12, 2024 in Danny Holloway, et. al. v. Kohler Co. and Kohler Pension Plan, the plan was amended effective January 13, 2025 as follows:

- No later than June 1, 2025, the Plan shall increase monthly benefits to participants (including surviving spouses, beneficiaries, and alternate payees) who are then living and who are Class Members by the amount of the increase per Section III of the Settlement. In addition, the Plan shall pay each such Class Member a lump sum (subject to tax withholding) equal to the monthly increase for that Class Member multiplied by the number of months starting with August 2024 and ending with the month before the effective date of the increase, calculated without interest.
- The Plan shall pay the beneficiaries or estates of deceased Class Members the amount provided for in Section III of the Settlement in accordance with the procedures set forth in the Settlement.
- The Plan shall pay the service awards approved to the Plaintiffs (Plan Participants) in the total amount of \$10,000.00. In accordance with the Settlement, the Plan shall pay Class Counsel the amount awarded as fees (\$735,000.00) plus expenses and costs (\$18,015.24).

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 3 CERTIFICATION OF INVESTMENT INFORMATION

Certain information related to investments disclosed in the accompanying financial statements and supplemental schedules, including investments held at December 31, 2024 and 2023 and net appreciation in fair value of investments, interest and dividends for the years ended December 31, 2024 and 2023 was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Midwest Institutional Trust Company, the qualified institution of the Plan.

NOTE 4 FAIR VALUE MEASUREMENTS

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

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

Level 2 – Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

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

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 4 FAIR VALUE MEASUREMENTS (CONTINUED)

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

Mutual Funds (Registered Investment Companies): Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Collective Funds: Investments in the common/collective funds are valued at the NAV of units of a bank collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. There were no unfunded commitments as of December 31, 2024 and 2023.

The objective of the BlackRock MSCI Emerging Markets Free Fund is to track the investment results of an index composed of international equity securities of issuers in emerging markets. The fund can be transacted daily, a two-day trade notification is required.

The objective of the BlackRock S&P 500 Equal Weight Equity Index Fund is to track the investment results of an index composed of equal weighted U.S. equities. The fund can be transacted daily, a one-day trade notification is required.

The objective of the BlackRock MSCI EAFE Equity Index NL Fund is to track the investment results of an index composed of developed market. The fund can be transacted daily, a two-day trade notification is required.

The objective of the BlackRock Kohler Unitized Asia Indexed Fund is to track the investment results of an index composed of Asian equities. The fund can be transacted daily, a two-day trade notification is required.

The objective of the BlackRock MCSI World Ex USA Diversified Multi-Factor Fund is to track the investment results of an index composed of large- and mid-capitalization equities, excluding U.S. equities. The fund can be transacted daily, a two-day trade notification is required.

The objective of the BlackRock MSCI Minimum Volatility USA Index Fund is to track the investment results of an index composed of U.S. equities that, in the aggregate, have lower volatility characteristics relative to the broader U.S. equity market. The fund can be transacted daily, a one-day trade notification is required.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 4 FAIR VALUE MEASUREMENTS (CONTINUED)

The objective of the BlackRock MCSI Equity Index Fund - Russia is to track the investment results of an index composed of Russian equities. The fund can be transacted daily, a two-day trade notification is required.

The objective of the JPMorgan and U.S. High Yield Bond Index funds is to achieve income and appreciation in their primary investment holding categories.

Money Market Funds: Valued at \$1 cost per unit, which approximates fair value.

The fair value measurements of investments of the Plan's assets at fair value as of December 31 are as follows:

	2024			Total
	Level 1	Level 2	Level 3	
Registered Investment Companies	\$ 429,737,320	\$ -	\$ -	\$ 429,737,320
Money Market Funds	-	105,550,524	-	105,550,524
Total Investments in the Fair Value Hierarchy	<u>\$ 429,737,320</u>	<u>\$ 105,550,524</u>	<u>\$ -</u>	535,287,844
Investments Measured at Net Asset Value				1,210,201,046
Total Investments at Fair Value				<u>\$ 1,745,488,890</u>
	2023			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	\$ 1,056,247,628	\$ -	\$ -	\$ 1,056,247,628
Money Market Funds	-	77,184,139	-	77,184,139
Total Investments in the Fair Value Hierarchy	<u>\$ 1,056,247,628</u>	<u>\$ 77,184,139</u>	<u>\$ -</u>	1,133,431,767
Investments Measured at Net Asset Value				460,826,084
Total Investments at Fair Value				<u>\$ 1,594,257,851</u>

NOTE 5 ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits represent the estimated future periodic payments, including lump-sum distributions, under the Plan's provisions that are attributable to services rendered by the employees through the valuation date. Accumulated plan benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries and present employees or their beneficiaries. 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 the Plan's actuary, Mercer, and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the participant 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.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 5 ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS (CONTINUED)

Significant actuarial assumptions used in the valuation as of December 31, 2023, are as follows:

Actuarial Cost Method: Unit credit cost method

Mortality: Pri-2012 sex-distinct, employee table with no contingent survivor adjustments and no collar adjustments projected with scale MMP-2021 for healthy participants pre-commencement; Club Vita's 2023 US VitaCurves projected with scale MMP-2021 for healthy participants post-commencement and disabled participants.

Retirement Age: Varies by group, age, and years of service based on actual experience for active and terminated vested participants.

Interest Rate: 5.35%

Long-Term Rate of Return: 7.50%

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

Actuarial present values of accumulated plan benefits and changes in accumulated plan benefits at December 31, 2023 and for the year then ended, are as follows:

Actuarial Present Value of Accumulated

Plan Benefits:

Vested Benefits:

Participants Currently Receiving Payments	\$ 687,106,057
Other Participants	<u>589,829,904</u>
Total Vested Benefits	1,276,935,961

Nonvested Benefits

Total Actuarial Present Value of Accumulated Plan Benefits	<u><u>\$ 1,297,747,135</u></u>
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Actuarial Present Value of Accumulated

Plan Benefits - Beginning of Year

\$ 1,261,446,212

Increase (Decrease) During the Year Attributable to:

Benefits Accumulated	35,481,608
Change in Discount Period	65,552,878
Benefits Paid	(67,063,731)
Change in Actuarial Assumptions (1)	(282,049)
Change in Plan Provisions	<u>2,612,217</u>

Actuarial Present Value of Accumulated

Plan Benefits - End of Year

\$ 1,297,747,135

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 5 ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS (CONTINUED)

(1) The assumption changes for 2023 consisted of:

- a. The long-term 417(e) rates for actuarial equivalence were updated to 4.71% for the first five years and 5.41% thereafter.

The computation of the actuarial present value of accumulated plan benefits was made as of January 1, 2024. Had the valuation been performed as of December 31, 2023, there would be no material differences.

NOTE 6 PLAN TERMINATION AND PENSION BENEFIT GUARANTY CORPORATION MATTERS

Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan subject to provisions set forth in ERISA. Upon Plan termination, assets would be distributed in the following order:

- a. Benefits attributable to employee contributions, taken into account those paid out before termination.
- b. Annuity benefits that former employees or their beneficiaries that have been receiving for at least three years, or the employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
- c. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) (a U.S. government agency) up to the applicable limitation (discussed below).
- d. All other vested benefits (that is, vested benefits not insured by the PBGC).
- e. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC. 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.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at the time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the Plan's Sponsor and the level of benefits guaranteed by the PBGC.

**KOHLER CO. PENSION PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023**

NOTE 7 INCOME TAX STATUS

The Plan obtained a determination letter from the IRS dated May 30, 2017, that the Plan and related trust are designed in accordance with the applicable requirements of the Internal Revenue Code (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 requirements of the IRC. Therefore, they believe that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the organization 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

Investment securities are exposed to various risks including, but not limited to, interest rate, market, and credit risks. Due to the level of risk associated with certain securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term, and such changes would be material to the financial statements.

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.

NOTE 9 RELATED-PARTY TRANSACTIONS

Certain expenses of the Plan for legal, accounting, and other services rendered by parties-in-interest are paid by the Company. In addition, a portion of the Plan assets are invested in managed funds of the qualified institution. These transactions are not considered prohibited transactions by statutory exemptions under ERISA regulations.

NOTE 10 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The JPMorgan and U.S. High Yield Bond Index are collective funds, as classified in the financial statements included herein. The collective funds did not file a Form 5500 for the direct filing entity; therefore, the underlying assets have been reported on Form 5500, Schedule H.

