Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 07/01/1969

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)
THYSSENKRUPP NORTH AMERICA, LLC

9450 SW GEMINI DR, SUITE 28424
BEAVERTON, OR 97008

2b Employer Identification Number (EIN)
22-2393554

2c Plan Sponsor's telephone number
248-631-9493

2d Business code (see instructions)
423500

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	KATHRYN LITTLETON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	JAMES ALLISON
	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 ☐ Same as Plan Sponsor

THYSSENKRUPP MATERIALS NA, INC

22355 WEST ELEVEN MILE ROAD
SOUTHFIELD, MI 48033

3b Administrator's EIN
38-0445860

3c Administrator's telephone number
248-233-5676

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**	1004
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	**6a(1)**	161
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	173
b	Retired or separated participants receiving benefits	**6b**	521
c	Other retired or separated participants entitled to future benefits	**6c**	371
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1065
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	169
f	Total. Add lines **6d** and **6e**.	**6f**	1234
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**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 Characteristic Codes in the instructions:

1A 1H 1I 3H

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

9a Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (4) ☒ **C** (Service Provider Information)
- (5) ☒ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 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)

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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	90828022
b Actuarial value	**2b**	92917637

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	638	60597206	60597206
b For terminated vested participants	216	8749401	8749401
c For active participants	163	19838250	21132891
d Total	1017	89184857	90479498

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.33 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	822769
c Target normal cost	**6c**	822769

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

09/04/2026
Date

LAUREN PELLERITO
Type or print name of actuary

26-06364
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

248-936-7700
Telephone number (including area code)

TRAVELERS TOWER
26555 EVERGREEN ROAD, SUITE 1600
SOUTHFIELD, MI 48076
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)	2138230	28518662
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	1009478	0
9	Amount remaining (line 7 minus line 8)	1128752	28518662
10	Interest on line 9 using prior year's actual return of 1.14 %	12868	325113
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 5.05 %		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	1141620	8453251
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	20390524

Part III Funding Percentages

14	Funding target attainment percentage	14	80.15 %
15	Adjusted funding target attainment percentage	15	102.69 %
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	82.34 %
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? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] 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
0	0	0	0

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

21 Discount rate:

a Segment rates:	1st segment: 5.07 %	2nd segment: 5.31 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	822769
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	17952385	2326131
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**	3148900

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	3148900	3148900

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

WILLIS TOWERS WATSON US LLC

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 17 50	NONE KNOWN	303161	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PLANTE & MORAN, PLLC

33-1498605

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 17 50	NONE KNOWN	283920	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEYFARTH SHAW, LLP

36-2152202

(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?
29 50	NONE KNOWN	170371	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

BENEFITS OUTSOURCING INC

38-3370067

(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?
50 65	NONE KNOWN	114317	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

NEPC, LLC

26-1429809

(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?
17 50	NONE KNOWN	100305	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

THE BANK OF NEW YORK MELLON

13-5160382

(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?
19 21 50 59 62	NONE KNOWN	55024	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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)

AETNA LIFE INSURANCE COMPANY

06-6033492

(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?
13 50 51 73 99	NONE KNOWN	10783	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: TK LDI LONG TRS BD MASTER TRUST UNT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-007	M	0

a Name of MTIA, CCT, PSA, or 103-12 IE: TK LDI LONG CREDIT MASTER TRUST UNT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-008	M	0

a Name of MTIA, CCT, PSA, or 103-12 IE: TK LDI INTERMEDIATE MASTER

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-009	M	0

a Name of MTIA, CCT, PSA, or 103-12 IE: TK CASH/S.T. BOND MASTER TRUST UNIT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-005	M	5187253

a Name of MTIA, CCT, PSA, or 103-12 IE: TK FIXED INCOME MASTER TRUST UNIT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-002	M	20522

a Name of MTIA, CCT, PSA, or 103-12 IE: TK EQUITY MASTER TRUST UNIT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-001	M	2138

a Name of MTIA, CCT, PSA, or 103-12 IE: TK LDI CUSTOM MASTER TRUST UNIT

b Name of sponsor of entity listed in (a): THYSSENKRUPP NORTH AMERICA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-2535907-010	M	153265490

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	585218	478720
(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)	90242804	158475403
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	90828022	158954123
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	90828022	158954123

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)	19726	
(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)		19726
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		6685649
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		6705375
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7551076	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	-2049884	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		5501192
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)	114888	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	89047	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	55024	
(7) Actuarial fees	2i(7)	303161	
(8) Legal fees	2i(8)	170371	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	416352	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1148843
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		6650035
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		55340
l Transfers of assets:			
(1) To this plan	2l(1)		68070761
(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) [X] 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) [X] 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: PLANTE & MORAN, PLLC **(2)** EIN: 33-1498605

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.)	**4a**		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.)	**4b**		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.)	**4c**		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.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		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?	**4g**		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?	**4h**		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.)	**4i**	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.)	**4j**	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?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
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.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [X] Yes [ ] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year 0.

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.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 585033.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

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): 38-8535907

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 | 4

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: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ 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. ☐ 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: 0.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 99.0 %

High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 1.0 % Other: 0.0 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☒ 5-10 years ☐ 10-15 years ☐ 15 years or more

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

thyssenkrupp Defined Benefit Pension Plan
North America

Modified Cash Basis Financial Report

December 31, 2025

thyssenkrupp Defined Benefit Pension Plan North America

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Independent Auditor's Report

To the Plan Administrator
thyssenkrupp Defined Benefit Pension Plan
North America

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

We have performed audits of the modified cash basis financial statements of thyssenkrupp Defined Benefit Pension Plan North America (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 modified cash basis financial statements comprise the statement of net assets available for benefits (modified cash basis) as of December 31, 2025 and 2024 and the related statement of changes in net assets available for benefits (modified cash basis) for the years then ended and the related notes to the modified cash basis financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024 and for the years then ended stating that the certified investment information, as described in Note 4 to the modified cash basis 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 Audits of the Modified Cash Basis Financial Statements* section:

- The amounts and disclosures in the accompanying modified cash basis financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting described in Note 2.
- The information in the accompanying modified cash basis financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audits of the Modified Cash Basis 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.

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Basis of Accounting

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

Emphasis of Matters

As explained in Note 3 to the modified cash basis financial statements, effective September 30, 2025, approximately $68,100,000 of net assets available for benefits was transferred from The Budd Company Employee Pension Plan into the Plan as a result of a plan merger. Furthermore, as explained in Note 1, the Plan was terminated effective November 30, 2025, or as soon thereafter as administratively possible. Our opinion has not been modified with respect to these matters.

Responsibilities of Management for the Modified Cash Basis Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting described in Note 2 and for determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of modified cash basis 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 modified cash basis financial statements.

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

Auditor's Responsibilities for the Audits of the Modified Cash Basis Financial Statements

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audits* section of our report, our objectives are to obtain reasonable assurance about whether the modified cash basis 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 audits conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the modified cash basis financial statements.

In performing audits in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- Identify and assess the risks of material misstatement of the modified cash basis 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 modified cash basis financial statements.
- Obtain an understanding of internal control relevant to the audits in order to design audit procedures that are appropriate in the circumstances but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the modified cash basis 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 modified cash basis financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of the modified cash basis of accounting described in Note 2.

Accordingly, the objective of the ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the modified cash basis financial statements as a whole are presented fairly, in all material respects, in accordance with the modified cash basis of accounting described in Note 2.

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

Supplemental Schedules Required by ERISA

The supplemental schedules of assets held at end of year (modified cash basis) as of December 31, 2025 and reportable transactions (modified cash basis) for the year ended December 31, 2025 are presented for the purpose of additional analysis and are not a required part of the modified cash basis financial statements but are supplemental information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the modified cash basis financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the modified cash basis financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the modified cash basis financial statements or to the modified cash basis financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

To the Plan Administrator
thyssenkrupp Defined Benefit Pension Plan
North America

In our opinion:

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

Plante & Moran, PLLC

Clinton Township, Michigan
October 6, 2026

Statement of Net Assets Available for Benefits - Modified Cash Basis

December 31, 2025 and 2024

	2025	2024
Assets		
Investments at fair value:		
Money market fund	$ 478,720	$ 585,218
Investment in the thyssenkrupp North America, LLC Master Trust (Note 6)	158,475,403	90,242,804
Net Assets Available for Benefits	**$ 158,954,123**	**$ 90,828,022**

See notes to modified cash basis financial statements.

