

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>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).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

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

<p>1a Name of plan <u>TOSHIBA INTERNATIONAL CORP. HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>002</u></p>
<p>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>TOSHIBA INTERNATIONAL CORPORATION</u></p> <p><u>13131 WEST LITTLE YORK ROAD</u> <u>HOUSTON, TX 77041-5807</u></p>	<p>1c Effective date of plan <u>04/01/1980</u></p> <p>2b Employer Identification Number (EIN) <u>94-1652435</u></p> <p>2c Plan Sponsor's telephone number <u>713-466-0277</u></p> <p>2d Business code (see instructions) <u>423600</u></p>

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.	01/14/2026	JENNIFER IVIE-LOPEZ
	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	244
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)	154
	6a(2)	146
	6b	4
	6c	84
	6d	234
	6e	3
	6f	237
	6g(1)	
6g(2)		
6h		0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE SB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

▶ **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>TOSHIBA INTERNATIONAL CORP. HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>TOSHIBA INTERNATIONAL CORPORATION</u>	D Employer Identification Number (EIN) <u>94-1652435</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input checked="" type="checkbox"/> 101-500 <input type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date:	Month <u>04</u> Day <u>01</u> Year <u>2024</u>		
2 Assets:			
a Market value	2a	<u>3527573</u>	
b Actuarial value	2b	<u>3507625</u>	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>2</u>	<u>13769</u>	<u>13769</u>
b For terminated vested participants	<u>88</u>	<u>1386016</u>	<u>1386016</u>
c For active participants	<u>154</u>	<u>1697463</u>	<u>1697463</u>
d Total	<u>244</u>	<u>3097248</u>	<u>3097248</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>5.06 %</u>	
6 Target normal cost			
a Present value of current plan year accruals	6a	<u>0</u>	
b Expected plan-related expenses	6b	<u>116410</u>	
c Target normal cost	6c	<u>116410</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>12/09/2025</u>	Date
	<u>DAVID M ANDERSON</u>	<u>23-07493</u>	Most recent enrollment number
	<u>WILLIS TOWERS WATSON US LLC</u>	<u>713-754-5400</u>	Telephone number (including area code)
	<u>811 LOUISIANA STREET SUITE 2200 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	0
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	0
10	Interest on line 9 using prior year's actual return of <u>14.06</u> %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>4.95</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	113.24 %
15	Adjusted funding target attainment percentage	15	113.24 %
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	110.81 %
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: 5.18 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)			21b 0
22 Weighted average retirement age			22 62
23 Mortality table(s) (see instructions) <input type="checkbox"/> Prescribed - combined <input checked="" type="checkbox"/> Prescribed - separate <input type="checkbox"/> Substitute			

Part VI Miscellaneous Items	
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	<input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	116410	
b Excess assets, if applicable, but not greater than line 31a	31b	116410	
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	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

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

SCHEDULE 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 **04/01/2024** and ending **03/31/2025**

A Name of plan TOSHIBA INTERNATIONAL CORP. HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 TOSHIBA INTERNATIONAL CORPORATION	D Employer Identification Number (EIN) 94-1652435	

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

U.S. BANCORP ASSET MANAGEMENT, INC

41-2003732

(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)

WILLIS TOWERS WATSON

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	100374	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)

U.S. BANK N.A.

31-0841368

(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 28 50 51 62 68 52	NONE	23430	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

CAPFINANCIAL PARTNERS, LLC

26-0058143

(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 51	NONE	10798	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"/>

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 H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025	
A Name of plan TOSHIBA INTERNATIONAL CORP. HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 TOSHIBA INTERNATIONAL CORPORATION	D Employer Identification Number (EIN) 94-1652435

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.

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	278 123
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	23042 25097
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(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)	3504531 3379008
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	3527851	3404228
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	53650	1920
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	53650	1920
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	3474201	3402308

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)	1943	
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	95348	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	18	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(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)		116279
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		213588

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	150879	
(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)		150879
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)	10798	
(6) Bank or trust company trustee/custodial fees	2i(6)	23430	
(7) Actuarial fees	2i(7)	100374	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		134602
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		285481

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-71893
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: **WEINSTEIN SPIRA & COMPANY**

(2) EIN: **74-2181616**

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		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 565511.

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 04/01/2024 and ending 03/31/2025

A Name of plan <u>TOSHIBA INTERNATIONAL CORP. HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>TOSHIBA INTERNATIONAL CORPORATION</u>	D Employer Identification Number (EIN) <u>94-1652435</u>	

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

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 94-0304228

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		7
---	--	---

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

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

**Toshiba International Corporation
Hourly Pension Plan for Industrial Division**

Annual Financial Report
Houston, Texas



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All other schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 are omitted, as they are not applicable.

Independent Auditor's Report

January 9, 2026

Plan Administrator

Toshiba International Corporation Hourly Pension Plan for Industrial Division
Houston, Texas

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

We have performed audits of the accompanying financial statements of the Toshiba International Corporation Hourly Pension Plan for Industrial Division (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of March 31, 2025 and 2024, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of March 31, 2025 and 2024, 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 Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying 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).

January 9, 2026

Toshiba International Corporation Hourly Pension Plan for Industrial Division

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

January 9, 2026

Toshiba International Corporation Hourly Pension Plan for Industrial Division

In performing an audit in accordance with auditing standards generally accepted in the United States of America, we:

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certifications, 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.

January 9, 2026

Toshiba International Corporation Hourly Pension Plan for Industrial Division

Other Matter - Supplemental Schedules Required by ERISA

The supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of March 31, 2025, and the supplemental Schedule H, Line 4j - Schedule of Reportable Transactions for the year ended March 31, 2025, 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 auditing standards generally accepted in the United States of America. 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).

Weinstein Spira & Company P.C.

WEINSTEIN SPIRA & COMPANY, P.C.
Houston, Texas

**TOSHIBA INTERNATIONAL CORPORATION
 HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
 STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS**

	March 31,	
	2025	2024
ASSETS		
Investments , at fair value:		
Mutual funds	\$ 3,404,105	\$ 3,527,573
Accrued Income	123	278
	3,404,228	3,527,851
LIABILITIES		
Accrued Expenses	1,920	53,650
	1,920	53,650
Net Assets Available for Benefits	\$ 3,402,308	\$ 3,474,201

See independent auditor's report and accompanying notes to financial statements.