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	Description of Investment	Cost	Current Value
	BlackRock MCSI World Ex USA Diversified Multi-Factor Fund	Collective Fund	\$ 685,953	\$ 964,781
	BlackRock MCSI Equity Index Fund-Russia	Collective Fund	-	710
	BlackRock - ACWI Ex-US Superfund A	Collective Fund	150,393,609	145,125,474
	Fidelity 500 Index Fund	Registered Investment Company	136,862,272	196,758,634
	Fidelity Total Market Index Fund	Registered Investment Company	69,760,489	99,042,395
	Fidelity Global Ex US Index Fund	Registered Investment Company	5,496,279	5,473,504
	JPMorgan Mid Cap Equity Index Fund	Collective Fund	20,150,000	19,463,244
	JPMorgan U.S. Small Cap Equity Index Fund	Collective Fund	8,250,000	7,801,261
	JPMorgan U.S. REIT Index Fund	Collective Fund	2,750,000	2,649,122
	JPMorgan EAFE Equity Index	Collective Fund	21,543,000	20,906,329
	JPMorgan Emerging Markets Research Enhanced Equity Fund	Collective Fund	46,926,808	45,589,993
	JPMorgan Global Select Equity Fund	Collective Fund	138,570,000	134,041,457
	JPMorgan Value Plus Fund	Collective Fund	11,576,000	11,145,639
	JPMorgan U.S. Active Core Equity Fund	Collective Fund	83,550,077	80,834,987
	JPMorgan Equity Index Fund	Collective Fund	53,085,000	51,694,708
	JPMorgan Value Advantage Fund	Collective Fund	23,100,000	22,406,384
	JPMorgan Growth Advantage Fund	Collective Fund	34,000,000	32,924,480
	JPMorgan International Equity Fund	Collective Fund	51,700,000	50,037,922
	Goldman Sachs Financial Square Government Fund	Cash Equivalent	105,550,524	105,550,524
	SPDR Gold Tr Gold Shares	Registered Investment Company	17,398,212	17,050,068
	JPMorgan Core Plus Bond Fund	Collective Fund	28,456,000	28,126,976
	Emerging Markets Enhanced NI CTF	Collective Fund	68,880,000	66,902,122
	Intermediate US Credit Index NI Fund	Collective Fund	24,500,000	24,311,167
	MCSI Australia Index SL Fund	Collective Fund	1,430,000	1,360,678
	MCSI Canada Index SL Fund	Collective Fund	12,510,000	12,059,171
	MCSI Europe Index NI CTF	Collective Fund	39,020,000	37,658,585
	MCSI Hong Kond Index SL Fund	Collective Fund	460,000	447,006
	MCSI Japan Index SL Fund	Collective Fund	4,520,000	4,402,769
	MCSI Singapore Index SL Fund	Collective Fund	160,000	154,990
	Russell 2000 Inex SL Fund	Collective Fund	5,740,000	5,441,031
	S&P 500 Flagship SL Fund	Collective Fund	338,490,000	329,646,666
	US High Yield Bond Index NI CTF	Collective Fund	31,710,000	31,421,114
	JPMorgan Core Bond Fund - Investment Class	Collective Fund	43,125,000	42,682,280
	Fidelity U.S. Bond Index Fund	Registered Investment Company	111,461,420	111,412,719
	Total Assets (Held at End of Year)		\$ 1,691,810,643	\$ 1,745,488,890

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (i) - Single Transactions in Excess of 5% of Plan Assets						
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	\$ 251,778,892	\$ -	\$ 251,778,892	\$ 251,778,892	\$ -
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	-	97,598,000	101,385,283	97,598,000	(3,787,283)
Blackrock S&P 500 Equal Weight Equity Index Fund	Common/Collective Fund	-	231,819,258	117,740,272	231,819,258	114,078,986
JPMCB Global Select Equity Fund	Registered Investment Company	132,000,000	-	132,000,000	132,000,000	-
Fidelity 500 Index Fund	Registered Investment Company	-	430,000,000	272,868,493	430,000,000	157,131,507
Fidelity U.S. Bond Index	Registered Investment Company	86,461,420	-	86,461,420	86,461,420	-
Fidelity Long Term Treasury Bond	Registered Investment Company		76,127,619	79,580,251	76,127,619	(3,452,632)
Fidelity Intermediate Treasury Bond	Registered Investment Company		93,220,353	91,805,197	93,220,353	1,415,156
S&P 50 Flagship SL Fund	Common/Collective Fund	323,490,000	-	323,490,000	323,490,000	-

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets						
Fidelity 500 Index Fund	Registered Investment Company	\$ 13,051,667 -	\$ - 451,462,670	\$ 13,051,667 288,481,933	\$ 13,051,667 451,462,670	\$ - 162,980,737
Fidelity Long Term Treasury Bond	Registered Investment Company	2,741,985 -	- 77,878,834	2,741,985 81,357,760	2,741,985 77,878,834	- (3,478,925)
Fidelity Intermediate Treasury Bond	Registered Investment Company	2,676,379 -	- 95,304,829	2,676,379 93,822,151	2,676,379 95,304,829	- 1,482,679
Goldman Sachs Financial Square Government Fund	Cash Equivalent	331,492,559 -	- 243,558,829	331,492,559 243,558,829	331,492,559 243,558,829	- -
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	251,778,892 -	- 97,598,000	251,778,892 101,385,283	251,778,892 97,598,000	- (3,787,283)
Blackrock S&P 500 Equal Weight Equity Index Fund	Common/Collective Fund	- -	- 240,134,214	- 121,003,517	- 240,134,214	- 119,130,697
JPMCB Global Select Equity Fund	Registered Investment Company	138,570,000	-	138,570,000	138,570,000	-
Fidelity U.S. Bond Index	Registered Investment Company	111,461,420	-	111,461,420	111,461,420	-
S&P 50 Flagship SL Fund	Common/Collective Fund	338,490,000	-	338,490,000	338,490,000	-
JPMCB U.S. Active Core Equity Fund	Common/Collective Fund	83,550,077	-	83,550,077	83,550,077	-

There were no category (ii) or (iv) reportable transactions for the year ended December 31, 2024.

Columns (e) and (f) are omitted as they are not applicable.



CLA (CliftonLarsonAllen LLP) is a network member of CLA Global. See CLAGlobal.com/disclaimer. Investment advisory services are offered through CliftonLarsonAllen Wealth Advisors, LLC, an SEC-registered investment advisor.

Schedule SB, line 26 — Schedule of Active Participant Data

Attained age	Years of credited service										
	Under 1	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40 & up	Total
Under 25	406	280	5								691
	22,931	46,188									
25–29	342	530	174								1,046
	34,077	68,019	72,427								
30–34	282	446	341	70							1,139
	37,415	76,235	83,007	97,171							
35–39	247	391	268	127	56	2					1,091
	44,739	85,718	90,443	105,028	111,824						
40–44	169	345	264	83	177	72	1				1,111
	48,113	90,965	84,571	94,361	115,179	89,293					
45–49	148	277	203	79	136	128	100	4			1,075
	59,354	80,226	87,683	106,456	126,038	111,676	86,068				
50–54	143	230	188	86	95	126	185	83	7		1,143
	49,055	88,756	80,775	87,838	107,346	95,994	94,203	85,357			
55–59	97	171	151	55	94	109	169	204	137		1,187
	57,906	81,834	74,000	89,464	92,054	83,071	92,184	81,144	81,509		
60–64	75	116	117	40	62	77	85	90	109	39	810
	19,403	73,488	67,854	89,152	101,435	75,331	85,736	89,016	83,892	75,861	
65–69	35	33	34	13	10	10	11	10	12	21	189
	17,290	56,231	58,446							91,488	
70 & up	48	14	4	2		1	4			5	78
	6,250										
Total	1,992	2,833	1,749	555	630	525	555	391	265	65	9,560

In each cell, the top number is the count of active participants for each age/service combination and the bottom number is average pay for 2023 limited to \$330,000. Average pay is not shown for cells with fewer than 20 participants. Average salaries shown include participants who do not have salary related benefits.

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

Actuarial assumptions for January 1, 2024 funding valuation

Discount rate sponsor elections																						
• Segment rates or full yield curve	Segment																					
• Look-back months	4																					
•	<u>Stabilized</u>	<u>Non-stabilized</u>																				
• First 5 years	4.75%	3.62%																				
• Next 15 years	4.87%	4.46%																				
• Over 20 years	5.59%	4.52%																				
Mortality sponsor elections																						
• Healthy participants	Section 430(h)(3) prescribed generational separate annuitant and non-annuitant mortality tables for 2024 plan year funding valuations, in accordance with the IRS regulation 1.430(h)(3)-1.																					
• Pre-1995 disabilities	Same as healthy																					
• Post-1994 disabilities	Same as healthy																					
Other economic assumptions																						
• Salary increases	<table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th style="text-align: center;">Age</th> <th style="text-align: center;">Salary Increase</th> </tr> </thead> <tbody> <tr><td style="text-align: center;"><25</td><td style="text-align: center;">6.75%</td></tr> <tr><td style="text-align: center;">25-29</td><td style="text-align: center;">6.75%</td></tr> <tr><td style="text-align: center;">30-34</td><td style="text-align: center;">5.75%</td></tr> <tr><td style="text-align: center;">35-39</td><td style="text-align: center;">4.75%</td></tr> <tr><td style="text-align: center;">40-44</td><td style="text-align: center;">3.75%</td></tr> <tr><td style="text-align: center;">45-49</td><td style="text-align: center;">3.25%</td></tr> <tr><td style="text-align: center;">50-54</td><td style="text-align: center;">2.50%</td></tr> <tr><td style="text-align: center;">55-59</td><td style="text-align: center;">2.50%</td></tr> <tr><td style="text-align: center;">60 and above</td><td style="text-align: center;">2.50%</td></tr> </tbody> </table>		Age	Salary Increase	<25	6.75%	25-29	6.75%	30-34	5.75%	35-39	4.75%	40-44	3.75%	45-49	3.25%	50-54	2.50%	55-59	2.50%	60 and above	2.50%
Age	Salary Increase																					
<25	6.75%																					
25-29	6.75%																					
30-34	5.75%																					
35-39	4.75%																					
40-44	3.75%																					
45-49	3.25%																					
50-54	2.50%																					
55-59	2.50%																					
60 and above	2.50%																					
• Social Security wage base	2.95% per year																					
• Inflation	2.20% per year																					
• Expected investment return	7.25% per year for 2022, 7.50% for 2023 and 7.50% for 2024																					
• Expenses	\$2,600,000 added to current year normal cost (expected expenses reflecting current year PBGC premiums)																					
• Long-term 417(e) rates for actuarial equivalence	Interest: 4.71% (first 5 years), 5.41% (years thereafter) Mortality: Code 417(e) applicable mortality table RP-2014 backed off to 2006 employee and retiree mortality tables with no collar distinction, blended 50% males and 50% females with generational mortality improvements based on the projection scale MP-2021.																					