Statement of Changes in Net Assets Available for Benefits - Modified Cash Basis

Years Ended December 31, 2025 and 2024

	2025	2024
Additions		
Investment income - Plan's share of the investment in the thyssenkrupp North America, LLC Master Trust's investment income (Note 6)	$ 6,685,649	$ 1,055,933
Other income	19,726	19,091
Total additions	6,705,375	1,075,024
Deductions		
Benefits paid directly to participants or beneficiaries	7,551,076	8,163,184
Annuity contract purchase adjustment (Note 2)	(2,049,884)	-
Administrative expenses	1,148,843	735,261
Total deductions - Net	6,650,035	8,898,445
Net Increase (Decrease) before Other Changes	55,340	(7,823,421)
Transfers In (Note 3)	68,070,761	-
Net Increase (Decrease)	68,126,101	(7,823,421)
Net Assets Available for Benefits		
Beginning of year	90,828,022	98,651,443
End of year	**$ 158,954,123**	**$ 90,828,022**

See notes to modified cash basis financial statements.

Note 1 - Plan Description

The following description of thyssenkrupp Defined Benefit Pension Plan North America (the "Plan") provides only general information. Participants should refer to the plan's legal documents for a more complete description of the Plan's provisions.

As described in Note 3, effective September 30, 2025, The Budd Company Employee Pension Plan (the "Budd Plan") merged into the Plan.

Effective December 31, 2022, Rotek Salaried and Florence Hourly Pension Plan (the "Rotek Salary and Florence Hourly Plan") and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees (the "Rotek Aurora Hourly Plan") merged into the Plan.

Further, effective December 31, 2021, ThyssenKrupp Industrial Solutions (USA), Inc. Retirement Plan (the "TKIS Plan") and ThyssenKrupp Crankshaft Company Retirement Income Plan for Employees Covered by the Bargaining Agreement with the International Union, United Automobile, Aerospace, and Agricultural Implement Workers of America, U.A.W. Local 2128 (the "Crankshaft Plan") merged into the Plan.

On September 12, 2025, by unanimous written consent of the Company's board of managers (as ratified on September 19, 2025), the Company elected to terminate the Plan effective November 30, 2025, or as soon thereafter as administratively possible. Accordingly, the descriptions below are provisions of the Plan prior to termination.

General

The Plan was adopted to provide a means by which eligible employees of certain divisions within thyssenkrupp North America, LLC (the "Company") are provided retirement benefits. The Company acts as the sponsor of the Plan. The Plan is a noncontributory defined benefit plan that is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Plan is frozen to new participants and accrual of benefits.

Eligibility and Vesting

Employees become fully vested in company-funded accrued benefits upon completion of five years of service. Employees who terminate service before becoming fully vested forfeit all benefits under the Plan. Employees in the Plan became fully vested in their accrued benefits as of the date at which benefits were frozen.

Pension Benefits

Normal retirement is permitted at the age of 65. The Plan also permits early retirement based on certain age and credited service requirements. Calculation of benefits is based on a blend of credited service, compensation, and a monthly pension benefit in effect when the years of credited service were earned, as described in the plan documents. The Plan also contains provisions for certain disability, deferred vesting, and surviving spouse benefits.

Death Benefits

In certain circumstances, if an active or terminated employee who has a vested interest in the Plan dies prior to his or her normal retirement age, the surviving spouse or designated beneficiary shall receive a survivor benefit, as defined in the plan documents.

Funding Policy

Contributions are made by the plan sponsor in actuarially determined amounts. The Company's policy is to make contributions necessary to satisfy ERISA funding standards. The plan sponsor will also make additional contributions from time to time, with the total not to exceed the maximum contribution deductible under the Internal Revenue Code. Annual contributions meet the minimum funding requirements of ERISA.

Note 1 - Plan Description (Continued)

Previously, the former TKIS Plan was further supported by employee contributions. Neither the plan sponsor's contributions nor the Plan's assets were allocated for the accounts of individuals; however, records of individual employee contributions were maintained. Prior to January 1, 2006, participants were required to contribute 2.25 percent of their monthly compensation. Participants are fully and immediately vested in these contributions. Present employees' accumulated contributions at December 31, 2025 and 2024 were immaterial. Beginning on January 1, 2006, employee contributions are no longer allowed.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The accompanying statements have been prepared on the modified cash basis of accounting. Under the modified cash basis of accounting, contributions and investment income are recognized when cash is received, benefit payments and expenses are recognized when paid, and investments are recognized at fair value.

Investment Valuation

The fair value of the Plan's interest in the thyssenkrupp North America, LLC Master Trust (the "Master Trust") is based on the beginning of year value of the Plan's interest in the investment units held by the Master Trust, plus actual contributions and allocated investment income, less actual distributions and allocated administrative expenses. The Master Trust's investments are stated at fair value.

The common collective trust funds are valued at net asset value per share (NAV) or its equivalent of the funds, which is based on the fair value of the funds' underlying assets.

The government securities and corporate debt securities are valued using quoted market prices and/or other market data for the same or comparable instruments and transactions in establishing the prices, discounted cash flow models, and other pricing models. These models are primarily industry-standard models that consider various assumptions, including time value and yield curve, as well as other relevant economic measures.

Investments in partnerships are valued at NAV (or its equivalent) of the funds based on audited financial statements of the funds, where available, with adjustments to account for partnership activity and other applicable valuation adjustments.

The money market funds and interest-bearing cash are valued at fair value based on their outstanding balances.

All other investments are valued based on quoted market prices reported in active markets. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. See Note 7 for additional information.

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

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable, under the Plan's provisions, to the service employees have rendered to the valuation date. These include benefits expected to be paid to retired or terminated employees or their beneficiaries, beneficiaries of employees who have died, and present employees or their beneficiaries.

Note 2 - Summary of Significant Accounting Policies (Continued)

The normal individual retirement benefit is based on a blend of credited service, annualized compensation, and a monthly pension benefit in effect when the years of credited service were earned, as described in the plan documents.

Actuarial Assumptions

The actuarial present value of accumulated plan benefits is determined by the independent actuary, Willis Towers Watson, and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts and interest) and probability of payment (by means of decrements, such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The determinations were made as of January 1, 2025.

The significant actuarial assumptions underlying the actuarial computations at January 1, 2025 are as follows:

- Actuarial cost method: Projected unit cost method
- Interest rate: 5.90 percent
- Mortality basis (all annuitants): RP-2014 for healthy annuitants adjusted back to 2006 with MP-2014, projected to 2017 using scale MP-2020, adjusted for the plan-specific, credibility-weighted factor, with MP-2021 mortality improvement scale
- Mortality basis (Materials salary, TKIS Plan, and Rotek Salary and Florence Hourly Plan salary nonannuitant participants): The sex-distinct PRI-2012 tables for White Collar Employees were used, with the MP-2021 mortality improvement scale
- Mortality basis (Materials hourly, Crankshaft Plan, Rotek Aurora Hourly Plan, and Rotek Salary and Florence Hourly Plan hourly nonannuitant participants): The sex-distinct PRI-2012 tables for Blue Collar Employees were used, with the MP-2021 mortality improvement scale

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

Benefit Payments

Benefits are recorded when paid.

Prior to the plan merger described in Note 3, the Budd Plan entered into an agreement to purchase an annuity contract with a third-party life insurance company. The annuity contract was fully funded prior to the merger. However, subsequent to the merger date, there was an adjustment to the original purchase price, resulting in a refund of approximately $2,050,000, which is presented as annuity contract purchase adjustment on the accompanying statement of changes in net assets available for benefits - modified cash basis.