**TOSHIBA INTERNATIONAL CORPORATION
 HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
 STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS**

	For the Year Ended March 31,	
	2025	2024
Investment Income:		
Interest and dividends	\$ 97,291	\$ 91,353
Net appreciation in fair value of investments	116,297	342,111
Total Investment Income	213,588	433,464
Benefit Payments	(150,879)	(138,587)
Administrative Expenses	(134,602)	(111,488)
Net Increase (Decrease)	(71,893)	183,389
Net Assets Available for Benefits - Beginning of Year	3,474,201	3,290,812
Net Assets Available for Benefits - End of Year	\$ 3,402,308	\$ 3,474,201

See independent auditor's report and accompanying notes to financial statements.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS
March 31, 2025 and 2024

Note 1 - Plan Description

The following brief description of the Toshiba International Corporation Hourly Pension Plan for Industrial Division (the Plan) is for general purposes only. Participants should refer to the plan document for a more complete description of the Plan's provisions.

The Plan, established on April 1, 1980, is a defined benefit plan covering eligible employees of Toshiba International Corporation (the Company). The Plan has been amended and restated since then. The Plan is administered by a committee of employees appointed by the Company. U.S. Bank National Association serves as the trustee.

As of October 1, 2007, the Plan was frozen to future benefit accruals. Hours of employment after September 30, 2007 are credited for vesting, but not for additional benefits.

Participants of the Plan are not allowed to make contributions to the Plan. The Plan's funding policy is for the Company to make actuarially determined contributions to meet or exceed the minimum funding requirements of the Employee Retirement Income Security Act of 1974 (ERISA). For the year ended March 31, 2025 and 2024, there were no minimum required contributions nor were any excess contributions made by the Company.

The Plan provides for retirement benefits to be paid to participants beginning at age 65. The normal participant monthly benefit is a life annuity equal to his or her years of benefit service multiplied by \$10. The Plan also provides for early retirement at age 55 for participants with a minimum of ten years of service. The normal retirement pension is discounted 5% per year for commencement of benefits prior to age 65.

A participant who terminates employment after his or her normal retirement age will receive the greater of (a) the pension payable at normal retirement age increased by 5% per year or (b) the actuarial equivalent as defined in the plan document for each year the pension is deferred past age 65. In no event shall the monthly benefit be less than the participant's years of service at his or her deferred retirement date times \$10.

The retirement benefit payable to a re-employed participant who was receiving retirement benefits from the Plan is determined on the basis of the participant's additional years of service, but is reduced by the actuarial equivalent of the benefit he or she received prior to re-employment.

**TOSHIBA INTERNATIONAL CORPORATION
 HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
 NOTES TO FINANCIAL STATEMENTS (Continued)
 March 31, 1899 and 2024**

A participant who terminates employment before his or her normal retirement date for any reason other than death or disability will receive the normal benefit multiplied by the appropriate factor from the following table:

Number of Years Benefit Commencement Date Precedes Normal Retirement Date	Factor
1	.95
2	.90
3	.85
4	.80
5	.75
6	.70
7	.65
8	.60
9	.55
10	.50

Participants may elect from one of the following forms of payment: a 75%, 50% or 33.3% joint and survivor annuity, a 10-year or 15-year certain and life annuity, 10-year or 15-year annual installments, a lump sum payment, or a single life annuity.

Participants are fully vested in their pension benefit upon the completion of five years of service for normal retirement age. No partial vesting is permitted for employees with less than five years of service. Participants with five or more years of service are entitled to a pension benefit at normal retirement age (65). The amendment to freeze benefit accruals did not affect vesting.

If an active participant dies, a death benefit equal to the value of the participant's accumulated benefit will be paid to the participant's spouse or beneficiary. No death benefits will be paid to a participant's beneficiary other than the employee's spouse if a participant dies prior to the employee's annuity starting date, as defined in the plan document. Each participant who retires on disability will have a right to receive a monthly annuity based on the participant's vested accrued benefit at the date of disability.

Participants, beneficiaries or alternate payees with a vested pension benefit of \$1,000 or less shall receive an automatic lump sum distribution from the Plan. Participants, beneficiaries or alternate payees with a vested pension benefit between \$1,000 and \$5,000 will have their vested pension benefit automatically rolled into an individual retirement account unless a lump sum distribution is elected by the respective payee. Participants may be subject to taxes on their distributions.

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

Note 2 - Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (GAAP).

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. See Note 4 for a discussion of fair value measurements.

Purchases and sales of investments are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date, and interest is recorded as earned. Net appreciation or depreciation in the fair value of investments includes realized gains or losses on investments sold during the year as well as unrealized gains or losses on the investments held at the end of the year.

Administrative Expenses

The Plan's administrative expenses are paid either by the Plan or by the Company at its discretion. Expenses that are paid directly by the Company are excluded from these financial statements. For the years ended and 2024, the Plan paid for certain actuarial, audit, tax preparation, investment advisor and trustee expenses. Certain investment related expenses are included in the net appreciation or depreciation in the fair value of investments.

Benefit Payments

Benefit payments are recorded when paid.

Use of Estimates

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

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

Risks and Uncertainties

The Plan provides for investment in various investment securities. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the value of investments will occur in the near term and may impact the amounts reported in the financial statements. As a result, the Plan may require increased funding in subsequent years.

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, investment income, 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.

Subsequent Events

Management evaluates events occurring subsequent to the date of the financial statements in determining the accounting for and disclosure of transactions and events that affect the financial statements. Subsequent events have been evaluated through January 9, 2026, which is the date the financial statements were available to be issued.

Note 3 - Information Certified by the Trustee

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, the plan administrator has obtained certifications from U.S. Bank National Association as of March 31, 2025 and 2024, and for the years then ended, that all of the information provided is complete and accurate. Information included in the financial statements and accompanying notes to the financial statements as to investments, accrued income, investment income and all of the related information in the supplemental schedules, is presented in reliance solely upon these certifications.