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

Demographic assumptions			
•	Withdrawal	See table of sample rates.	
•	Disability incidence	See table of sample rates.	
•	Retirement age	Percentage per year of service	
—	Administrative	Attained age	0-29 years 30 years and above
		55	5% 2%
		56 – 59	3% 2%
		60	3% 5%
		61	10% 10%
		62	15% 10%
		63	15% 25%
		64	15% 15%
		65	20% 30%
		66 – 67	30% 40%
		68 - 69	45% 40%
		70 and above	100% 100%
—	Real Estate Non-Exempt	Attained age	Percentage
		55	10%
		56 – 60	3%
		61	10%
		62	35%
		63 – 64	20%
		65	35%
		66 – 69	50%
		70 and above	100%
—	Factory	Percentage per year of service	
		Attained age	0-29 years 30 years and above
		55	2% 0%
		56 – 59	2% 0%
		60	5% 0%
		61	5% 10%
		62	35% 30%
		63 – 64	25% 45%
		65	50% 45%
		66 – 67	75% 75%
		68 - 69	50% 75%
		70 and above	100% 100%
—	Spartanburg and Brownwood	Attained age	Percentage

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

55	10%
56 – 61	5%
62	35%
63 – 64	25%
65 – 69	50%
70 and above	100%

– Sterling Hourly

Percentage per year of service

Attained age	30 years and above	
	0-29 years	
55 – 56	5%	0%
57 – 61	5%	5%
62	25%	25%
63 – 64	15%	25%
65 - 69	40%	50%
70 and above	100%	100%

– Baker, Knapp & Tubbs Hourly

Attained age	Percentage
55	10%
56 – 60	5%
61	15%
62 – 64	5%
65	15%
66 – 69	30%
70 and above	100%

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

- **Benefit commencement age for**

– Future vested deferred	63
– Current vested deferred	The earliest of: (1) age 62, if unreduced benefits are available and the participant has met the 30-year service requirement. (2) age 63, if the participant has met the location-specific service requirement for early commencement; and (3) 65 or SSNRA (location-specific) if the participant has not met the location-specific service requirement for early commencement

- Spouse assumptions

	<u>Male participants</u>	<u>Female participants</u>
– Percentage married	90%	50%
– Spouse age difference	3 years younger	3 years older

Form of payment	<u>Lump sum</u>	<u>Single life</u>	<u>50% J&S</u>	<u>75%J&S</u>
• Active retirements	0%	60%	0%	40%
• Future vested deferred	0%	60%	0%	40%
• Future disabilities	0%	60%	0%	40%
• Future deaths	0%	0%	100%	0%
• Current vested deferred	0%	60%	0%	40%
Unpredictable contingent event assumptions	Not applicable			

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

Table of sample rates

Withdrawal Rates

WITHDRAWAL RATES FOR ADMINISTRATIVE						
Attained age	YEARS OF SERVICE					
	0	1	2	3	4	5+
20	26.25%	26.25%	26.25%	26.25%	26.25%	23.63%
25	21.45%	21.45%	21.45%	21.45%	21.45%	19.31%
30	19.05%	17.85%	16.50%	16.20%	16.20%	14.58%
35	19.05%	17.85%	16.50%	15.30%	14.25%	10.67%
40	19.05%	17.85%	16.50%	15.30%	14.25%	7.56%
45	19.05%	17.85%	16.50%	15.30%	14.25%	5.27%
50	19.05%	17.85%	16.50%	15.30%	14.25%	3.65%
55+	19.05%	17.85%	16.50%	15.30%	14.25%	2.97%

WITHDRAWAL RATES FOR REAL ESTATE NON-EXEMPT						
ATTAINED AGE	YEARS OF SERVICE					
	0	1	2	3	4	5+
20	35.50%	35.50%	35.50%	35.50%	35.50%	35.50%
25	33.30%	29.60%	28.10%	28.10%	28.10%	28.10%
30	33.30%	29.60%	26.20%	23.00%	20.30%	20.30%
35	33.30%	29.60%	26.20%	23.00%	20.10%	13.90%
40	33.30%	29.60%	26.20%	23.00%	20.10%	9.00%
45	33.30%	29.60%	26.20%	23.00%	20.10%	5.60%
50	33.30%	29.60%	26.20%	23.00%	20.10%	3.70%
55+	33.30%	29.60%	26.20%	23.00%	20.10%	3.30%

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

WITHDRAWAL RATES FOR FACTORY						
ATTAINED AGE	YEARS OF SERVICE					
	0	1	2	3	4	5+
20	17.28%	17.28%	17.28%	17.28%	17.28%	6.72%
25	13.68%	13.68%	13.68%	13.68%	13.68%	5.32%
30	10.44%	10.08%	10.08%	10.08%	10.08%	3.92%
35	10.44%	10.08%	9.36%	9.00%	8.64%	2.66%
40	10.44%	10.08%	9.36%	9.00%	8.64%	1.96%
45	10.44%	10.08%	9.36%	9.00%	8.64%	1.54%
50	10.44%	10.08%	9.36%	9.00%	8.64%	1.40%
55+	10.44%	10.08%	9.36%	9.00%	8.64%	1.40%

WITHDRAWAL RATES FOR OTHERS PLANS						
ATTAINED AGE	YEARS OF SERVICE					
	0	1	2	3	4	5+
20	31.20%	31.20%	31.20%	31.20%	31.20%	26.40%
25	24.70%	24.70%	24.70%	24.70%	24.70%	20.90%
30	18.85%	18.20%	18.20%	18.20%	18.20%	15.40%
35	18.85%	18.20%	16.90%	16.25%	15.60%	10.45%
40	18.85%	18.20%	16.90%	16.25%	15.60%	7.70%
45	18.85%	18.20%	16.90%	16.25%	15.60%	6.05%
50	18.85%	18.20%	16.90%	16.25%	15.60%	5.50%
55+	18.85%	18.20%	16.90%	16.25%	15.60%	5.50%

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

Disability Rates

ATTAINED AGE	ADMINISTRATIVE AND REAL ESTATE NON- EXEMPT		OTHER PLANS	
	MALE	FEMALE	MALE	FEMALE
20	0.029%	0.030%	0.151%	0.089%
25	0.038%	0.047%	0.219%	0.150%
30	0.048%	0.080%	0.309%	0.252%
35	0.069%	0.136%	0.431%	0.388%
40	0.117%	0.211%	0.597%	0.547%
45	0.202%	0.323%	0.829%	0.777%
50	0.358%	0.533%	1.224%	1.201%
55	0.722%	0.952%	2.118%	1.962%
60	1.256%	1.159%	3.240%	2.326%
65	1.753%	1.358%	4.369%	2.718%

Actuarial methods for funding**Asset methods**

The asset valuation method is an average of the adjusted market value for each year end during the last 2 years preceding the valuation date. The adjusted market value is the market value at each determination date adjusted to the valuation date based on actual cash flows and expected interest at the lesser of the expected rate of return and the third segment rate. This amount is adjusted to be no greater than 110% and no less than 90% of the fair market value, as defined in IRC Section 430.

A characteristic of this asset method is that, over time, it is slightly more likely to produce an actuarial value of assets that is less than the market value of assets than an actuarial value that is greater than the market value.

Participant methods

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

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

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

Insurance contracts: The plan has insurance annuity contracts for certain Spartanburg Factory participants covering part of their benefit. Such participants are valued with benefits net of the annuity covered by the insurance contract.

Minimum funding methods

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

A detailed description of the calculation follows:

- The plan's valuation date is the beginning of the plan year.
- An individual's **funding target** is the present value of future benefits based on credited service and average pay as of the beginning of the plan year, and an individual's **target normal cost** is the present value of the benefit expected to accrue in the plan year. If multiple decrements are used, the funding target and the target normal cost for an individual are the sum of the component funding targets and target normal costs associated with the various anticipated separation dates.
- This plan provides disability benefits that are only partially based on a participant's accrued benefit or years of service. This benefit is allocated to funding target based on the accrued benefit on the valuation date plus a portion of the excess of the benefit over the accrued benefit multiplied by the ratio of the participant's service at the beginning of the plan year to their service at each decrement age. This benefit is allocated to target normal cost based on the proportionate benefit attributable to the increase in the participant's service and compensation during the plan year.
- The plan's **target normal cost** is the sum of the individual target normal costs, and the plan's **funding target** is the sum of the individual funding targets for all participants under the plan.