Administrative Expenses

Various administrative expenses associated with the Plan were paid by the Company and its affiliates during the years ended December 31, 2025 and 2024.

Note 2 - Summary of Significant Accounting Policies (Continued)

Risks and Uncertainties

Contributions to the Plan and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and demographics. Due to the changing nature of these assumptions, it is at least reasonably possible that changes in these assumptions will occur in the near term and, due to the uncertainties inherent in setting assumptions, that the effect of such changes could be material to the modified cash basis financial statements. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. It is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the statement of net assets available for benefits - modified cash basis.

Use of Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions and deductions during the reporting period. Actual results could differ from those estimates.

Note 3 - Plan Merger

Effective September 30, 2025, the Budd Plan merged into the Plan pursuant to the terms of the Plan's amendment. Accordingly, assets of approximately $68,100,000 and participant accumulated plan benefits of approximately $50,900,000 were transferred into the Plan on this date.

The actuarial present value of accumulated plan benefits as of January 1, 2025, disclosed in Note 5, does not reflect the merger.

Note 4 - Certified Information

The Bank of New York Mellon/BNY Mellon, N.A. (the "Trustee") holds the Master Trust's investments and executes all investment transactions. The investment balances and related investment results included in the accompanying modified cash basis financial statements, including master trust information summarized in Note 6, are based solely on information certified by the Trustee.

Certain assets of the Master Trust are in investment funds managed by The Bank of New York Mellon/BNY Mellon, N.A. or its affiliates. Since The Bank of New York Mellon/BNY Mellon, N.A. is the Trustee of the Plan, these transactions qualify as party-in-interest transactions, as defined under ERISA guidelines. The market value of these investments was approximately $6,500,000 at December 31, 2024. There were no such assets held by the Master Trust as of December 31, 2025.

Aetna Life Insurance Company (Aetna) was the paying agent on behalf of the former TKIS Plan. Subsequent to the TKIS Plan merger into the Plan, Aetna continues to be the paying agent for all legacy TKIS Plan participants. Certain investments of the Plan are managed by Aetna. As the paying agent, Aetna is a party in interest to the Plan.

Note 5 - Accumulated Plan Benefits

The actuarial present value of accumulated plan benefits is determined by the independent actuary, Willis Towers Watson. The actuarial present value of accumulated plan benefits as of January 1, 2025 was as follows:

Actuarial present value of accumulated plan benefits:	
Vested benefits:	
Participants currently receiving benefit payments	$ 57,983,230
Other vested participants	27,472,003
Total vested benefits	85,455,233
Nonvested benefits	1,215,165
Total actuarial present value of accumulated plan benefits	$ 86,670,398

The following schedule summarizes the components of the change in actuarial present value of accumulated plan benefits for the year ended January 1, 2025:

Actuarial present value of accumulated plan benefits - Beginning of year	$ 96,052,867
(Decrease) increase during the year attributable to:	
Actuarial loss	(117,667)
Interest due to the decrease in the discount period	4,782,506
Benefits paid	(8,163,184)
Change of assumptions	(5,884,124)
Net decrease	(9,382,469)
Actuarial present value of accumulated plan benefits - End of year	$ 86,670,398

During the year ended January 1, 2025, the actuarial present value of accumulated plan benefits decreased by $5,884,124 primarily as a result of changing the discount rate from 5.20 percent to 5.90 percent.

Note 6 - Interest in Master Trust

The Plan's investments are in various investment units held by the Master Trust, which was established for the investment of assets of the Plan and several other pension plans sponsored by affiliated participating employers of thyssenkrupp North America, LLC. The assets of the Master Trust are held by the Trustee. Investment income is allocated to the individual plans based upon the plans' individual ownership of that associated investment unit. Administrative expenses relating to the Master Trust are allocated to the individual plans based upon their share in the net assets of the Master Trust. Subsequent to the merger described in Note 3, the Plan is the only remaining plan with interest in the Master Trust; therefore, all investments and the related investment activity held by the Master Trust are allocated to the Plan effective September 30, 2025.

Note 6 - Interest in Master Trust (Continued)

The fair values of the investments held within various investment units by the Master Trust at December 31, 2025 and 2024 are as follows:

	2025		2024	
	Master Trust Balances	Plan's Interest in Master Trust Balances	Master Trust Balances	Plan's Interest in Master Trust Balances
Assets:				
Cash - Non-interest bearing	$ 4,007,714	$ 4,007,714	$ 276,582	$ -
Investments - At fair value:				
Interest-bearing cash	5,190,745	5,190,745	16,156,157	2,485,970
Mutual funds	-	-	204,372,652	87,746,720
Common/collective trust funds	149,259,296	149,259,296	72,017,225	-
Partnerships	-	-	10,374,343	-
Fixed-income securities	-	-	111,826,463	-
Fixed-income securities - Loaned	-	-	6,139,060	-
Common stocks	-	-	17,198,719	-
Common stocks - Loaned	-	-	208,327	-
Total investments - At fair value	154,450,041	154,450,041	438,292,946	90,232,690
Collateral held under securities lending agreements - Money market funds	-	-	6,492,908	-
Other assets	216,934	216,934	1,209,790	10,114
Total assets	154,666,975	154,666,975	446,272,226	90,242,804
Liabilities:				
Obligation under securities lending agreement	-	-	(6,492,908)	-
Unsettled trades	(199,286)	(199,286)	(566,995)	-
Total liabilities	(199,286)	(199,286)	(7,059,903)	-
Net assets of the Master Trust	$ 158,475,403	$ 158,475,403	$ 439,212,323	$ 90,242,804

The investment income for the Master Trust for the years ended December 31, 2025 and 2024 is as follows:

	2025	2024
Net realized and unrealized gains in fair value of investments	$ 4,858,003	$ 3,889,043
Interest and dividends	8,321,793	13,928,828
Gain (loss) on derivative instruments	75,250	(505,609)
Securities lending income	9,536	25,650
Net investment income	$ 13,264,582	$ 17,337,912

Note 6 - Interest in Master Trust (Continued)

Securities Lending

The Master Trust participated in a securities lending program with the Trustee for its U.S. and non-U.S. securities held in custody with the Trustee. The program allowed up to $100,000,000 of the qualified assets to be on loan at any given time. These securities were lent to certain unrelated third-party brokers in exchange for cash and noncash collaterals. At December 31, 2024, U.S. assets on loan were collateralized at 102 percent of the assets' market value. There were no non-U.S. assets on loan at December 31, 2024. Both the collateral and the securities loaned were marked to market on a daily basis, with additional collateral obtained or refunded as necessary. In the event that the loaned securities were not returned by the borrower, the bank would, at its own expense, either replace the loaned securities or, if unable to purchase those securities on the open market, credit the plan's accounts with cash equal to the fair value of the loaned securities.

The net assets of the Master Trust reflect, as an asset, the collateral received under the securities lending arrangement, with an offsetting liability representing the Master Trust's obligation to return the collateral to the borrower. The collateral received from borrowers totaled $6,492,908 as of December 31, 2024. At December 31, 2024, the entire balance received consisted of cash collateral, which was invested in a money market fund. In the event that a loaned security was called, the Master Trust would receive the market value of the asset in cash. The market value of loaned securities totaled $6,347,387 at December 31, 2024.

Although the Master Trust's securities lending activities were collateralized as described above, and although the terms of the securities lending agreement with the custodial bank required the bank to comply with government rules and regulations related to the lending of securities held by ERISA plans, the securities lending program involved both market and credit risk. In this context, market risk refers to the possibility that the borrower of securities will be unable to collateralize the loan upon a sudden material change in the fair value of the loaned securities or the collateral or that the bank's investment of collateral received from the borrowers of the Master Trust's securities may be subject to unfavorable market fluctuations. Credit risk refers to the possibility that counterparties involved in the securities lending program may fail to perform in accordance with the terms of their contracts.

During 2025, the securities lending program was terminated. The Master Trust did not have any assets on loan and did not hold any collateral as of December 31, 2025.