The Plan's independent auditor did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements, the accompanying notes to the financial statements and the supplemental schedules.

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

Note 4 - Fair Value Measurements

GAAP 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 to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- 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's 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 should maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodology used for assets measured at fair value. There have been no changes in the methodology used at and 2024.

Mutual Funds: These funds are valued based on their quoted market prices.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

The following tables set forth by level, the Plan's investments at fair value:

	March 31, 2025			Total
	Level 1	Level 2	Level 3	
Total investments at fair value	<u>\$ 3,404,105</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 3,404,105</u>
	March 31, 2024			
	Level 1	Level 2	Level 3	Total
Total investments at fair value	<u>\$ 3,527,573</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 3,527,573</u>

Note 5 - Actuarial Information

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary, Willis Towers Watson US LLC. The actuarial present value of accumulated plan benefits was calculated as of April 1, 2024. Had the valuation been performed as of March 31, 2024, there would have been no material difference.

The summary of accumulated plan benefits, as presented below, reflects the future benefit payments that are attributable under the Plan's provisions to participants' service rendered to the benefit information date. The accumulated plan benefits are comprised of benefits expected to be paid to (a) retired or terminated participants or their beneficiaries, (b) beneficiaries of deceased participants, and (c) present participants or their beneficiaries.

The actuarial present value of accumulated plan benefits as of March 31, 2024 was as follows:

Actuarial Present Value of Accumulated Plan Benefits	
Vested benefits:	
Participants and beneficiaries currently receiving payments	\$ 12,322
Other participants	<u>2,843,582</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u>\$ 2,855,904</u>

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

The change in the actuarial present value of accumulated plan benefits from March 31, 2023 to March 31, 2024 was as follows:

Actuarial Present Value of Accumulated Benefits, Beginning of Year	\$ 3,002,041
Increase (Decrease) due to:	
Decrease in the discount period	197,667
Actuarial gains	(16,906)
Assumption changes	(177,185)
Benefits paid	<u>(149,713)</u>
Net Decrease	<u>(146,137)</u>
Actuarial Present Value of Accumulated Benefits, End of Year	<u>\$ 2,855,904</u>

The significant assumptions used in the valuation as of March 31, 2024 including any changes from the prior valuation, if any, are as follows:

- Discount rate of 6.75%
- PRI-2012 mortality tables with blue collar adjustment projected generationally using Scale MP-2021
- Average retirement age of 62
- Lump sum interest rate of 4.79% which is an increase from the prior year rate of 3.67%

The foregoing assumptions were based on the presumption that the Plan will continue. If the Plan were to terminate, participants would become fully vested and benefits would be paid to the extent possible according to the priority required by law, and different assumptions would apply.

Note 6 - Federal Income Tax

The Plan obtained its latest determination letter on November 21, 2016, in which the Internal Revenue Service (IRS) stated that the Plan, as then designed, was in compliance 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 currently designed and operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

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

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
NOTES TO FINANCIAL STATEMENTS (Continued)
March 31, 1899 and 2024

Note 7 - Plan Termination

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

- a) Annuity benefits that former employees or their beneficiaries have been receiving for at least three years or that employees eligible to retire in 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.
- b) Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC) up to applicable limitations (discussed below).
- c) All other vested benefits (that is, vested benefits not insured by the PBGC).
- d) All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's 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. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. That ceiling applies to those pensioners who elect to receive their benefits in the form of a single-life annuity and are at least 65 years old at the time of retirement or plan termination (whichever comes later). For younger annuitants or for those who elect to receive their benefits in a form that is more beneficial than a single-life annuity, the corresponding ceilings are actuarially adjusted downward.

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

SUPPLEMENTARY INFORMATION

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
March 31, 2025

(a) (b) Identity of Issue or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds:			
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund	\$ 25,097	\$ 25,097
J.P. Morgan Investment Management, Inc.	Undiscovered Managers Behavioral Value Fund	76,814	76,523
Artisan Partners Limited Partnership	Artisan High Income Fund	76,442	69,942
Baird Asset Management	Baird Aggregate Bond Fund	403,000	358,559
Cohen & Steers Capital Management, Inc.	Cohen & Steers Institutional Realty Shares Fund	103,233	104,436
Columbia Threadneedle	Columbia Small Cap Growth Fund	51,826	48,479
Fidelity Investments	Fidelity International Index Fund	173,736	206,406
Fidelity Investments	Fidelity 500 Index Fund	556,747	780,312
Fidelity Investments	Fidelity Emerging Markets Index Fund	187,585	188,481
Fidelity Investments	Fidelity Mid Cap Index Fund	356,003	410,906
ClearBridge Investments, LLC	ClearBridge International Growth Fund	92,170	103,001
Mondrian Investment Partners Ltd	Mondrian International Value Equity Fund	95,847	104,616
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF	204,285	206,347
BlackRock, Inc.	Ishares Trust Ishares 5 10 Year ETF	59,732	60,661
New York Life Investment Management LLC	New York Life Investments MacKay High Yield Corporate Bond Fund	70,154	69,944
PGIM Investments LLC	PGIM Total Return Bond Fund	229,628	231,251
Nuveen Asset Management, LLC	Nuveen Core Bond Fund	397,474	359,144
		<u>\$ 3,159,773</u>	<u>\$ 3,404,105</u>

* Indicates a party-in-interest

This schedule has been prepared from information certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002
SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
For the Year Ended March 31, 2025

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
Baird Asset Management	Baird Aggregate Bond Fund						
	Purchases	\$ 20,919	\$ -	\$ -	\$ 20,919	\$ 20,919	\$ -
	Reinvestments	\$ 15,622	\$ -	\$ -	\$ 15,622	\$ 15,622	\$ -
	Sales	\$ -	\$ 173,352	\$ -	\$ 198,920	\$ 173,352	\$ (25,568)
Cohen & Steers Capital Management, Inc.	Cohen & Steers Institutional Realty Shares Fund						
	Purchases	\$ 161,672	\$ -	\$ -	\$ 161,672	\$ 161,672	\$ -
	Reinvestments	\$ 3,998.00	\$ -	\$ -	\$ 3,998	\$ 3,998	\$ -
	Sales	\$ -	\$ 167,949	\$ -	\$ 163,320	\$ 167,949	\$ 4,629
Fidelity Investments	Fidelity 500 Index Fund						
	Purchases	\$ 51,056	\$ -	\$ -	\$ 51,056	\$ 51,056	\$ -
	Reinvestments	\$ 10,742	\$ -	\$ -	\$ 10,742	\$ 10,742	\$ -
	Sales	\$ -	\$ 168,404	\$ -	\$ 114,824	\$ 168,404	\$ 53,580