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (i) - Single Transactions in Excess of 5% of Plan Assets						
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	\$ 251,778,892	\$ -	\$ 251,778,892	\$ 251,778,892	\$ -
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	-	97,598,000	101,385,283	97,598,000	(3,787,283)
Blackrock S&P 500 Equal Weight Equity Index Fund	Common/Collective Fund	-	231,819,258	117,740,272	231,819,258	114,078,986
JPMCB Global Select Equity Fund	Registered Investment Company	132,000,000	-	132,000,000	132,000,000	-
Fidelity 500 Index Fund	Registered Investment Company	-	430,000,000	272,868,493	430,000,000	157,131,507
Fidelity U.S. Bond Index	Registered Investment Company	86,461,420	-	86,461,420	86,461,420	-
Fidelity Long Term Treasury Bond	Registered Investment Company		76,127,619	79,580,251	76,127,619	(3,452,632)
Fidelity Intermediate Treasury Bond	Registered Investment Company		93,220,353	91,805,197	93,220,353	1,415,156
S&P 50 Flagship SL Fund	Common/Collective Fund	323,490,000	-	323,490,000	323,490,000	-

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS (CONTINUED)
YEAR ENDED DECEMBER 31, 2024

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Selling Price	(g) Cost	(h) Current Value	(i) Net Gain (Loss)
Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets						
Fidelity 500 Index Fund	Registered Investment Company	\$ 13,051,667 -	\$ - 451,462,670	\$ 13,051,667 288,481,933	\$ 13,051,667 451,462,670	\$ - 162,980,737
Fidelity Long Term Treasury Bond	Registered Investment Company	2,741,985 -	- 77,878,834	2,741,985 81,357,760	2,741,985 77,878,834	- (3,478,925)
Fidelity Intermediate Treasury Bond	Registered Investment Company	2,676,379 -	- 95,304,829	2,676,379 93,822,151	2,676,379 95,304,829	- 1,482,679
Goldman Sachs Financial Square Government Fund	Cash Equivalent	331,492,559 -	- 243,558,829	331,492,559 243,558,829	331,492,559 243,558,829	- -
Blackrock - ACWI Ex-US Superfund A	Common/Collective Fund	251,778,892 -	- 97,598,000	251,778,892 101,385,283	251,778,892 97,598,000	- (3,787,283)
Blackrock S&P 500 Equal Weight Equity Index Fund	Common/Collective Fund	- -	- 240,134,214	- 121,003,517	- 240,134,214	- 119,130,697
JPMCB Global Select Equity Fund	Registered Investment Company	138,570,000	-	138,570,000	138,570,000	-
Fidelity U.S. Bond Index	Registered Investment Company	111,461,420	-	111,461,420	111,461,420	-
S&P 50 Flagship SL Fund	Common/Collective Fund	338,490,000	-	338,490,000	338,490,000	-
JPMCB U.S. Active Core Equity Fund	Common/Collective Fund	83,550,077	-	83,550,077	83,550,077	-

There were no category (ii) or (iv) reportable transactions for the year ended December 31, 2024.

Columns (e) and (f) are omitted as they are not applicable.

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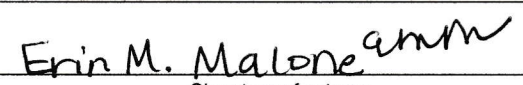
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

- ▶ **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 KOHLER CO. PENSION PLAN	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF KOHLER CO. & SUBSIDIARIES	D Employer Identification Number (EIN) 39-0402810	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information			
1 Enter the valuation date: Month <u>01</u> Day <u>01</u> Year <u>2024</u>			
2 Assets:			
a Market value	2a	1,595,158,526	
b Actuarial value	2b	1,597,474,050	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	8,051	705,446,903	705,446,903
b For terminated vested participants	6,936	241,789,145	241,789,145
c For active participants	9,560	358,427,781	381,097,971
d Total	24,547	1,305,663,829	1,328,334,019
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			5.19%
6 Target normal cost			
a Present value of current plan year accruals			32,177,052
b Expected plan-related expenses			2,600,000
c Target normal cost			34,777,052

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

SIGN HERE	 Signature of actuary	<u>10/07/2025</u> Date
ERIN M. MALONE, ASA, EA Type or print name of actuary		2308152 Most recent enrollment number
MERCER Firm name		713-276-2127 Telephone number (including area code)
500 DALLAS STREET, SUITE 1400 HOUSTON TX 77002 Address of the firm		

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	203,326,381
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	203,326,381
10	Interest on line 9 using prior year's actual return of <u>17.44%</u>	0	35,460,121
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>5.32%</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	238,786,502

Part III Funding Percentages			
14	Funding target attainment percentage	14	102.28%
15	Adjusted funding target attainment percentage	15	120.26%
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	106.83%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

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

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20	Quarterly contributions and liquidity shortfalls:	
	a Did the plan have a "funding shortfall" for the prior year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	c If line 20a is "Yes," see instructions and complete the following table as applicable:	

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:

1st segment: 4.75%	2nd segment: 4.87%	3rd segment: 5.59%	<input type="checkbox"/> N/A, full yield curve used
-----------------------	-----------------------	-----------------------	---

b Applicable month (enter code)..... **21b** 4

22 Weighted average retirement age **22** 63

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years **28** 0

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... **29** 0

30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29) **30** 0

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)..... **31a** 34,777,052

b Excess assets, if applicable, but not greater than line 31a **31b** 30,353,529

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

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

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).... **34** 4,423,523

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	4,423,523	4,423,523

36 Additional cash requirement (line 34 minus line 35)..... **36** 0

37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)..... **37** 0

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

a Total (excess, if any, of line 37 over line 36)..... **38a** 0

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances **38b** 0

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

40 Unpaid minimum required contributions for all years **40** 0

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

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

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

The average retirement age shown on line 22 has been calculated by assuming the following retirement rates and no decrements other than retirement for this calculation. All retirements are assumed to occur at mid-year, except for the 100% retirement age.

The weighted average retirement age of 63 was determined by weighting the average retirement age for each legacy group by the proportion of the active population attributable to each group.

Administrative

< 30 YOS				≥ 30 YOS			
(A)	(B)	(C)	(D)	(A)	(B)	(C)	(D)
Retirement Age	Retirement Percent	Weight	Product A x B x C	Retirement Age	Retirement Rate	Weight	Product A x B x C
55.5	5.0%	1.0000	2.78	55.5	2.0%	1.0000	1.11
56.5	3.0%	0.9500	1.61	56.5	2.0%	0.9800	1.11
57.5	3.0%	0.9215	1.59	57.5	2.0%	0.9604	1.10
58.5	3.0%	0.8939	1.57	58.5	2.0%	0.9412	1.10
59.5	3.0%	0.8670	1.55	59.5	2.0%	0.9224	1.10
60.5	3.0%	0.8410	1.53	60.5	5.0%	0.9039	2.73
61.5	10.0%	0.8158	5.02	61.5	10.0%	0.8587	5.28
62.5	15.0%	0.7342	6.88	62.5	10.0%	0.7729	4.83
63.5	15.0%	0.6241	5.94	63.5	25.0%	0.6956	11.04
64.5	15.0%	0.5305	5.13	64.5	15.0%	0.5217	5.05
65.5	20.0%	0.4509	5.91	65.5	30.0%	0.4434	8.71
66.5	30.0%	0.3607	7.20	66.5	40.0%	0.3104	8.26
67.5	30.0%	0.2525	5.11	67.5	40.0%	0.1862	5.03
68.5	45.0%	0.1768	5.45	68.5	40.0%	0.1117	3.06
69.5	45.0%	0.0972	3.04	69.5	40.0%	0.0670	1.86
70	100.0%	0.0535	3.77	70	100.0%	0.0402	2.84
Weighted Average Age			64.07	Weighted Average Age			64.22

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

Real-Estate Non-Exempt

(A)	(B)	(C)	(D)
Retirement Age	Retirement Percent	Weight	Product A x B x C
55.5	10.0%	1.0000	5.55
56.5	3.0%	0.9000	1.52
57.5	3.0%	0.8730	1.50
58.5	3.0%	0.8468	1.49
59.5	3.0%	0.8214	1.47
60.5	3.0%	0.7968	1.45
61.5	10.0%	0.7729	4.75
62.5	35.0%	0.6956	15.22
63.5	20.0%	0.4521	5.74
64.5	20.0%	0.3617	4.67
65.5	35.0%	0.2894	6.63
66.5	50.0%	0.1881	6.25
67.5	50.0%	0.0940	3.17
68.5	50.0%	0.0470	1.61
69.5	50.0%	0.0235	0.82
70	100.0%	0.0118	0.83
Weighted Average Age			62.67