Derivative Instruments

The Master Trust was party to certain agreements that were designed to manage exposure to foreign exchange and interest rate risks. The interest rate and foreign currency instruments were used for the purpose of hedging changes in the fair value of assets and the actuarial present value of accumulated plan benefits that resulted from interest rate changes and currency fluctuations or as an efficient substitute for traditional securities.

The notional amount represented the contract amount, not the amount at risk. The notional amount of interest rate instruments was approximately $2,500,000 at December 31, 2024. Management has elected to present derivative information on a gross basis when subject to master netting arrangements. The estimated fair value of derivative instruments at December 31, 2024 was insignificant. For the years ended December 31, 2025 and 2024, gains of $75,250 and losses of $505,609, respectively, attributable to derivative instruments were recognized as investment income in the statements of changes in net assets available for benefits - modified cash basis.

The investment managers, on behalf of the Master Trust, managed its foreign currency and interest rate counterparty credit risks by limiting exposure to and by monitoring the financial condition of each counterparty. In the unlikely event that a counterparty failed to meet the terms of a foreign currency or an interest rate instrument, the Master Trust's risk was limited to the fair value of the instrument offset by the value of any collateral held.

Note 6 - Interest in Master Trust (Continued)

During 2025, all derivative instruments were liquidated. The Master Trust did not hold any derivative instruments as of December 31, 2025.

Note 7 - Fair Value Measurements

Accounting standards require certain assets and liabilities be reported at fair value in the financial statements and provide a framework for establishing that fair value. The framework for determining fair value is based on a hierarchy that prioritizes the valuation techniques and inputs used to measure fair value.

Level 1

Fair values determined by Level 1 inputs use quoted prices in active markets for identical assets that the Master Trust has the ability to access.

Level 2

Fair values determined by Level 2 inputs use other inputs that are observable, either directly or indirectly. These Level 2 inputs include quoted prices for similar assets in active markets, quoted prices for identical or similar assets in markets that are not active, and inputs other than quoted prices that are observable for the asset.

Level 3

Level 3 inputs are unobservable inputs, including inputs that are available in situations where there is little, if any, market activity for the related asset. These Level 3 fair value measurements are based primarily on management's own estimates using pricing models, discounted cash flow methodologies, or similar techniques taking into account the characteristics of the asset.

In instances where inputs used to measure fair value fall into different levels of the fair value hierarchy, fair value measurements in their entirety are categorized based on the lowest level input that is significant to the valuation. The Master Trust's assessment of the significance of particular inputs to these fair value measurements requires judgment and considers factors specific to each asset.

The following tables present information about the Master Trust's assets measured at fair value on a recurring basis at December 31, 2025 and 2024:

	Assets Measured at Fair Value on a Recurring Basis at December 31, 2025		
	Investments (at Fair Value)	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Interest-bearing cash	$ 5,190,745	$ -	$ 5,190,745
Investments measured at NAV - Common collective trust funds	149,259,296		
Total investments	$ 154,450,041		

Note 7 - Fair Value Measurements (Continued)

	Assets Measured at Fair Value on a Recurring Basis at December 31, 2024		
	Investments (at Fair Value)	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)
Mutual funds	$ 204,372,652	$ 204,372,652	$ -
Common stocks	17,407,046	17,407,046	-
Fixed-income securities	117,965,523	36,418,632	81,546,891
Money market fund	6,492,908	-	6,492,908
Interest-bearing cash	16,156,157	-	16,156,157
Total	362,394,286	$ 258,198,330	$ 104,195,956
Investments measured at NAV:			
Common collective trust funds	72,017,225		
Partnerships	10,374,343		
Total investments	$ 444,785,854		

Investments in Entities that Calculate Net Asset Value per Share

The Master Trust holds shares or interests in investment companies at year end where the fair value of the investment held is estimated based on net asset value per share (or its equivalent) of the investment company.

At December 31, 2025 and 2024, the fair value, unfunded commitments, and redemption rules of those investments are as follows:

	2025	2024			
	Fair Value	Fair Value	Unfunded Commitments	Redemption Frequency, if Eligible	Redemption Notice Period (in Business Days)
Common collective trust funds - Equity investments (1)	$ -	$ 72,017,225	$ -	Daily	1-2
Common collective trust funds - Fixed-income investments (2)	149,259,296	-	-	Daily	5
Partnerships - RBC Emerging Markets Equity Series (3)	-	10,374,343	-	Daily	5
Total	$ 149,259,296	$ 82,391,568	$ -		

(1) This class represents investments in actively managed common collective trust funds that invest primarily in equity securities, which may include common stocks, options, and futures.

(2) The portfolio aims to achieve a high total investment return, while providing down side risk protection by investing primarily in a diversified mix of equity, fixed income, and money market instruments.

(3) RBC Emerging Markets Equity Series invests primarily in equity securities of issuers tied to emerging market countries that are considered by the series to have the potential to provide long-term capital growth.

At December 31, 2025 and 2024, the Plan also invests in a money market fund. The fair value of the money market fund, a short-term investment, is based primarily on Level 2 inputs, as described above and in Note 2.

Note 8 - Tax Status

The Plan has received a determination letter from the Internal Revenue Service indicating that the Plan, as designed, is qualified for tax-exempt treatment under the applicable section of the Internal Revenue Code (IRC). Accordingly, no provision for income taxes has been made in the accompanying financial statements. Although the Plan has been amended since receiving the determination letter, management believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Note 9 - Subsequent Events

The modified cash basis financial statements and related disclosures include evaluation of events up through and including October 6, 2026, which is the date the modified cash basis financial statements were available to be issued.

Subsequent to December 31, 2025, the Plan allowed for a one-time election for immediate payment of certain vested benefits. Approximately 260 participants elected to receive immediate payment of their vested benefits, which resulted in lump-sum benefit payments of approximately $24,400,000.

Subsequent to the aforementioned lump-sum benefit payments, the Plan entered into an agreement to purchase an annuity contract with a third-party company. The contract was paid using plan assets during 2026 in the amount of approximately $111,100,000. Under the agreement, the third-party company assumed the obligation to pay future pension benefits, beginning on June 1, 2026, for approximately 980 eligible retirees of the Plan, as described in the agreement.

As of the date the modified cash basis financial statements were available to be issued, the plan sponsor was still in process of completing the necessary administrative tasks to allow for full liquidation of the Plan's assets.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26a
Schedule of Active Participant Data as of January 1, 2025

	Attained Years of Credited Service[1]										
Attained Age	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	4	0	1	2	0	0	0	0	0	7
40-44	0	3	3	1	5	0	0	0	0	0	12
45-49	1	6	2	4	1	2	1	0	0	0	17
50-54	2	5	3	9	4	16	9	1	0	0	49
55-59	0	2	1	6	3	13	17	6	0	0	48
60-64	1	1	2	1	2	7	7	4	2	0	27
65-69	0	0	2	0	0	0	0	0	0	0	2
70 & over	0	0	1	0	0	0	0	0	0	0	1
Total	4	21	14	22	17	38	34	11	2	0	163

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

Plan Name: thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN: 22-2393554/003
Plan Sponsor: thyssenkrupp North America, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Economic Assumptions

Interest rate basis:

- Applicable month: September
- Interest rate basis: 3-Segment Rates

Interest rates:

	Reflecting Corridors	Not Reflecting Corridors
• First segment rate	5.07%	5.07%
• Second segment rate	5.31%	5.33%
• Third segment rate	5.50%	5.36%
• Effective interest rate	5.33%	5.31%

Annual rates of increase

- Compensation increases: N/A
- Future Social Security wage bases: N/A
- Statutory limits on compensation: N/A

Administrative expenses: The amount included this year for plan-related expenses is $665,307. The method for determining administrative expenses remains the three-year average of non-PBGC related administrative expenses plus the current year's PBGC premium.

SCHEDULE SB ATTACHMENTS

Former participants of the ThyssenKrupp Materials NA, Inc. Pension Plan

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees

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

Mortality

- Funding

For non-annuitants, based on Pri-2012 "Employees" table without collar or amount adjustments and then projected forward with generational projection using 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%.