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year. Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
Fidelity Investments	Fidelity Emerging Markets Index Fund						
	Purchases	\$ 142,198	\$ -	\$ -	\$ 142,198	\$ 142,198	\$ -
	Reinvestments	\$ 1,365	\$ -	\$ -	\$ 1,365	\$ 1,365	\$ -
	Sales	\$ -	\$ 166,242	\$ -	\$ 151,437	\$ 166,242	\$ 14,805
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund						
	Purchases	\$ 496,759	\$ -	\$ -	\$ 496,759	\$ 496,759	\$ -
	Sales	\$ -	\$ 494,703	\$ -	\$ 494,703	\$ 494,703	\$ -
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchases	\$ 220,243	\$ -	\$ 78	\$ 220,243	\$ 220,243	\$ -
	Sales	\$ -	\$ 15,957	\$ 6	\$ 15,958	\$ 15,957	\$ (1)

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year. Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information
certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
PGIM Investments LLC	PGIM Total Return Bond Fund						
	Purchases	\$ 256,375	\$ -	\$ -	\$ 256,375	\$ 256,375	\$ -
	Reinvestments	\$ 8,844	\$ -	\$ -	\$ 8,844	\$ 8,844	\$ -
	Sales	\$ -	\$ 35,697	\$ -	\$ 35,590	\$ 35,697	\$ 107
Nuveen Asset Management, LLC	Nuveen Core Bond Fund						
	Purchases	\$ 21,102	\$ -	\$ -	\$ 21,102	\$ 21,102	\$ -
	Reinvestments	\$ 16,776	\$ -	\$ -	\$ 16,776	\$ 16,776	\$ -
	Sales	\$ -	\$ 174,674	\$ -	\$ 196,922	\$ 174,674	\$ (22,248)
Fidelity Investments	Fidelity US Bond Index Fund						
	Reinvestments	\$ 1,915	\$ -	\$ -	\$ 1,915	\$ 1,915	\$ -
	Sales	\$ -	\$ 248,541	\$ -	\$ 251,775	\$ 248,541	\$ (3,234)

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year.
Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information
certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Single Transactions:							
Fidelity Investments	Fidelity US Bond Index Fund Sale	\$ -	\$ 241,505	\$ -	\$ 244,520	\$ 241,505	\$ (3,015)
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund Purchase	\$ 218,174	\$ -	\$ -	\$ 218,174	\$ 218,174	\$ -
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF Purchase	\$ 204,808	\$ -	\$ 73	\$ 204,808	\$ 204,808	\$ -
PGIM Investments LLC	PGIM Total Return Bond Fund Purchase	\$ 240,987	\$ -	\$ -	\$ 240,987	\$ 240,987	\$ -

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year.
Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information
certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions with Same Broker: JonesTrading Institutional Services							
BlackRock, Inc.	Ishares Trust Ishares 5 10 Year ETF						
	Purchases	\$ 58,750	\$ -	\$ 40	\$ 58,750	\$ 58,750	\$ -
	Sales	\$ -	\$ 3,857	\$ 3	\$ 3,825	\$ 3,857	\$ 32
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchases	\$ 216,085	\$ -	\$ 77	\$ 216,085	\$ 216,085	\$ -
	Sales	\$ -	\$ 13,338	\$ 5	\$ 13,314	\$ 13,338	\$ 24
Single Transactions with Same Broker: JonesTrading Institutional Services							
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchase	\$ 204,808	\$ -	\$ 73	\$ 204,808	\$ 204,808	\$ -

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year. Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information
certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

SCHEDULE SB ATTACHMENTS

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

Attained Age	Attained Years of Credited Service ²										Total	
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over		
Under 25	0	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0	0
35-39	1	1	0	0	0	0	0	0	0	0	0	2
40-44	1	3	3	0	0	0	0	0	0	0	0	7
45-49	1	4	7	2	0	0	0	0	0	0	0	14
50-54	4	10	10	3	3	0	0	0	0	0	0	30
55-59	0	11	6	11	4	0	0	0	0	0	0	32
60-64	3	14	11	8	9	2	0	0	0	0	0	47
65-69	0	4	3	2	2	2	1	0	0	0	0	14
70 & over	1	1	2	0	1	2	1	0	0	0	0	8
Total	11	48	42	26	19	6	2	0	0	0	0	154

² Age and service for purposes of determining category are based on exact (not rounded) values.
 Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
 EIN / PN: 94-1652435/002
 Plan Sponsor: Toshiba International Corporation
 Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Assumptions and methods for contribution purposes

Actuarial Assumptions and Methods — Contributions

Economic Assumptions

Interest rate basis:

- Applicable month April 2024
- Yield curve basis Segment rates

Interest rates:	Reflecting Corridors	Not Reflecting Corridors
-----------------	----------------------	--------------------------

Annual rates of increase

- Compensation N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation N/A
- Lump sum rate of interest¹ 4.79%

Plan-related expenses \$116,410

¹ Immediate rate (4.00% for first 7 years of deferral, 4.00% after 7 years of deferral). Lump sums for recent terminations are based on the actual lump sum rates as of April 1, 2023.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The plan is frozen to new participants as of October 1, 2007.