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

Factory

< 30 YOS				≥ 30 YOS			
(A)	(B)	(C)	(D)	(A)	(B)	(C)	(D)
Retirement Age	Retirement Rate	Weight	Product A x B x C	Retirement Age	Retirement Rate	Weight	Product A x B x C
55.5	2.0%	1.0000	1.11				
56.5	2.0%	0.9800	1.11				
57.5	2.0%	0.9604	1.10				
58.5	2.0%	0.9412	1.10				
59.5	2.0%	0.9224	1.10				
60.5	5.0%	0.9039	2.73				
61.5	5.0%	0.8587	2.64	61.5	10.0%	1.0000	6.15
62.5	35.0%	0.8158	17.85	62.5	30.0%	0.9000	16.88
63.5	25.0%	0.5303	8.42	63.5	45.0%	0.6300	18.00
64.5	25.0%	0.3977	6.41	64.5	45.0%	0.3465	10.06
65.5	50.0%	0.2983	9.77	65.5	45.0%	0.1906	5.62
66.5	75.0%	0.1491	7.44	66.5	75.0%	0.1048	5.23
67.5	75.0%	0.0373	1.89	67.5	75.0%	0.0262	1.33
68.5	50.0%	0.0093	0.32	68.5	75.0%	0.0066	0.34
69.5	50.0%	0.0047	0.16	69.5	75.0%	0.0016	0.09
70	100.0%	0.0023	0.16	70	100.0%	0.0004	0.03
Weighted Average Age			63.31	Weighted Average Age			63.71

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

Spartanburg and Brownwood

(A)	(B)	(C)	(D)
Retirement Age	Retirement Rate	Weight	Product A x B x C
55.5	10.0%	1.0000	5.55
56.5	5.0%	0.9000	2.54
57.5	5.0%	0.8550	2.46
58.5	5.0%	0.8123	2.38
59.5	5.0%	0.7716	2.30
60.5	5.0%	0.7331	2.22
61.5	5.0%	0.6964	2.14
62.5	35.0%	0.6616	14.47
63.5	25.0%	0.4300	6.83
64.5	25.0%	0.3225	5.20
65.5	50.0%	0.2419	7.92
66.5	50.0%	0.1209	4.02
67.5	50.0%	0.0605	2.04
68.5	50.0%	0.0302	1.04
69.5	50.0%	0.0151	0.53
70	100.0%	0.0076	0.53
Weighted Average Age			62.16

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

Sterling Hourly

< 30 YOS				≥ 30 YOS			
(A)	(B)	(C)	(D)	(A)	(B)	(C)	(D)
Retirement Age	Retirement Rate	Weight	Product A x B x C	Retirement Age	Retirement Rate	Weight	Product A x B x C
55.5	5.0%	1.0000	2.78	55.5	0.0%	1.0000	0.00
56.5	5.0%	0.9500	2.68	56.5	0.0%	1.0000	0.00
57.5	5.0%	0.9025	2.59	57.5	5.0%	1.0000	2.88
58.5	5.0%	0.8574	2.51	58.5	5.0%	0.9500	2.78
59.5	5.0%	0.8145	2.42	59.5	5.0%	0.9025	2.68
60.5	5.0%	0.7738	2.34	60.5	5.0%	0.8574	2.59
61.5	5.0%	0.7351	2.26	61.5	5.0%	0.8145	2.50
62.5	25.0%	0.6983	10.91	62.5	25.0%	0.7738	12.09
63.5	15.0%	0.5238	4.99	63.5	25.0%	0.5803	9.21
64.5	15.0%	0.4452	4.31	64.5	25.0%	0.4353	7.02
65.5	40.0%	0.3784	9.91	65.5	50.0%	0.3264	10.69
66.5	40.0%	0.2270	6.04	66.5	50.0%	0.1632	5.43
67.5	40.0%	0.1362	3.68	67.5	50.0%	0.0816	2.75
68.5	40.0%	0.0817	2.24	68.5	50.0%	0.0408	1.40
69.5	40.0%	0.0490	1.36	69.5	50.0%	0.0204	0.71
70	100.0%	0.0294	2.07	70	100.0%	0.0102	0.72
Weighted Average Age			63.10	Weighted Average Age			63.46

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

Group	YOS	Active Count	Age	Age x Active Count
Administrative	< 30	3,200	64.07	205,024
	>= 30	209	64.22	13,422
Real Estate Non-Exempt		2,275	62.67	142,574
Factory	< 30	1,012	63.31	64,070
	>= 30	494	63.71	31,473
Spartanburg and Brownwood		612	62.16	38,042
Sterling Hourly	< 30	1,705	63.10	107,586
	>= 30	53	63.46	3,363
Total		9,560		605,553
Weighted Average Age				63.34

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2024	2,806,483	3,194,472	65,450,390	71,451,345
2025	5,367,847	4,244,017	64,018,145	73,630,009
2026	7,930,497	5,612,888	62,517,799	76,061,184
2027	10,502,050	7,481,581	60,952,897	78,936,528
2028	12,944,576	8,862,702	59,253,449	81,060,727
2029	15,370,205	10,219,012	57,516,113	83,105,330
2030	17,582,167	11,677,055	55,693,029	84,952,251
2031	19,684,324	12,753,275	53,760,809	86,198,408
2032	21,502,385	13,787,218	51,758,749	87,048,352
2033	23,112,108	14,784,451	49,668,374	87,564,933
2034	24,661,529	15,878,879	47,557,492	88,097,900
2035	25,997,951	16,890,908	45,417,497	88,306,356
2036	27,229,169	17,783,070	43,218,377	88,230,616
2037	28,474,870	18,552,276	40,965,745	87,992,891
2038	29,509,289	19,223,628	38,666,615	87,399,532
2039	30,492,069	19,938,649	36,329,549	86,760,267
2040	31,286,199	20,388,864	33,964,623	85,639,686
2041	32,006,451	20,683,872	31,583,502	84,273,825
2042	32,577,821	20,912,935	29,199,303	82,690,059
2043	33,044,473	21,122,862	26,826,351	80,993,686
2044	33,420,129	21,227,083	24,480,125	79,127,337
2045	33,621,068	21,179,612	22,176,960	76,977,640
2046	33,709,839	20,938,053	19,933,857	74,581,749
2047	33,561,472	20,634,453	17,768,155	71,964,080
2048	33,325,805	20,301,275	15,697,086	69,324,166
2049	32,983,141	19,832,536	13,737,254	66,552,931
2050	32,490,671	19,366,579	11,903,814	63,761,064
2051	31,766,054	18,786,552	10,209,620	60,762,226
2052	30,963,073	18,101,435	8,664,387	57,728,895
2053	30,124,045	17,429,933	7,274,083	54,828,061
2054	29,162,233	16,659,541	6,040,641	51,862,415
2055	28,043,220	15,897,071	4,961,958	48,902,249
2056	26,890,388	15,087,813	4,032,216	46,010,417
2057	25,673,974	14,254,474	3,242,449	43,170,897
2058	24,407,464	13,418,126	2,581,251	40,406,841
2059	23,091,833	12,619,792	2,035,587	37,747,212
2060	21,728,143	11,776,685	1,591,565	35,096,393
2061	20,347,731	10,944,078	1,235,130	32,526,939
2062	18,979,406	10,120,032	952,673	30,052,111
2063	17,637,184	9,299,803	731,497	27,668,484
2064	16,321,931	8,501,959	560,143	25,384,033
2065	15,053,470	7,742,245	428,599	23,224,314
2066	13,835,931	7,018,816	328,364	21,183,111
2067	12,676,755	6,337,151	252,389	19,266,295
2068	11,577,917	5,697,928	194,979	17,470,824
2069	10,541,202	5,101,748	151,636	15,794,586
2070	9,566,783	4,548,596	118,862	14,234,241
2071	8,654,316	4,038,015	93,990	12,786,321
2072	7,802,831	3,569,179	75,010	11,447,020
2073	7,011,043	3,140,996	60,425	10,212,464

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

Effective date and plan year	Original plan: January 1, 1975 Restated plan: January 1, 2016 Plan year: Calendar year
Status of the plan	The plan has ongoing benefit accruals and new employees are eligible to participate in the plan once they satisfy the participation requirements.
Significant events that occurred during the year	The divestiture of the Kohler Energy group, impacting approximately 1,764 active participants with an accrued benefit under the Kohler Co. Pension Plan, occurred on April 30, 2024.

Definitions

- Participation**
 Regular full-time employees participate on the first day of the plan year immediately preceding or next following (whichever is nearest) the later of:
 - the participant’s 21st birthday or
 - the last day of the 12-month period following employment during which 1,000 hours were completed. If 1,000 hours were not completed during this initial 12-month period, then the last day of the plan year in which 1,000 hours were completed.

Exceptions:

Administrative – Searcy Salaried Associates: Participate no earlier than January 1, 1987.

Administrative – Union City Salaried Associates: Participate no earlier than November 15, 1988.

Administrative – Malvern Salaried Associates: Participate no earlier than November 1, 1990.

Administrative – Morgantown Associates: After 1995, there are no new participants.

Factory Hourly Associates: Age requirement does not apply.

Spartanburg and Brownwood Factory Hourly Associates: Participate no earlier than January 1, 1989. Prior to January 1, 2017, also must have been enrolled in the plan by making the required employee contribution. Beginning January 1, 2017, employee contributions were eliminated and are no longer required in order to participate.