For annuitants, plan specific mortality has been approved by the IRS.

Termination

Copper and Brass Hourly: Not applicable. There are no active participants under the former Copper and Brass Hourly Plan remaining.

tk Materials: Rates varying by age and gender

Representative Termination Rates

Percentage leaving during the year		
Attained Age	Males	Females
20	0.149	0.250
25	0.099	0.149
30	0.069	0.099
35	0.049	0.069
40	0.028	0.049
45	0.017	0.028

Retirement

Copper and Brass Hourly: Not applicable. There are no active participants under the former Copper and Brass Hourly Plan remaining.

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

SCHEDULE SB ATTACHMENTS

Male and Female	
Attained Age	**Rates**
50-54	3.5%
55-61	3.5%
62	35.0%
63-64	10.0%
65	100.0%

Rates between 50 and 54 apply only to Steel employees with at least 80 points (age plus service). The weighted average retirement age is 63.

Benefit commencement date:

- Preretirement death benefit — The later of the death of the active participant or the date the participant would have attained age 55
- Deferred vested benefit — Upon termination of employment
- Disability benefit — Upon disablement
- Retirement benefit — Upon termination of employment

Form of payment

Active participants:

100% of participants are assumed to elect a lump sum.

Deferred vested participants:

50% of participants are assumed to elect a lump sum and 50% of participants are assumed to elect an annuity.

Lump sum payments

Lump sum factors at distribution date were determined as the greater of:

- 3.00% (five-year average of the December 30-year treasury rates preceding the measurement date, rounded to the nearest 25 basis points) and the RR2001-62 mortality table, and
- 3.23% for the first five years, 4.11% for the next 15 years and 4.35% thereafter (five-year average of the 417(e)(3) December 3-segment spot rates preceding the measurement date) and the PPA optional combined unisex table.

SCHEDULE SB ATTACHMENTS

Percent married	For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible participants are assumed to be married.
Spouse age	Male spouses are assumed to be 3 years older than female spouses.
At-risk assumptions	Not applicable
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement Timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met, or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Actuarial value of assets for determining minimum required contributions	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 prior plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued based on discussions with thyssenkrupp North America, LLC. regarding the likelihood that these benefits will be paid. WTW has reviewed the plan provisions with thyssenkrupp North America, LLC and, based on that review, is not aware of any significant benefits required to be valued that were not.

Data Sources

WTW used asset data supplied by the trustee. thyssenkrupp Materials NA, Inc. furnished participant data as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the company, assumptions or estimates were made when data were not available, 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.

Assumptions Rationale – Significant Economic Assumptions

Discount rate

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

Plan-related expenses

As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

SCHEDULE SB ATTACHMENTS

Lump sum conversion rate	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 lump sum conversion rate is based on the 30-year Treasury rate. This adjustment results in an expected lump sum conversion rate of 3.00% based on historical Treasury rates.

Assumptions Rationale – Significant Demographic Assumptions

Healthy Mortality	For non-annuitants, assumptions used for funding purposes are as prescribed by IRC §430(h). For annuitants, plan specific mortality has been approved by the IRS.
Disabled Mortality	Same as healthy.
Termination	Termination rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by termination patterns different than assumed. Assumed termination rates differ by age gender because of expected differences in termination rates by age and gender.
Retirement	Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.
Form of payment	The percentage of retiring participants assumed to take lump sums is based on observed experience over recent periods with annual review. The percentage of retiring participants assumed to take joint and survivor annuities is based on observed experience over recent periods with annual review.
Percent married	The assumed percentage married is based on a blending of marital statuses of recent retirees and changes expected to occur in marriage patterns of retirement age individuals in the future.

SCHEDULE SB ATTACHMENTS

Spouse age	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions since prior valuation	• The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430. • For the prior year, lump sums were determined using a 2.50% fixed interest rate, and segment rates of 2.71%, 3.66% and 3.94%. For the current year, the interest rate assumption was changed as described above. • The assumed plan-related expenses added to the target normal cost was changed from $595,938 for 2024 to $665,307 for 2025. • The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.
Change in methods since prior valuation	None.

SCHEDULE SB ATTACHMENTS

Former participants of the ThyssenKrupp Industrial Solutions (USA), Inc. Retirement Plan

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees

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

Mortality

- Healthy

For non-annuitants, based on Pri-2012 “Employees” table without collar or amount adjustments and then projected forward with generational projection using 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%.

For annuitants, plan specific mortality has been approved by the IRS.

- Disabled

None

Termination

Rates varying by age and gender

Representative Termination Rates

Percentage leaving during the year		
Attained Age	Males	Females
20	8.00	8.00
25	8.00	8.00
30	6.83	6.83
35	5.67	5.67
40	4.50	4.50
45	3.33	3.33
50	2.17	2.17
55	1.00	1.00
60	0.00	0.00
65	0.00	0.00

Disability

None.

Retirement

It is assumed that participants will retire upon becoming eligible for normal retirement.

SCHEDULE SB ATTACHMENTS

Benefit commencement date:	
• Preretirement death benefit	The later of the death of the active participant or the date the participant would have attained age 55
• Deferred vested benefit	Age 65
• Disability benefit	Age 65
• Retirement benefit	Immediately upon retirement
Form of payment	For all non-retired participants, a modified cash refund annuity was valued. It is assumed that 50% of retirees will elect the 100% joint and survivor form of payment.
Percent married	For non-retired participants, 100% were assumed to be married.
Spouse age	Wives three years younger than husband.
Covered pay	Compensation assumed paid in the current year beginning on the valuation date is the current annual rate of pay.
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

SCHEDULE SB ATTACHMENTS

Actuarial value of assets for determining minimum required contributions

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 prior plan year.)

The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued based on discussions with thyssenkrupp North America, LLC regarding the likelihood that these benefits will be paid. WTW has reviewed the plan provisions with thyssenkrupp North America, LLC 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

WTW used asset data supplied by the trustee. thyssenkrupp Industrial Solutions (USA), Inc. furnished participant data as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the company, assumptions or estimates were made when data were not available, 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.

Assumptions Rationale - Significant Economic Assumptions

Discount rate

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

Plan-related expenses

As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and

	actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	For non-annuitants, assumptions used for funding purposes are as prescribed by IRC §430(h). For annuitants, plan specific mortality has been approved by the IRS.
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by termination patterns different than assumed. Assumed termination rates differ by age because of expected differences in termination rates by age.
Retirement	Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.
Form of payment	The percentage of retiring participants assumed to take joint and survivor annuities is based on observed experience over recent periods with annual review.
Percent married	The assumed percentage married is based on a blending of marital statuses of recent retirees and changes expected to occur in marriage patterns of retirement age individuals in the future.
Spouse age	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

Prescribed Methods

Funding methods	The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of practice (ASOPs). These methods are required by IRC §430, or were

selected by the plan sponsor from a range of methods permitted by IRC §430.

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

The following changes in assumptions were made as part of this valuation:

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed plan-related expenses added to the target normal cost was changed from $595,938 for 2024 to $665,307 for 2025.
- The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.

SCHEDULE SB ATTACHMENTS

Former participants of the ThyssenKrupp Crankshaft Company Retirement Income Plan

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees

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

Mortality

- Healthy

For non-annuitants, based on Pri-2012 “Employees” table without collar or amount adjustments and then projected forward with generational projection using 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%.

For annuitants, plan specific mortality has been approved by the IRS.

- Disabled

Revenue Ruling 96-7 mortality table

Termination

Rates varying by age and service.

Withdrawal rates for employees with five or more years of service are shown below:

Years of Service	Withdrawal Rate
20	9.90%
25	9.70%
30	9.30%
35	8.70%
40	7.80%
45	6.40%
50	4.20%
55	1.50%
60	0.10%
63	0.00%
65	0.10%
68 and over	0.00%

SCHEDULE SB ATTACHMENTS

Disability

The following table shows rates at various ages:

Disability Rates per 100 Employees	
Rates	**Males**
20	0.03
25	0.03
30	0.04
35	0.05
40	0.07
45	0.10
50	0.18
55	0.36
60	0.90
64	2.22

Retirement

Rates varying by age and credited service:

Male and Female	
Age & Credited Service	**Rate**
58 & 25	50%
63 & 5	100%

Benefit commencement date:

- Preretirement death benefit — The later of the death of the vested active participant or the date the participant would have attained age 58.
- Deferred vested benefit — The later of age 65 or age 62 with 5 years of vesting service.
- Disability benefit — Upon disablement.
- Retirement benefit — Upon termination of employment.