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

Mortality

- **Healthy** Separate rates for non-annuitants (based on Pri-2012 "Employees" table without collar or amount adjustments and then projected forward with generational projection using adjusted Scale MP-2021) and annuitants (based on Pri-2012 "Healthy Annuitants" table (participants and beneficiaries combined) without collar or amount adjustments, projected forward with generational projection using adjusted Scale MP-2021. The rate of future mortality improvement at any age for any year beginning on or after the valuation date is capped at 0.78%.
- **Disabled** The IRS prescribed (Rev. Rul. 96-7) mortality table for disabled participants

Termination Rates varying by age and service

Percentage leaving during the year	
Attained Age	Rate
25	15.0%
30	13.0%
35	11.0%
40	9.0%
45	7.0%
50	5.0%
55	0.0%

Disability None

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age, average age 62

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
Age	Rate
55 – 61	5.0%
62	50.0%
63 – 69	30.0%
70	100.0%

Benefit commencement date:

- Preretirement death benefit Lump sum payable to surviving spouse upon death
- Termination benefit Upon termination of employment
- Retirement benefit Upon termination of employment

Form of payment

All active participants are assumed to take a lump sum distribution upon termination of employment. The lump is calculated using the 1983 Group Annuity Mortality Table, set back three years, with rate blended 50% for males and females, the PBGC graded rate structure, and an immediate interest rate of 4.79%.

Terminated participants are assumed to take an immediate lump sum distribution if their termination date is in the prior plan year or if a lump sum is payable. Other terminated participants are assumed to receive lump sums at 65.

Administrative expenses

3.30% of fair value of assets.

Cash flow

- Timing of benefit payments Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the first of the month coincident with or next following the date of decrement.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year as required by regulations under IRC §430.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2023 plan year.)
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Toshiba International Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

Toshiba International Corporation furnished participant data as of April 1, 2024. The fair value of assets as of March 31, 2024 was provided by Toshiba and US Bank. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, no assumptions or estimates were made due to completeness, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	<p>The segment interest rates used to calculate the funding target were updated from an applicable month of April 2023 to April 2024.</p> <p>The mortality table used to calculate the funding target was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430, and the base mortality table was updated to Pri-2012, as required.</p> <p>The immediate lump sum interest rate assumption was updated to reflect decreases in 30-year Treasury rates.</p>
--	--

Assumptions Rationale - Significant Economic Assumptions – Contributions

Discount rate	<p>The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.</p>
Lump sum conversion rate	<p>As required by IRC §430, lump sum benefits are valued using “annuity substitution”, adjusted as required to account for the fact that the plan’s immediate lump sum conversion rate is either IRC §417(e) assumptions or the 30-year treasury rate, whichever produces the larger lump sum.</p>

Assumptions Rationale – Significant Demographic Assumptions

Healthy Mortality	<p>Assumptions used for funding purposes are as prescribed by IRC §430(h)</p>
Termination and Retirement	<p>Rates reflect expected future experience and are simplified based on limited plan experience and assumptions used for plans with similar populations.</p>
Deferred vested benefit	<p>Deferred vested participants’ assumed commencement age reflects expected future experience and is simplified based on limited plan experience and assumptions used for plans with similar populations.</p>
Form of payment	<p>All active participants are assumed to take a lump sum distribution upon termination of employment based on plan experience.</p>

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

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

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002
SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
For the Year Ended March 31, 2025

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
Baird Asset Management	Baird Aggregate Bond Fund						
	Purchases	\$ 20,919	\$ -	\$ -	\$ 20,919	\$ 20,919	\$ -
	Reinvestments	\$ 15,622	\$ -	\$ -	\$ 15,622	\$ 15,622	\$ -
	Sales	\$ -	\$ 173,352	\$ -	\$ 198,920	\$ 173,352	\$ (25,568)
Cohen & Steers Capital Management, Inc.	Cohen & Steers Institutional Realty Shares Fund						
	Purchases	\$ 161,672	\$ -	\$ -	\$ 161,672	\$ 161,672	\$ -
	Reinvestments	\$ 3,998.00	\$ -	\$ -	\$ 3,998	\$ 3,998	\$ -
	Sales	\$ -	\$ 167,949	\$ -	\$ 163,320	\$ 167,949	\$ 4,629
Fidelity Investments	Fidelity 500 Index Fund						
	Purchases	\$ 51,056	\$ -	\$ -	\$ 51,056	\$ 51,056	\$ -
	Reinvestments	\$ 10,742	\$ -	\$ -	\$ 10,742	\$ 10,742	\$ -
	Sales	\$ -	\$ 168,404	\$ -	\$ 114,824	\$ 168,404	\$ 53,580

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year. Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

This schedule has been prepared from information certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
Fidelity Investments	Fidelity Emerging Markets Index Fund						
	Purchases	\$ 142,198	\$ -	\$ -	\$ 142,198	\$ 142,198	\$ -
	Reinvestments	\$ 1,365	\$ -	\$ -	\$ 1,365	\$ 1,365	\$ -
	Sales	\$ -	\$ 166,242	\$ -	\$ 151,437	\$ 166,242	\$ 14,805
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund						
	Purchases	\$ 496,759	\$ -	\$ -	\$ 496,759	\$ 496,759	\$ -
	Sales	\$ -	\$ 494,703	\$ -	\$ 494,703	\$ 494,703	\$ -
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchases	\$ 220,243	\$ -	\$ 78	\$ 220,243	\$ 220,243	\$ -
	Sales	\$ -	\$ 15,957	\$ 6	\$ 15,958	\$ 15,957	\$ (1)

* Indicates a party-in-interest

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See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions in Same Security:							
PGIM Investments LLC	PGIM Total Return Bond Fund						
	Purchases	\$ 256,375	\$ -	\$ -	\$ 256,375	\$ 256,375	\$ -
	Reinvestments	\$ 8,844	\$ -	\$ -	\$ 8,844	\$ 8,844	\$ -
	Sales	\$ -	\$ 35,697	\$ -	\$ 35,590	\$ 35,697	\$ 107
Nuveen Asset Management, LLC	Nuveen Core Bond Fund						
	Purchases	\$ 21,102	\$ -	\$ -	\$ 21,102	\$ 21,102	\$ -
	Reinvestments	\$ 16,776	\$ -	\$ -	\$ 16,776	\$ 16,776	\$ -
	Sales	\$ -	\$ 174,674	\$ -	\$ 196,922	\$ 174,674	\$ (22,248)
Fidelity Investments	Fidelity US Bond Index Fund						
	Reinvestments	\$ 1,915	\$ -	\$ -	\$ 1,915	\$ 1,915	\$ -
	Sales	\$ -	\$ 248,541	\$ -	\$ 251,775	\$ 248,541	\$ (3,234)

* Indicates a party-in-interest

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This schedule has been prepared from information
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See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Single Transactions:							
Fidelity Investments	Fidelity US Bond Index Fund Sale	\$ -	\$ 241,505	\$ -	\$ 244,520	\$ 241,505	\$ (3,015)
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund Purchase	\$ 218,174	\$ -	\$ -	\$ 218,174	\$ 218,174	\$ -
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF Purchase	\$ 204,808	\$ -	\$ 73	\$ 204,808	\$ 204,808	\$ -
PGIM Investments LLC	PGIM Total Return Bond Fund Purchase	\$ 240,987	\$ -	\$ -	\$ 240,987	\$ 240,987	\$ -

* Indicates a party-in-interest

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year.
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See independent auditor's report.

**TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002**

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS (Continued)
For the Year Ended March 31, 2025**

(a)	(b)	(c)	(d)	(f)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Expenses Incurred Transaction	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions with Same Broker: JonesTrading Institutional Services							
BlackRock, Inc.	Ishares Trust Ishares 5 10 Year ETF						
	Purchases	\$ 58,750	\$ -	\$ 40	\$ 58,750	\$ 58,750	\$ -
	Sales	\$ -	\$ 3,857	\$ 3	\$ 3,825	\$ 3,857	\$ 32
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchases	\$ 216,085	\$ -	\$ 77	\$ 216,085	\$ 216,085	\$ -
	Sales	\$ -	\$ 13,338	\$ 5	\$ 13,314	\$ 13,338	\$ 24
Single Transactions with Same Broker: JonesTrading Institutional Services							
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF						
	Purchase	\$ 204,808	\$ -	\$ 73	\$ 204,808	\$ 204,808	\$ -

Reportable transactions are individual and/or series of investment transactions which represent 5% or more of Plan assets as of the beginning of the year. Column (e) Lease Rental does not apply to any of these transactions and is omitted accordingly.

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certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 04/01/2024 and ending 03/31/2025

▶ **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 Toshiba International Corp. Hourly Pension Plan for Industrial Division		B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Toshiba International Corporation		D Employer Identification Number (EIN) 94-1652435	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B		F Prior year plan size: <input type="checkbox"/> 100 or fewer <input checked="" type="checkbox"/> 101-500 <input type="checkbox"/> More than 500	

Part I Basic Information

1 Enter the valuation date:	Month <u>04</u> Day <u>01</u> Year <u>2024</u>
2 Assets:	
a Market value	2a 3,527,573
b Actuarial value	2b 3,507,625
3 Funding target/participant count breakdown	
a For retired participants and beneficiaries receiving payment	(1) Number of participants: 2 (2) Vested Funding Target: 13,769 (3) Total Funding Target: 13,769
b For terminated vested participants	88 1,386,016 1,386,016
c For active participants	154 1,697,463 1,697,463
d Total	244 3,097,248 3,097,248
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)	<input checked="" type="checkbox"/> Q
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b
5 Effective interest rate	5 5.06%
6 Target normal cost	
a Present value of current plan year accruals	6a 0
b Expected plan-related expenses	6b 116,410
c Target normal cost	6c 116,410

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	David M Anderson 	12/9/2025
	Signature of actuary	Date
David M Anderson	Type or print name of actuary	2307493
Willis Towers Watson US LLC	Firm name	Most recent enrollment number
811 Louisiana Street Suite 2200 Houston TX 77002	Address of the firm	713-754-5400
		Telephone number (including area code)

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	0
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	0
10	Interest on line 9 using prior year's actual return of <u>14.06%</u>	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>4.95%</u>		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	0

Part III Funding Percentages			
14	Funding target attainment percentage	14	113.24 %
15	Adjusted funding target attainment percentage	15	113.24 %
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	110.81 %
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: 5.18 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code).....			21b 0
22 Weighted average retirement age			22 62
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute

Part VI Miscellaneous Items			
24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment..... <input 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....		27	

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

Part VIII Minimum Required Contribution For Current Year			
31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c).....		31a	116,410
b Excess assets, if applicable, but not greater than line 31a		31b	116,410
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	0
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0
36 Additional cash requirement (line 34 minus line 35).....		36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c).....		37	0
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)		38a	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances		38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37).....		39	0
40 Unpaid minimum required contributions for all years		40	0

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

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Toshiba International Corporation
EIN/PN	94-1652435/002
Plan Name	Toshiba International Corp. Hourly Pension Plan for Industrial Division
Valuation Date	April 1, 2024
Enrolled Actuary	David M. Anderson
Enrollment Number	23-07493

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

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

SCHEDULE SB ATTACHMENTS

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

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

Age	Retirement Age	Assumed Number Eligible	Assumed Number Retiring	Age X Number Retiring
55	5.0%	1,000	50	2,750
56	5.0%	950	48	2,688
57	5.0%	903	45	2,565
58	5.0%	857	43	2,494
59	5.0%	815	41	2,419
60	5.0%	774	39	2,340
61	5.0%	735	37	2,257
62	50.0%	698	349	21,638
63	30.0%	349	104	6,552
64	30.0%	244	73	4,672
65	30.0%	171	51	3,315
66	30.0%	120	36	2,376
67	30.0%	84	25	1,675
68	30.0%	59	18	1,224
69	30.0%	41	12	828
70	100.0%	29	<u>29</u>	<u>2030</u>
			1,000	61,823
				<u>÷ 1,000</u>
Weighted Average Retirement Age				62

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
 EIN / PN: 94-1652435/002
 Plan Sponsor: Toshiba International Corporation
 Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Statement of Actuarial Assumptions/Methods

Assumptions and methods for contribution purposes

Actuarial Assumptions and Methods — Contributions

Economic Assumptions

Interest rate basis:

- Applicable month April 2024
- Yield curve basis Segment rates

Interest rates:	Reflecting Corridors	Not Reflecting Corridors
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Annual rates of increase

- Compensation N/A
- Future Social Security wage bases N/A
- Statutory limits on compensation N/A
- Lump sum rate of interest¹ 4.79%

Plan-related expenses \$116,410

¹ Immediate rate (4.00% for first 7 years of deferral, 4.00% after 7 years of deferral). Lump sums for recent terminations are based on the actual lump sum rates as of April 1, 2023.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
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Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Inclusion date The plan is frozen to new participants as of October 1, 2007.