Sterling Hourly – Sheridan Associates: Participate on the date of employment if customary employment is at least 1,000 hours of service during a 12-month of employment. If not, the completion date of 12 months of employment if earned 1,000, else the first day of the plan year following a plan year with 1,000 hours of service.

Sterling Hourly – Morgantown Associates: After 1994, there are no new participants.

Sterling Hourly – Searcy Associates: After 2009, there are no new participants.

Baker, Knapp & Tubbs Hourly Associates: Same as Sterling Hourly – Sheridan Associates.

Schedule SB, Part V — Summary of Plan Provisions

• Employee contributions	No further contributions shall be made to the Plan by participants.
	Exceptions:
	Spartanburg and Brownwood Factory Hourly Associates: Two percent of participant's pay in each contract year. In the event of death, the beneficiary is guaranteed the accumulated contributions with interest, as mandated by OBRA '89, offset by any benefits already received under the plan. In the event of termination other than death and before eligible for a Normal, Early, or Deferred Vested Retirement benefit, the accumulated contributions with interest is likewise payable to the participant. Effective January 1, 2017, the contributory formula was frozen. No further employee contributions shall be made to the Plan by participants.
• Kohler Factory - Tenured Associate (formerly Tier A)	Factory Hourly Associates hired prior to December 20, 2010.
• Kohler Factory - Associate (formerly Tier B)	Factory Hourly Associates hired on or after December 20, 2010. This category also covers employees rehired, recalled after regular recall rights have expired, or transferred into the Factory Hourly Associates group on or after December 20, 2010.
• Vesting service	One year of Vesting Service will be granted for each plan year in which an employee works at least 1,000 hours. Partial year service shall be granted on the basis of one month for each 150 hours worked.
	Exceptions:
	Administrative – Sterling Salaried Associated: Service at Owens-Corning Fiberglass, Searcy (Polar Stainless Products), Union City (Kinkead Payroll Group), or Malvern is counted in Vesting Service.
	Sterling Hourly – Sheridan Associates: Partial year service shall be granted on the basis on one month for 84 hours worked, computed to the nearest one-twelfth of a year.
	Sterling Hourly – Huntsville Associates: Owens-Corning service plus Vesting Service accrued on or after January 1, 1992. Partial service is not credited if less than 501 hours are completed.
	Sterling Hourly – Union City and Malvern Associates: Partial service is not credited if less than 501 hours are completed.
	Sterling Hourly – Searcy Associates: One year of benefit will be granted for each plan year in which a participant works at least 1,000 hours.
	Baker, Knapp & Tubbs Associates: "Eligibility Service" under the Prior Plan as of December 31, 1986 plus service based on hours after January 1, 1987.
• Benefit service	After participation, one year of Benefit Service will be granted for each plan year in which a participant works at least 1,000 hours. Partial year service shall be granted on the basis of one month for each 150 hours worked.
	Administrative Associates – excluded periods of service:
	Phillips Associates: service before October 31, 1986
	Searcy Salaried: service before January 1, 1987,
	Union City Salaried: service before November 15, 1988,
	McGuire Associates: service before January 1, 1989,
	Malvert Exempt: service before November 1, 1990,
	Robern Non-Exempt: service before July 1, 2003, and
	Sauk Technologies: service before January 1, 2004

Schedule SB, Part V — Summary of Plan Provisions

Exceptions:

Administrative Associates: Service at Owens-Corning Fiberglass is included.
 Administrative – Baker, Knapp & Tubbs and Sterling Salaried Associates: “Benefit Service” under the Prior Plan as of December 31, 1996 plus Vesting Service based on hours after January 1, 1987.

Sterling Hourly – Sheridan Associates: Partial year service shall be granted on the basis of one month for each 80 hours worked, computed to the nearest one-twelfth of a year.

Sterling Hourly – Huntsville Associates: Owens-Corning service plus Benefit Service accrued on or after January 1, 1992. Partial service is not credited if less than 501 hours are completed.

Sterling Hourly – Union City and Malvern Associates: Partial service is not credited if less than 501 hours are completed.

Sterling Hourly – Searcy Associates: One year of Benefit Service will be granted for each plan year in which a participant works at least 1,800 hours. Partial service shall be granted on the basis of one tenth of a year for each 180 hours worked.

Baker, Knapp & Tubbs Associates: “Benefit Service” under the Prior Plan as of December 31, 1986 plus Vesting Service based on hours after January 1, 1987.

-
- Pensionable earnings
 Total direct cash compensation as reported on Form W-2 plus 401(k), 125, and 129 deferrals or transportation allowances under 132(f)(4), limited by the 401(a)(17) limit.
 Spartanburg and Brownwood Factory hourly Associates: Straight-time earnings for services rendered plus 401(k) and 125 deferrals, limited by the 401(a)(17) limit.

 - Final average pay
 Monthly average Pay of the highest five consecutive full calendar years of Benefit Service during the last ten years as a participant.

 - Three-year final average earnings
 Monthly average pay (up to Social Security Covered Compensation) of the final three consecutive full calendar years immediately prior to termination.

Normal retirement

- Eligibility
 Age 65 and the earlier of the completion of five years of Vesting Service or the fifth anniversary of plan participation.
-

Schedule SB, Part V — Summary of Plan Provisions

• **Benefit**

Administrative Associates: A monthly benefit equal to the greater of:

- 1 One thirty-fifth of: 50% of Final Average Pay less 21% of Three-year final average earnings, multiplied by years of Benefit Service (maximum 35 years).
- 2 The multiplier from the chart below multiplied by Benefit Service.

Plan	Benefit
Administrative	\$35.00
Sterling Salaried	\$20.00
Baker Knapp & Tubbs Salaried	\$20.00
McGuire Salaried	\$20.00
Real Estate Non-Exempt	\$16.00
Robern Exempt	\$35.00
Robern Non-Exempt	\$20.00
Hattiesburg	\$20.00
Sauk Technologies	\$35.00

Administrative – Sterling Salaried Associates: The benefit is offset by any benefits payable under the prior plan (i.e., Frozen Rockwell benefits for the Sterling Faucet Division and Frozen Owens-Corning benefits for the Owens-Corning Division).

Administrative – Morgantown Associates: \$18.00 times benefit service.

Factory Hourly Associates:

Tenured Associates (formerly Tier A): A monthly benefit equal to the scheduled multiplier times Benefit Service:

Effective Date	Scheduled Multiplier
January 1, 2006	\$31.00
January 1, 2007	\$32.00
January 1, 2008	\$33.00
January 1, 2009	\$34.00
January 1, 2010	\$35.00
January 1, 2011	\$35.50
January 1, 2013	\$36.00
January 1, 2015	\$36.50
January 1, 2016	\$37.50
January 1, 2017	\$38.50
January 1, 2018	\$39.50
January 1, 2019	\$40.50
January 1, 2020	\$42.00
January 1, 2021	\$42.50
January 1, 2022	\$44.00
January 1, 2023	\$44.50
January 1, 2024	\$45.50

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January 1, 2025	\$46.50
January 1, 2026	\$47.50
January 1, 2027	\$48.50
January 1, 2028	\$49.50

Associates who terminate (or die) are eligible for the benefit multiplier in effect on the date of termination (or death) and are not eligible for any future increases. The benefit multiplier is frozen upon termination (or death).

Factory Associates (formerly Tier B): A monthly benefit equal to the scheduled multiplier times Benefit Service:

Effective Date	Scheduled Multiplier
January 1, 2024	\$23.00
January 1, 2025	\$23.50
January 1, 2026	\$23.75
January 1, 2027	\$24.25
January 1, 2028	\$24.50

Associates who terminate (or die) are eligible for the benefit multiplier in effect on the date of termination (or death) and are not eligible for any future increases. The benefit multiplier is frozen upon termination (or death).

Spartanburg Factory Hourly Associates: An annual benefit equal to 5.542% of accumulated employee contributions without interest through December 31, 2016 plus a) if contributed as of December 31, 2015 or b) otherwise.

a) Tiered multiplier benefit times Benefit Service effective January 1, 2017

Vesting Service	Tiered Multiplier
0 – 10 years	\$18.00
10 – 20 years	\$21.00
20+ years	\$24.00

b) \$18.00 times Benefit Service effective January 1, 2017

For purposes of determining which tier (under “a”) above) applies in a given year, service from the associates entire employment is considered, not just that earned after January 1, 2017.

Annuities were purchased from John Hancock in 1999, so Kohler is only responsible for payment of the benefit that accrued after this date.

Brownwood Factory Hourly Associates: An annual benefit equal to 5.542% of accumulated employee contributions without interest through December 31, 2016 plus a) if contributed as of December 31, 2015 or b) otherwise.

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a) Tiered multiplier benefit times Benefit Service effective January 1, 2017

Vesting Service	Tiered Multiplier
0 – 10 years	\$18.00
10 – 20 years	\$21.00
20+ years	\$24.00

b) \$18.00 times Benefit Service effective January 1, 2017

For purposes of determining which tier (under "a)" above) applies in a given year, service from the associates entire employment is considered, not just that earned after January 1, 2017.