Form of payment — Participants are assumed to elect the normal form.

Percent married — It was assumed that 100% of all active participants are married.

Spouse age — Wives are assumed to be three years younger than husbands.

Timing of benefit payments — Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.

SCHEDULE SB ATTACHMENTS

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Actuarial value of assets for determining minimum required contributions	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 prior plan year.) The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued based on discussions with thyssenkrupp North America, LLC. regarding the likelihood that these benefits will be paid. WTW has reviewed the plan provisions with thyssenkrupp North America, LLC 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

WTW used asset data supplied by the trustee. thyssenkrupp Crankshaft Company, LLC furnished participant data as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with thyssenkrupp Crankshaft Company, LLC, assumptions or estimates were made when data were not available, 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

SCHEDULE SB ATTACHMENTS

aware of any errors or omissions in the data that would have a significant effect on the results of our calculations.

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Plan-related expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	For non-annuitants, assumptions used for funding purposes are as prescribed by IRC §430(h). For annuitants, plan specific mortality has been approved by the IRS.
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by termination patterns different than assumed. Assumed termination rates differ by age because of expected differences in termination rates by age.
Retirement	Retirement rates are based on plan sponsor expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.
Form of payment	The percentage of retiring participants assumed to take joint and survivor annuities is based on observed experience over recent periods with annual review.
Percent married	The assumed percentage married is based on a blending of marital statuses of recent retirees and changes expected to occur in marriage patterns of retirement age individuals in the future.

SCHEDULE SB ATTACHMENTS

Spouse age	The assumed age difference for spouses is based on general population statistics of the age difference for married individuals of retirement age.

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

The following changes in assumptions were made as part of this valuation:

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed plan-related expenses added to the target normal cost was changed from $595,938 for 2024 to $665,307 for 2025.
- The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.

SCHEDULE SB ATTACHMENTS

Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the enrollment date on which the employee becomes a participant.

New or rehired employees

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

Mortality

- Funding

For non-annuitants, based on Pri-2012 “Employees” table without collar or amount adjustments and then projected forward with generational projection using 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%.

For annuitants, plan specific mortality has been approved by the IRS.

Termination

Rates varying by age and gender.

Attained Age	Incidence of Withdrawal	
	Males	Females
20	.1495	.2496
30	.0691	.0994
40	.0282	.0488
50	.0040	.0167
55	.0000	.0040

SCHEDULE SB ATTACHMENTS

Disability

Wyatt 1985 Disability Study Class 1 male and female rates. The rates at the following illustrative ages indicate the disability incidence assumptions used:

Attained Age	Incidence of Disability (per 1,000) Males	Females
20	.29	.30
25	.38	.47
30	.48	.80
40	1.17	2.11
50	3.58	5.33
55	7.22	9.52
60	12.56	11.59

Retirement

The incidence of retirement is assumed as indicated below for those participants who are eligible for unreduced early retirement.

Age	Percentage retiring
62	50%
63	20%
64	20%
65	100%

All other participants are assumed to retire at age 65.

Benefit commencement date:

- Preretirement death benefit — The later of the death of the active participant or the date the participant would have attained early retirement
- Deferred vested benefit — The later of age 65 or termination of employment
- Disability benefit — Upon disablement
- Retirement benefit — Upon termination of employment

Form of payment

Participants are assumed to elect the normal form.

Percent married

It was assumed that 85% of male employees and 50% of female employees are married to a qualifying spouse at the time of death.

Spouse age

It was assumed that husbands are three years older than their wives.

SCHEDULE SB ATTACHMENTS

Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month.

Methods

Valuation date	First day of plan year.
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
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 prior plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant

	bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not valued	All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with thyssenkrupp rothe erde USA, Inc. 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

WTW used asset data supplied by the trustee. thyssenkrupp rothe erde USA, Inc. furnished participant data as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with thyssenkrupp rothe erde USA, Inc., assumptions or estimates were made when data were not available, 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.

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

Assumptions Rationale – Significant Economic Assumptions

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

Assumptions Rationale – Significant Demographic Assumptions

Healthy Mortality	For non-annuitants, assumptions used for funding purposes are as prescribed by IRC §430(h). For annuitants, plan specific mortality has been approved by the IRS.
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Termination	Termination rates are based on plan sponsor expectations.
Disability	Disability rates were based on a published table for pension participants believed to have reasonably similar characteristics participating in pension plans with similar disability provisions

SCHEDULE SB ATTACHMENTS

Retirement	Retirement rates are based on plan sponsor expectations.

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed plan-related expenses added to the target normal cost was changed from $595,938 for 2024 to $665,307 for 2025.
- The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.

SCHEDULE SB ATTACHMENTS

Rotek Salaried and Florence Hourly Pension Plan

Demographic Assumptions

Inclusion date

The valuation date coincident with or next following the date on which the employee becomes a participant.

New or rehired employees

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

Mortality

- Funding

For non-annuitants, based on Pri-2012 “Employees” table without collar or amount adjustments and then projected forward with generational projection using 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%.

For annuitants, plan specific mortality has been approved by the IRS.

Termination

Rates varying by age, wage class and gender

- Salaried

Attained Age	Incidence of Withdrawal	
	Males	Females
20	.0745	.1246
30	.0341	.0493
40	.0132	.0238
50	.0000	.0067
55	.0000	.0000

- Florence

Attained Age	Incidence of Withdrawal	
	Males	Females
20	.1495	.2496
30	.0691	.0994
40	.0282	.0488
50	.0040	.0167
55	.0000	.0040

SCHEDULE SB ATTACHMENTS

Disability

Wyatt 1985 Disability Study Class 1 male and female rates. The rates at the following illustrative ages indicate the disability incidence assumptions used:

Age	Incidence of Disability (per 1,000)	
	Males	Females
20	.29	.30
25	.38	.47
30	.48	.80
40	1.17	2.11
50	3.58	5.33
55	7.22	9.52
60	12.56	11.59

Retirement

- Salaried: It was assumed that participants will retire upon attaining normal retirement age.
- Florence: The incidence of retirement is assumed as indicated below for those participants who are eligible for unreduced early retirement.

Age	Percentage Retiring
62	50%
63	20%
64	20%
65	100%

All other participants are assumed to retire at age 65.

Benefit commencement date:

- Preretirement death benefit: The later of the death of the active participant or the date the participant would have attained early retirement
- Deferred vested benefit: The later of age 65 or termination of employment
- Disability benefit: Upon disablement
- Retirement benefit: Upon termination of employment

Form of payment

Participants are assumed to elect the normal form.

Percent married

It was assumed that 85% of male employees and 50% of female employees are married to a qualifying spouse at the time of death.

SCHEDULE SB ATTACHMENTS

Spouse age	It was assumed that husbands are three years older than their wives.
Salaried plan compensation	Valuation year pay is estimated to be the prior year's pensionable earnings increased by the compensation increase assumption.
Timing of benefit payments	Annuity payments are payable monthly at the beginning of the month.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits as required by regulations under IRC §430.
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 prior plan year). The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

SCHEDULE SB ATTACHMENTS

Benefits not valued

All benefits described in the Plan Provisions section of this report were valued. WTW has reviewed the plan provisions with thyssenkrupp rothe erde USA, Inc. 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

WTW used asset data supplied by the trustee. thyssenkrupp rothe erde USA, Inc. furnished participant data as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with thyssenkrupp rothe erde USA, Inc., assumptions or estimates were made when data were not available, 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.