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

Mortality

- **Healthy** Separate rates for non-annuitants (based on Pri-2012 "Employees" table without collar or amount adjustments and then projected forward with generational projection using adjusted Scale MP-2021) and annuitants (based on Pri-2012 "Healthy Annuitants" table (participants and beneficiaries combined) without collar or amount adjustments, projected forward with generational projection using adjusted Scale MP-2021. The rate of future mortality improvement at any age for any year beginning on or after the valuation date is capped at 0.78%.
- **Disabled** The IRS prescribed (Rev. Rul. 96-7) mortality table for disabled participants

Termination Rates varying by age and service

Percentage leaving during the year	
Attained Age	Rate
25	15.0%
30	13.0%
35	11.0%
40	9.0%
45	7.0%
50	5.0%
55	0.0%

Disability None

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Retirement

Rates varying by age, average age 62

For purposes of determining the Funding Target and Target Normal Cost (both disregarding at-risk assumptions), the rates at which participants retire by age are shown below.

Percentage retiring during the year	
Age	Rate
55 – 61	5.0%
62	50.0%
63 – 69	30.0%
70	100.0%

Benefit commencement date:

- Preretirement death benefit Lump sum payable to surviving spouse upon death
- Termination benefit Upon termination of employment
- Retirement benefit Upon termination of employment

Form of payment

All active participants are assumed to take a lump sum distribution upon termination of employment. The lump is calculated using the 1983 Group Annuity Mortality Table, set back three years, with rate blended 50% for males and females, the PBGC graded rate structure, and an immediate interest rate of 4.79%.

Terminated participants are assumed to take an immediate lump sum distribution if their termination date is in the prior plan year or if a lump sum is payable. Other terminated participants are assumed to receive lump sums at 65.

Administrative expenses

3.30% of fair value of assets.

Cash flow

- Timing of benefit payments Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the first of the month coincident with or next following the date of decrement.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
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Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits
Target normal cost	Present value of benefits expected to accrue during plan year plus plan-related expenses expected to be paid from plan assets during plan year as required by regulations under IRC §430.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the 2023 plan year.)
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with Toshiba International Corporation and, based on that review, is not aware of any significant benefits required to be valued that were not.

Sources of Data and Other Information

Toshiba International Corporation furnished participant data as of April 1, 2024. The fair value of assets as of March 31, 2024 was provided by Toshiba and US Bank. Data and other information were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the plan sponsor, no assumptions or estimates were made due to completeness, and the data was adjusted to reflect any significant events that occurred between the date the data was collected and the measurement date.

We are not aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	<p>The segment interest rates used to calculate the funding target were updated from an applicable month of April 2023 to April 2024.</p> <p>The mortality table used to calculate the funding target was updated to reflect the latest mortality improvement scale, as required by guidance issued by IRS under IRC §430, and the base mortality table was updated to Pri-2012, as required.</p> <p>The immediate lump sum interest rate assumption was updated to reflect decreases in 30-year Treasury rates.</p>
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Assumptions Rationale - Significant Economic Assumptions – Contributions

Discount rate	<p>The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.</p>
Lump sum conversion rate	<p>As required by IRC §430, lump sum benefits are valued using “annuity substitution”, adjusted as required to account for the fact that the plan’s immediate lump sum conversion rate is either IRC §417(e) assumptions or the 30-year treasury rate, whichever produces the larger lump sum.</p>

Assumptions Rationale – Significant Demographic Assumptions

Healthy Mortality	<p>Assumptions used for funding purposes are as prescribed by IRC §430(h)</p>
Termination and Retirement	<p>Rates reflect expected future experience and are simplified based on limited plan experience and assumptions used for plans with similar populations.</p>
Deferred vested benefit	<p>Deferred vested participants’ assumed commencement age reflects expected future experience and is simplified based on limited plan experience and assumptions used for plans with similar populations.</p>
Form of payment	<p>All active participants are assumed to take a lump sum distribution upon termination of employment based on plan experience.</p>

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

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

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

- The immediate lump sum interest rate assumption was updated from 3.67% to 4.79% this year.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V Summary of Plan Provisions

Plan Provisions

The most recent amendment reflected in the following plan provisions was December 15, 2017.

Covered Employees Hourly employees employed at the Industrial Division in Houston, Texas who were participants as of October 1, 2007.

Participation Date The first April 1 or October 1 coincident with or next following the later of (a) completion of a year of service (first year of employment or any plan year thereafter) during which the employee works at least 1,000 hours, and (b) attainment of age 21, but before October 1, 2007.

Definitions

Vesting service One year for each plan year during which the participant works at least 1,000 hours including plan years before employee became a participant but not prior to age 18.

Benefit service For each plan year in which a participant completes 1,000 hours of employment with Toshiba International, Inc., benefit service accrues according to the following schedule:

Hours of Service as a Participant and an Eligible Employee during the Plan Year	Years of Benefit Service
1 – 199	.1
200 – 399	.2
400 – 599	.3
600 – 799	.4
800 – 999	.5
1,000 – 1,199	.6
1,200 – 1,399	.7
1,400 – 1,599	.8
1,600 – 1,799	.9
1,800 or more	1.0

As of October 1, 2007, the plan was frozen to future benefit service accruals. Hours of employment after September 30, 2007 are credited for vesting service, but not for benefit service.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.
Monthly pension benefit	\$10 for each year of benefit service
Monthly postretirement spouse benefit	50% of the monthly pension benefit as of the date of death reduced for the 50% joint and survivor election and reduced for payment as early as the participant's 55 th birthday.

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service.
Postponed retirement	Retirement after NRD
Vested termination	Termination for reasons other than death or retirement after completing five years of vesting service.
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse.