Sterling Hourly – Sheridan Associates: \$16.00 times Benefit Service (maximum 30 years)

Sterling Hourly – Huntsville Associates: A monthly benefit equal to the greater of:

A. The member's accrued benefit as of December 31, 1989 based on the benefit formula, final average compensation, and Benefit Service at Sterling as of that date, plus the scheduled multiplier from the chart below multiplied by Benefit Service after December 31, 1989

Effective Date	Scheduled Multiplier
June 1, 2005	\$23.00
June 1, 2006	\$24.00
June 1, 2007	\$25.00
June 1, 2008	\$26.00
June 1, 2009	\$27.00
June 1, 2010	\$28.00
June 1, 2012	\$28.50
June 1, 2013	\$29.00
June 14, 2023	\$29.00 (up to 19 years of benefit service) plus \$32.00 (for additional years of benefit service after 19 years)

B. The scheduled multiplier from the chart above multiplied by Benefit Service including service with Owens-Corning, less frozen benefits accrued under the Owens-Corning plan.

Sterling Hourly – Union City Associates: A monthly benefit equal to the greater of:

- One thirty-fifth of: 50% of Final Average Pay less 21% of Three-Year final average earnings, multiplied by years of Benefit Service (maximum 35 years).
- \$22.00 times Benefit Service.

Sterling Hourly – Malvern Associates: A monthly benefit equal to the scheduled multiplier times Benefit Service.

Effective Date	Scheduled Multiplier
March 1, 2005	\$17.50
March 1, 2006	\$18.00
March 1, 2007	\$18.50

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March 1, 2008	\$19.00
March 1, 2009	\$19.50
March 1, 2011	\$21.00
March 1, 2013	\$21.50

Associates who terminate (or die) are eligible for the benefit multiplier in effect on the date of termination (or death) and are not eligible for any future increases. The benefit multiplier is frozen upon termination (or death).

Sterling Hourly – Searcy Associates: A monthly benefit equal to the scheduled multiplier times Benefit Service.

Effective Date	Scheduled Multiplier
January 1, 2006	\$23.50
March 10, 2008	\$24.00
March 15, 2009	\$24.50
March 14, 2010	\$25.00

Scheduled benefit increases for the current union contract period only will be provided to participants who terminate retirement eligible on or after January 1, 1999.

Sterling Hourly – Morgantown Associates: \$14.00 times Benefit Service.

Baker, Knapp & Tubbs Hourly Associates:

Location	Monthly Benefit
Andrews	\$16.00 times Benefit Service up to 35 years
Grand Rapids	\$12.50 times Benefit Service up to 30 years
High Point	\$10.00 times Benefit Service up to 30 years
Hildebran	\$9.00 times Benefit Service up to 30 years
Holland	\$17.25 times Benefit Service
Mocksville	\$11.00 times Benefit Service up to 30 years
McGuire (Carpenters)	\$22.00 times Benefit Service
McGuire (Upholsters/Steelworkers)	\$22.50 effective February 1, 2005 \$23.00 effective February 1, 2006

Early retirement

- Eligibility Age 55 and completion of ten years of Vesting Service.
Exceptions:
 Spartanburg and Brownwood Factory Hourly Associates: Age 55 and ten years of Vesting Service or age 62.
 Sterling Hourly – Huntsville and Malvern Associates: Age 55 and ten years of Vesting Service or age 62 and five years of Vesting Service.

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Sterling Hourly – Searcy Associates: Age 55 and five years of Vesting Service.

Baker, Knapp & Tubbs Hourly – Andrews and Holland Associates: Age 55 and fifteen years of Vesting Service.

Baker, Knapp & Tubbs Hourly – McGuire Associates: Age 55 and five years of Vesting Service.

- Benefit

Administrative Associates:

If participant has attained 30 years of Vesting Service, the accrued benefit is reduced ½ of 1% for each month from SSNRA less three years.

Else, the accrued benefit is reduced by ½ of 1% for the first 120 months and 3/10 of 1% for each of the next 24 months that benefit payment precedes SSNRA.

Administrative and Sterling Hourly – Morgantown Associates: The accrued benefit is reduced according to the table below for employees hired before July 15, 1993.

Percentage of age at benefit	Accrued benefit
55	50.87%
56	55.87%
57	61.46%
58	67.73%
59	74.78%
60	82.75%
61	91.76%
62	100.00%

Factory Hourly Associates: If the participant is at least 60 and has completed 30 years of Vesting Service, the accrued benefit is reduced ½ of 1% for each month retirement precedes age 62. Else, the accrued benefit is reduced by ½ of 1% for each month retirement precedes Normal Retirement Age.

Spartanburg and Brownwood Factory Hourly Associates: The accrued benefit is reduced ½ of 1% for each month retirement precedes Normal Retirement Age.

Sterling Hourly – Sheridan Associates: The accrued benefit is reduced ½ of 1% for each of the first 120 months and 3/10 of 1% for each of the next 24 months that payment precedes Normal Retirement Age.

Sterling Hourly – Huntsville and Malvern Associates: Unreduced if participant is at least age 62 and has completed 30 years of Vesting Service. Else, the accrued benefit is reduced by ½ of 1% for each month retirement precedes Normal Retirement Age.

Sterling Hourly – Union City Associates: The accrued benefit is reduced the same as for Administrative Associates.

Sterling Hourly – Searcy Associates: The accrued benefit is reduced ½ of 1% for each month retirement precedes Normal Retirement Age.

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	<p>Baker, Knapp & Tubbs Hourly – Grand Rapids Associates: The accrued benefit is reduced 5/9 of 1% for each month retirement precedes Normal Retirement Age.</p> <p>Baker, Knapp & Tubbs hourly – McGuire Associates: The accrued benefit is reduced ½ of 1% for the first 120 months, 3/10 of 1% next 24 months retirement precedes Normal Retirement Age.</p> <p>Baker, Knapp & Tubbs Hourly – Other Associates: The accrued benefit is reduced ½ of 1% for each month retirement precedes Normal Retirement Age.</p>
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Deferred vested

<ul style="list-style-type: none"> • Eligibility 	<p>Five years of Vesting Service.</p>
<ul style="list-style-type: none"> • Benefit 	<p>The accrued benefit based on Benefit Service and Final Average Pay, if applicable, at termination and payable at normal retirement age, or payable after age 55 and under early retirement provisions if completed ten years of Vesting Service.</p> <p>Exceptions:</p> <p>Sterling Hourly – Searcy Associates: Same as above but no service requirement for early commencement.</p> <p>Baker, Knapp & Tubbs Hourly – Andrews and Holland Associates: Same as above but fifteen years of Vesting Service are required for early commencement.</p> <p>Baker, Knapp & Tubbs Hourly – McGuire Associates: Same as above but five years of Vesting Service are required for early commencement.</p>

Disability

<ul style="list-style-type: none"> • Eligibility 	<p>Factory Hourly Associates: Ten years of Vesting Service and upon qualifying for disability payments under either Social Security or Kohler’s LTD plan.</p> <p>Sterling Hourly – Sheridan Associates: Age 45 and ten years of Vesting Service.</p> <p>Baker, Knapp & Tubbs Hourly – Holland, Andrews, Grand Rapids: Fifteen years of Vesting Service and upon qualifying for disability payments under either Social Security or Kohler’s LTD Plan.</p> <p>All other groups: No explicit disability eligibility. Based on normal, early, or deferred vested retirement eligibility as of date of disability.</p>
<ul style="list-style-type: none"> • Benefit 	<p>Factory Hourly Associates: The accrued pension payable after six months.</p> <p>Sterling Hourly – Sheridan Associates: The accrued benefit based on Benefit Service to the time of disablement, less worker’s compensation, payable from the time of disability.</p> <p>Baker, Knapp & Tubbs Hourly – Holland, Andrews, Grand Rapids: Same as for Factory Hourly Associates.</p> <p>All other groups: Based on normal, early, or deferred vested provisions.</p>

Pre-retirement death

Eligibility	Five years of Vesting Service or reaching Normal Retirement Age.
Benefit	<p>Fifty percent of the benefit otherwise payable to the employee, reduced for early retirement and election of a 50% joint and survivor annuity, deferred to the employee’s retirement age.</p> <p>Exceptions:</p>

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Factory Hourly Associates: Same as the preretirement survivor benefit (see below), with the spouse being the beneficiary.

Sterling Hourly – Huntsville and Malvern Associates: Same as Factory Hourly Associates.

Sterling Hourly – Searcy Associates: If the participant attains the earlier of early retirement age or ten years of Vesting Service, the benefit is 55% of the accrued benefit adjusted by a factor of 0.9.