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

Assumptions Rationale – Significant Economic Assumptions

Discount rate

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

Assumptions Rationale – Significant Demographic Assumptions

Mortality

For non-annuitants, assumptions used for funding purposes are as prescribed by IRC §430(h). For annuitants, plan specific mortality has been approved by the IRS.

Termination

Termination rates are based on plan sponsor expectations.

Disability

Disability rates were based on a published table for pension participants believed to have reasonably similar characteristics participating in pension plans with similar disability provisions.

Retirement

Retirement rates are based on plan sponsor expectations.

Source of Prescribed Methods

Funding methods

The methods used for funding purposes as described in Appendix A, including the method of determining plan assets, are “prescribed methods set by law”, as defined in the actuarial standards of

practice (ASOPs). These methods are required by IRC §430, or were selected by the plan sponsor from a range of methods permitted by IRC §430.

Change in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed plan-related expenses added to the target normal cost was changed from $595,938 for 2024 to $665,307 for 2025.
- The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.

SCHEDULE SB ATTACHMENTS

Schedule SB – Statement by Enrolled Actuary

Plan Sponsor	thyssenkrupp North America, LLC
EIN/PN	22-2393554/003
Plan Name	thyssenkrupp Defined Benefit Pension Plan North America
Valuation Date	January 1, 2025
Enrolled Actuary	Lauren Pellerito
Enrollment Number	26-06364

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.

thyssenkrupp Defined Benefit Pension Plan North America

Schedule of Reportable Transactions - Modified Cash Basis

Form 5500, Schedule H, Line 4j
EIN 22-2393554, Plan No. 003
Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
Category (i) - A single transaction that amounts to more than 5 percent of the beginning value of total plan assets:						
Aetna Life Insurance Company	Money market insight fund - Purchase	$ 432,000	$ -	$ 432,000	$ 432,000	$ -
Aetna Life Insurance Company	Money market insight fund - Purchase	437,000	-	437,000	437,000	-
Aetna Life Insurance Company	Money market insight fund - Purchase	453,000	-	453,000	453,000	-
Aetna Life Insurance Company	Money market insight fund - Purchase	456,000	-	456,000	456,000	-
Category (iii) - A series of transactions with respect to securities of the same issue that amount in the aggregate to more than 5 percent of the beginning value of the total plan assets:						
Aetna Life Insurance Company						
	Purchases - 5	1,781,000	-	1,781,000	1,781,000	-
	Sales - 1,166	-	1,887,498	1,887,498	1,887,498	-

There were no Category (ii) or (iv) reportable transactions during the year.

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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **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
THYSSENKRUPP DEFINED BENEFIT PENSION PLAN NORTH AMERICA

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THYSSENKRUPP NORTH AMERICA, LLC

D Employer Identification Number (EIN)
22-2393554

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	90,828,022
b Actuarial value	**2b**	92,917,637

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	638	60,597,206	60,597,206
b For terminated vested participants	216	8,749,401	8,749,401
c For active participants	163	19,838,250	21,132,891
d Total	1,017	89,184,857	90,479,498

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.33%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	822,769
c Target normal cost	**6c**	822,769

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

9/4/2026
Date

Lauren Pellerito
Type or print name of actuary

2606364
Most recent enrollment number

Willis Towers Watson US LLC
Firm name

248-936-7700
Telephone number (including area code)

Travelers Tower
26555 Evergreen Road, Suite 1600
Southfield MI 48076
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)	2,138,230	28,518,662
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	1,009,478	0
9	Amount remaining (line 7 minus line 8)	1,128,752	28,518,662
10	Interest on line 9 using prior year's actual return of 1.14 %	12,868	325,113
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 5.05 %		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	1,141,620	8,453,251
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	20,390,524

Part III Funding Percentages

14	Funding target attainment percentage	14	80.15 %
15	Adjusted funding target attainment percentage	15	102.69 %
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	82.34 %
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
0	0	0	0

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
5.07 %	5.31 %	5.50%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	63

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	822,769
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	17,952,385	2,326,131
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**	3,148,900

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	3,148,900	3,148,900

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	0

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

a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 6
Details on Target Normal Cost

The Budd Company Employee Pension Plan merged into the thyssenkrupp Defined Benefit Pension Plan North America as of September 30, 2025. Furthermore, the thyssenkrupp Defined Benefit Pension Plan North America was terminated effective November 30, 2025.

The Target Normal Cost of $822,769 shown on Line 6 of the Schedule SB is comprised of:

- $212,904 for the Budd Company Employee Pension Plan for the 2-month period from October 1, 2025 through November 30, 2025, plus
- $609,865 for the thyssenkrupp Defined Benefit Pension Plan North America for the 11-month period from January 1, 2025 through November 30, 2025

Plan Name:	thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN:	22-2393554/003
Plan Sponsor:	thyssenkrupp North America, LLC
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

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

Plan Name:	thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN:	22-2393554/003
Plan Sponsor:	thyssenkrupp North America, LLC
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 26b
Schedule of Projection of Expected Benefit Payments

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	1,130,579	1,320,017	6,136,785	8,587,381
2026	1,410,307	239,875	5,973,687	7,623,869
2027	1,655,637	283,724	5,804,285	7,743,646
2028	1,746,127	509,997	5,625,865	7,881,989
2029	2,358,488	666,167	5,432,604	8,457,259
2030	1,378,811	580,583	5,233,431	7,192,825
2031	1,789,477	538,108	5,031,791	7,359,376
2032	2,679,057	724,544	4,823,843	8,227,444
2033	1,388,309	418,940	4,608,234	6,415,483
2034	1,742,463	482,388	4,385,403	6,610,254
2035	2,266,087	587,238	4,157,823	7,011,148
2036	1,129,184	649,049	3,926,401	5,704,634
2037	1,157,645	477,287	3,691,337	5,326,269
2038	1,007,932	498,447	3,453,785	4,960,164
2039	885,707	502,577	3,215,041	4,603,325
2040	923,214	486,514	2,976,532	4,386,260
2041	755,978	544,781	2,739,776	4,040,535
2042	753,392	661,345	2,506,346	3,921,083
2043	745,637	507,322	2,277,844	3,530,803
2044	736,982	513,763	2,055,857	3,306,602
2045	739,601	483,450	1,841,932	3,064,983
2046	742,808	475,403	1,637,553	2,855,764
2047	738,122	466,025	1,444,088	2,648,235
2048	734,174	451,481	1,262,736	2,448,391
2049	723,560	436,298	1,094,476	2,254,334
2050	706,182	416,955	940,027	2,063,164
2051	686,538	401,279	799,833	1,887,650

Plan Name: thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN: 22-2393554/003
Plan Sponsor: thyssenkrupp North America, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2052	663,654	384,685	674,043	1,722,382
2053	637,785	363,600	562,517	1,563,902
2054	609,776	344,521	464,837	1,419,134
2055	580,038	325,196	380,345	1,285,579
2056	548,776	304,247	308,171	1,161,194
2057	516,213	283,373	247,281	1,046,867
2058	482,643	262,001	196,541	941,185
2059	448,431	241,013	154,781	844,225
2060	413,969	220,560	120,814	755,343
2061	379,671	200,776	93,506	673,953
2062	345,959	181,792	71,796	599,547
2063	313,212	163,718	54,722	531,652
2064	281,787	146,641	41,443	469,871
2065	251,989	130,631	31,220	413,840
2066	224,058	115,730	23,426	363,214
2067	198,175	101,957	17,536	317,668
2068	174,450	89,313	13,118	276,881
2069	152,912	77,782	9,826	240,520
2070	133,534	67,334	7,384	208,252
2071	116,226	57,932	5,572	179,730
2072	100,848	49,525	4,226	154,599
2073	87,233	42,061	3,219	132,513
2074	75,207	35,486	2,459	113,152

Plan Name: thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN: 22-2393554/003
Plan Sponsor: thyssenkrupp North America, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Summary of Plan Provisions

Former participants of the ThyssenKrupp Materials NA, Inc. Pension Plan

Plan Provisions	
Effective date and most recent amendment	July 1, 1969, as amended effective December 31, 2021. The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022
Covered employees	**Steel & Auto** Non-Union employees enter at January 1 after age 21 with 6 months of service. No employees hired after 1996 are eligible. **Copper & Brass Salaried** Non-Union employees enter after one year of service. No employees hired after 1997 are eligible.
Participation date	Date of becoming a covered employee

Definitions	
Credited Service	Elapsed-time to next highest month.
Vesting Service	Elapsed-time to next highest month.
Social Security Covered Compensation	The average of the Social Security Taxable Wage Base for the 35-year period ending with the last day of the calendar year the employee attains Social Security Retirement Age, based on the Social Security law in effect on the earliest of: 1. The Participant's severance from service date or 2. The Participant's Normal Retirement Date or 3. The date as of which the calculation of an Accrued Benefit is being made.