Benefits Paid Upon the Following Events

Normal retirement	Monthly pension benefit determined as of NRD
Early retirement	Monthly pension benefit determined as of early retirement date, reduced 5.0% for each year of payment before age 65.
Postponed retirement	Pension payable at normal retirement date is increased by the greater of (i) 5% per year or (ii) actuarial equivalence as defined under the terms of the plan for each year pension is deferred past age 65. In no event shall this be less than the benefit calculated based on service to date of termination.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Vested termination	Monthly pension benefit determined as of termination date, payable at the participant's NRD. May commence reduced benefit as early as 55 if completed 10 years of vesting service.
Disablement	Monthly spouse benefit determined as of participant's date of death.
Preretirement death	No benefit payable except the death benefit available through the form of payment elected.

Other Plan Provisions

Forms of payment	Monthly pension benefits are paid as described above as a life annuity. Other forms of payment are a 75%, 50%, and 33.3% joint and survivor annuity, a 10- or 15-year certain and life annuity, 10- or 15-year annual installment payments, or a lump sum payment.
Actuarial equivalence for lump sum payments	The lump sum is calculated using three different actuarial equivalence assumptions. The participant receives the most favorable lump sum. <ul style="list-style-type: none">• Actuarial Equivalence 1 1983 Unisex Group Annuity Mortality Table, set back three years, the PBGC graded rate structure, and an immediate interest rate equal to the annual rate of interest on 30-year Treasury securities.• Actuarial Equivalence 2 417(e) Applicable Mortality Table as specified by Rev. Rul. 2001-62, the PBGC graded rate structure, and an immediate interest rate equal to the annual rate of interest on 30-year Treasury securities.• Actuarial Equivalence 3 417(e)(3)(B) Applicable Mortality Table, the adjusted first, second and third segment rates prescribed by code Section 417(e)(3)(C) and (D) for the month of March.
Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.
Pension Increases	None
Plan participants' contributions	None

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

There have been no changes in the principal plan provisions since the prior valuation.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

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

Attained Age	Attained Years of Credited Service ²										Total
	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	1	1	0	0	0	0	0	0	0	0	2
40-44	1	3	3	0	0	0	0	0	0	0	7
45-49	1	4	7	2	0	0	0	0	0	0	14
50-54	4	10	10	3	3	0	0	0	0	0	30
55-59	0	11	6	11	4	0	0	0	0	0	32
60-64	3	14	11	8	9	2	0	0	0	0	47
65-69	0	4	3	2	2	2	1	0	0	0	14
70 & over	1	1	2	0	1	2	1	0	0	0	8
Total	11	48	42	26	19	6	2	0	0	0	154

² Age and service for purposes of determining category are based on exact (not rounded) values.
 Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
 EIN / PN: 94-1652435/002
 Plan Sponsor: Toshiba International Corporation
 Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	Toshiba International Corporation
EIN/PN	94-1652435/002
Plan Name	Toshiba International Corp. Hourly Pension Plan for Industrial Division
Valuation Date	April 1, 2024
Enrolled Actuary	David M. Anderson
Enrollment Number	23-07493

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SCHEDULE SB ATTACHMENTS

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

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Age	Retirement Age	Assumed Number Eligible	Assumed Number Retiring	Age X Number Retiring
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SCHEDULE SB ATTACHMENTS

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SCHEDULE SB ATTACHMENTS

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Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
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SCHEDULE SB ATTACHMENTS

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Other Plan Provisions

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Maximum on benefits and pay	All benefits and pay for any calendar year may not exceed the maximum limitations for that year as defined in the Internal Revenue Code. The plan provides for increasing the dollar limits automatically as such changes become effective.
Pension Increases	None
Plan participants' contributions	None

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

SCHEDULE SB ATTACHMENTS

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions. WTW is not aware of any future plan changes which are required to be reflected.

Changes in Benefits Valued Since Prior Year

There have been no changes in the principal plan provisions since the prior valuation.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024

TOSHIBA INTERNATIONAL CORPORATION
HOURLY PENSION PLAN FOR INDUSTRIAL DIVISION
SPONSOR'S EIN: 94-1652435
PLAN NUMBER: 002
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
March 31, 2025

(a) (b) Identity of Issue or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
Mutual Funds:			
* U.S. Bancorp Asset Management, Inc.	First American Government Obligations Fund	\$ 25,097	\$ 25,097
J.P. Morgan Investment Management, Inc.	Undiscovered Managers Behavioral Value Fund	76,814	76,523
Artisan Partners Limited Partnership	Artisan High Income Fund	76,442	69,942
Baird Asset Management	Baird Aggregate Bond Fund	403,000	358,559
Cohen & Steers Capital Management, Inc.	Cohen & Steers Institutional Realty Shares Fund	103,233	104,436
Columbia Threadneedle	Columbia Small Cap Growth Fund	51,826	48,479
Fidelity Investments	Fidelity International Index Fund	173,736	206,406
Fidelity Investments	Fidelity 500 Index Fund	556,747	780,312
Fidelity Investments	Fidelity Emerging Markets Index Fund	187,585	188,481
Fidelity Investments	Fidelity Mid Cap Index Fund	356,003	410,906
ClearBridge Investments, LLC	ClearBridge International Growth Fund	92,170	103,001
Mondrian Investment Partners Ltd	Mondrian International Value Equity Fund	95,847	104,616
BlackRock, Inc.	Ishares Core U.S. Aggregate Bond ETF	204,285	206,347
BlackRock, Inc.	Ishares Trust Ishares 5 10 Year ETF	59,732	60,661
New York Life Investment Management LLC	New York Life Investments MacKay High Yield Corporate Bond Fund	70,154	69,944
PGIM Investments LLC	PGIM Total Return Bond Fund	229,628	231,251
Nuveen Asset Management, LLC	Nuveen Core Bond Fund	397,474	359,144
		<u>\$ 3,159,773</u>	<u>\$ 3,404,105</u>

* Indicates a party-in-interest

This schedule has been prepared from information certified by U.S. Bank National Association as complete and accurate.

See independent auditor's report.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24 Change in Actuarial Assumptions

- The immediate lump sum interest rate assumption was updated from 3.67% to 4.79% this year.

Plan Name: Toshiba International Corp. Hourly Pension Plan for Industrial Division
EIN / PN: 94-1652435/002
Plan Sponsor: Toshiba International Corporation
Valuation Date: April 1, 2024