Pre-retirement death for unmarried participants

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- Eligibility Unmarried Factory Hourly Associates with twenty years of Benefit Service.
 - Benefit Fifty-percent of the benefit otherwise payable to the employee, reduced for early retirement, deferred to the employee's earliest retirement age.
If the employee and beneficiary's ages are more than five years apart, the 50% shall be increased (decreased) by 0.5% for each year the beneficiary's age is more than five years greater than (less than) the employee's age.
-

Form of benefits

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- Automatic form for unmarried participants The accrued benefit is payable for the lifetime of the employee only.
 - Automatic form for married participants Unless the employee elects otherwise, an actuarially equivalent 50% joint and survivor annuity with the spouse as beneficiary.
 - Optional forms An actuarially equivalent single life annuity, 50%, 75%, or 100% joint and survivor annuity, or a ten-year certain and life annuity. The beneficiary is specified by the employee.
Exceptions:
Administrative Associates, Factory Hourly Associates, Spartanburg Factory Hourly Associates, Brownwood Factory Hourly Associates, Sterling Hourly – Union City and Searcy Associates, and Baker, Knapp & Tubbs – Holland Associates: If annuity start date prior to July 1, 2008 may also have elected a 66-2/3% joint and survivor annuity.
Sterling Hourly – Huntsville Associates: May also elect a five-year certain and life annuity.
Sterling Hourly – Searcy Associates: May also elect a level income annuity.
 - Optional form conversion factors 1971 Group Annuity Mortality Table (weighted 90% male and 10% female) and 6% interest.
Exceptions:
Administrative – Morgantown Associates: 1984 Unisex Pension Mortality Table and 8.5% interest.
Sterling Hourly – Sheridan Associates: 1971 Group Annuity Mortality Table and 7.5% interest.
Sterling Hourly – Huntsville and Malvern Associates: 1984 Uniform Pension Mortality Table and 10% interest.
Sterling Hourly – Searcy Associates: 1971 Group Annuity Mortality Table (100% male with a six-year setback for beneficiary mortality) and 6% interest.
Sterling Hourly – Morgantown Associates: 1984 Unisex Pension Mortality Table and 8.5% interest.
-

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Baker, Knapp & Tubbs Hourly – McGuire Carpenter Associates: 1971 Group Annuity Mortality Table (weighted 90% male and 10% female) and 6% interest.

Baker, Knapp & Tubbs Hourly – Other Associates: 1984 Unisex Pension Mortality Table (weighted 90T male and 10% female) and 6% interest.

For commencements on or after January 1, 2021:

The greater of (i) the accrued benefit earned as of December 31, 2020 adjusted with the optional form conversion factors shown above and (ii) the accrued benefit earned as of commencement adjusted with 417(e) mortality and interest rates for the month of August preceding the first day of the plan year during which the payment occurs.

Miscellaneous

- | | |
|------------------------|---|
| • Maximum compensation | Compensation for any 12-month period used to determine accrued benefits may not exceed the limits in IRC Section 401(a)(17) for the calendar year in which the 12-month period begins. This limit is indexed annually. For 2024, the limit is \$345,000 |
| • Maximum benefits | Annual benefits may not exceed the limits in IRC Section 415. This limit is indexed annually. For 2024, the limit is \$275,000. |

Benefits included or excluded

Unless noted below, all benefits provided by the plan, as restated January 1, 2016 and amended through the Sixth Amendment, are included in this valuation:

- **Most recent plan amendments included:** The Sixth Amendment, executed on October 16, 2020. The Kohler Factory and Huntsville collectively bargained agreements were updated effective July 31, 2023 and June 14, 2023 respectively, which increases the benefit multipliers for each group.
- **Plan amendments excluded:** None.
- **Late retirement increases:**
 - *Active participants:* The plan provides benefit suspension notices to participants who work beyond normal retirement, therefore, late retirement actuarial increases only apply to participants who defer retirement beyond age 70 ½ and have not been included in the valuation.
 - *Deferred vested participants:* Current deferred vested participants over normal retirement age are not valued including the late retirement actuarial increases. The Plan distributes benefits to all deferred vested participants upon attaining age 65; any participants that are unpaid after age 65 because they cannot be located are not significant.
- **Internal Revenue Code limitations:** The limitations of Internal Revenue Code Section 415(b) and 401(a)(17) have been incorporated into our calculations.
- **IRC Section 416 rules for top-heavy plans:** We did not test whether this plan is top-heavy (when the present value of benefits for key employees equals or exceeds 60% of the present value for all participants). However, we expect that the plan is not top-heavy due to the large number of rank-

Schedule SB, Part V — Summary of Plan Provisions

and-file participants; therefore, the funding target and target normal cost do not reflect any liability for top-heavy benefit accruals.

Plan provisions specific to funding**Additional benefits included or excluded**

- **IRC Section 436 benefit restrictions:**
 - *Unpredictable contingent event benefits:* The plan does not have unpredictable contingent event benefits.
 - *Plan Amendments:* See above.
 - *Prohibited payments:* Limitations on prohibited benefits (if any) are reflected for annuity starting dates before the valuation date but are ignored for annuity starting dates on or after the valuation date.
 - *Benefit accruals:* The plan's funding target does not reflect any limitation on benefit accruals. The target normal cost does not reflect any limitation on benefit accruals.
- **Scheduled benefit increases:** Scheduled benefit increases effective after the end of the current plan year are excluded from minimum funding requirements.

Plan provision changes since prior valuation

- Maximum compensation and benefit amounts under IRS rules were updated from 2023 to 2024.
- The pension benefit multiplier in Huntsville for manufacturing associates was updated effective 6/14/2023:
 - \$29 per month per year of service for the first 19 years of benefit service plus \$32 per month per year of service for any additional years of service after 19 years.
- The Factory Tenured Associates (formerly Tier A) benefit multiplier increased from \$44.50 per year of service to \$45.50 effective January 1, 2024.
- The Factory Associates (formerly Tier B) benefit multiplier increased from \$22.75 per year of service to \$23.00 effective January 1, 2024.

KOHLER CO. PENSION PLAN
E.I.N. 39-0402810 PLAN NO. 004
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
	BlackRock MCSI World Ex USA Diversified Multi-Factor Fund	Collective Fund	\$ 685,953	\$ 964,781
	BlackRock MCSI Equity Index Fund-Russia	Collective Fund	-	710
	BlackRock - ACWI Ex-US Superfund A	Collective Fund	150,393,609	145,125,474
	Fidelity 500 Index Fund	Registered Investment Company	136,862,272	196,758,634
	Fidelity Total Market Index Fund	Registered Investment Company	69,760,489	99,042,395
	Fidelity Global Ex US Index Fund	Registered Investment Company	5,496,279	5,473,504
	JPMorgan Mid Cap Equity Index Fund	Collective Fund	20,150,000	19,463,244
	JPMorgan U.S. Small Cap Equity Index Fund	Collective Fund	8,250,000	7,801,261
	JPMorgan U.S. REIT Index Fund	Collective Fund	2,750,000	2,649,122
	JPMorgan EAFE Equity Index	Collective Fund	21,543,000	20,906,329
	JPMorgan Emerging Markets Research Enhanced Equity Fund	Collective Fund	46,926,808	45,589,993
	JPMorgan Global Select Equity Fund	Collective Fund	138,570,000	134,041,457
	JPMorgan Value Plus Fund	Collective Fund	11,576,000	11,145,639
	JPMorgan U.S. Active Core Equity Fund	Collective Fund	83,550,077	80,834,987
	JPMorgan Equity Index Fund	Collective Fund	53,085,000	51,694,708
	JPMorgan Value Advantage Fund	Collective Fund	23,100,000	22,406,384
	JPMorgan Growth Advantage Fund	Collective Fund	34,000,000	32,924,480
	JPMorgan International Equity Fund	Collective Fund	51,700,000	50,037,922
	Goldman Sachs Financial Square Government Fund	Cash Equivalent	105,550,524	105,550,524
	SPDR Gold Tr Gold Shares	Registered Investment Company	17,398,212	17,050,068
	JPMorgan Core Plus Bond Fund	Collective Fund	28,456,000	28,126,976
	Emerging Markets Enhanced NI CTF	Collective Fund	68,880,000	66,902,122
	Intermediate US Credit Index NI Fund	Collective Fund	24,500,000	24,311,167
	MCSI Australia Index SL Fund	Collective Fund	1,430,000	1,360,678
	MCSI Canada Index SL Fund	Collective Fund	12,510,000	12,059,171
	MCSI Europe Index NI CTF	Collective Fund	39,020,000	37,658,585
	MCSI Hong Kond Index SL Fund	Collective Fund	460,000	447,006
	MCSI Japan Index SL Fund	Collective Fund	4,520,000	4,402,769
	MCSI Singapore Index SL Fund	Collective Fund	160,000	154,990
	Russell 2000 Inex SL Fund	Collective Fund	5,740,000	5,441,031
	S&P 500 Flagship SL Fund	Collective Fund	338,490,000	329,646,666
	US High Yield Bond Index NI CTF	Collective Fund	31,710,000	31,421,114
	JPMorgan Core Bond Fund - Investment Class	Collective Fund	43,125,000	42,682,280
	Fidelity U.S. Bond Index Fund	Registered Investment Company	111,461,420	111,412,719
	Total Assets (Held at End of Year)		\$ 1,691,810,643	\$ 1,745,488,890

Schedule SB, line 24 — Change in Actuarial Assumptions

Actuarial assumption changes since prior valuation

- The expense component of normal cost was adjusted from \$13,200,000 to \$2,600,000 to reflect expectations for the current plan year.
- The long-term 417(e) rates for actuarial equivalence were updated to 4.71% for the first five years, and 5.41% thereafter.