SCHEDULE SB ATTACHMENTS

Plan Compensation

Steel & Auto

Pensionable pay defined as Total Compensation, excluding imputed taxable income and perquisites; "Highest Average Compensation" defined as average Compensation over the five consecutive calendar years during which participant was compensated on a salaried basis, which produces the highest average. Compensation for this purpose is W-2 pay, including elective contributions and excluding in-kind payments, perquisites and company contributions to other benefit plans. For accruals between January 1, 1989 and December 31, 1993, compensation limited to $235,840. For accruals between January 1, 1994 and December 21, 2001, compensation limited to $150,000 per year, subject to cost-of-living adjustments. For accruals after January 1, 2002, compensation limited to $200,000 per year, subject to cost-of-living adjustments.

Copper & Brass Salaried

Pensionable pay is base pay, which excludes overtime, bonuses, imputed taxable income and prerequisites ("Base Salary"). Compensation for accruals between January 1, 1994 and December 31, 2001 is limited to $150,000 per year, subject to cost-of-living adjustments. Compensation for accruals after January 1, 2002 is limited to $200,000, subject to cost of living adjustments.

For Participants classified as "Outside Sales Personnel" compensation shall mean the Participant's Total Recognized Compensation ("TRC"). The Participant's TRC is the Participant's "Base Salary" plus the Participant's commissions up to his Maximum Recognized Commissions ("MRC"). The MRC is that portion of the commissions that does not cause the sum of his commissions plus his Base Salary for the current year to exceed his TRC for the previous year. Beginning October 1, 2005, the Participant's MRC shall be increased each year by two percent (2%) of the Participant's TRC for the previous year.

SCHEDULE SB ATTACHMENTS

Accrued Benefit

Steel & Auto

All benefits were frozen as of 12/31/2018.

For Service on or after January 1, 1994:

1.2% of Highest Average Compensation (HAC) up to Covered Compensation (at later of termination or calculation) plus 1.45% of such average in excess thereof, all multiplied by up to 35 years of service (reduced by length of service credited before 1994). HAC is the highest 5 consecutive year average with annual compensation limited to $150,000 (indexed) after 1993 and before 2002; limited to $200,000 (indexed) after 2001.

For Service between January 1, 1989 and December 31, 1993:

1.2% of HAC up to Covered Compensation (for 1993) plus 1.45% of such average in excess thereof, all multiplied by up to 35 years of service (reduced by length of service credited before 1989). Compensation for all Pre-1994 years for this benefit accrual period is limited to $235,840.

Note: For purposes of this section, HAC is the highest 5 consecutive year average as of December 31, 1993, with annual compensation limited to $235, 840, multiplied by the ratio (not less than 1) of the highest annual compensation earned after 1993 (limited as in the post 1993 benefit formula) to the 1993 compensation (annualized if partial year of pay) limited to $235,840.

For Service prior to 1989:

26% of Highest Average Compensation up to Social Security Covered Compensation plus 50% of such average in excess of Social Security Covered Compensation (for 1988), reduced proportionately for less than 25 years projected service at age 65. Such benefit is then prorated based on the ratio of credited service at 12/31/1988 to projected credited service at age 65. (The 25-year amount is only 15 years for participants as of 7/01/1976.)

Note: For purposes of this section, HAC is the highest 5 consecutive year average as of December 31, 1988, multiplied by the ratio (not less than 1) of the highest annual compensation earned in the period from 1989 through 1993, limited to $235,840, to the 1988 unlimited compensation (annualized if partial year of pay); and then multiplied by the ratio (not less than 1) of the highest annual compensation

earned after 1993 (limited as in the post-1993 benefit formula) to the 1993 compensation (annualized if partial year of pay) limited to $235,840.

Copper & Brass Salaried

All benefits were frozen as of 12/31/2018.

Former Salaried Plan Proper:

1.45% of Compensation earned in each calendar year after 1988, plus benefit accrued as of 12/31/88.

Former FitzSimons Manufacturing Plan:

$23.00 per month per year of service (effective for terminations on or after September 16, 1995).

Former Big Rapids Tube Division Plan:

$13.00 per month per year of service (effective for terminations on or after January 1, 1994).

Former Vanguard Plan Benefit:

Participants previously covered for Vanguard plan benefits receive additional amount of 33% of frozen final average pay (highest 60-month average prior to 1984 for salaried employees, or 1990 for hourly employees) prorated for credited service less than 15 years. Such benefit is converted from a 10-year certain and life option to a life only option prior to combining with the regular benefit.

The additional Vanguard Plan benefit is based on service projected to age 65 (limited to 15 years), then prorated based on the ratio of (unlimited) service at termination date to (unlimited) service projected to age 65.

Eligibility for Benefits

Normal or Late Retirement Benefit	Age 65.
Early Retirement Benefit	Age 55 with five years of vesting service; or age 50, provided age plus vesting service is at least 80.
Vested Deferred Benefit	5 years of Vesting Service

SCHEDULE SB ATTACHMENTS

Disability Retirement Benefit

At any age or service upon total and permanent disability that has continued for at least 6 months.

Pre-Retirement Death Benefit

After completion of five years of Vesting Service, and married at time of death.

Benefits Paid upon the Following Events

Normal or Late Retirement Benefit

Accrued Benefit at Normal or Late Retirement Date

Early Retirement Benefit

Accrued Benefit at Early Retirement date multiplied by an early retirement factor due to earlier commencement of payments.

Age	Reduction Factor
65	100%
64	100%
63	100%
62	100%
61	97%
60	94%
59	90%
58	86%
57	82%
56	78%
50 - 55	74%

Copper & Brass Salaried – Pre-January 1, 2004 Terminations

Accrued normal retirement benefit determined as in Accrued Normal Retirement Benefit and reduced by 5/9% for each month that commencement precedes age 62 down to age 55. Actuarially equivalent reduction (based on the normal form of payment) is applied for commencement prior to age 55.

SCHEDULE SB ATTACHMENTS

Vested Deferred Benefit	Accrued benefit payable at age 65, or reduced for early commencement at any age. Reduction is actuarially equivalent, based on the normal form of payment.
Disability Retirement Benefit	Accrued Normal Retirement Benefit, with continuing benefit accruals during the period of disability leave assuming that Compensation remains at the level in effect in the calendar year prior to disability.
Pre-Retirement Death Benefit	50% of the pension he would have been eligible to receive had the participant retired on the first day of the month in which he died. There is no charge for coverage.

Other Plan Provisions

Normal Form of Payment

Non-married Participants: Life Annuity.

Married Participants: Qualified joint and 50% survivor's annuity, without reduction.

Optional Forms

As elected by Participant, actuarially equivalent to normal form including:

- Joint & 50%, 55%, 66-2/3%, 75% or 100% Survivor
- Ten- Year Certain & Life
- Lump Sum

Actuarial equivalence for annuity options is based on a 7.5% interest rate and the 1983 GAM (unisex) table. Lump sum distributions are based on the GATT rate for the December preceding payment, rounded down to the next lowest 0.5%, using the 1983 GAM (unisex) mortality table for lump sums prior to 2003, and the RR2001-62 mortality table beginning in 2003. The lump sum will reflect the normal form of payment. Lump sums for participants eligible for early retirement are based on the accrued benefit reduced for immediate payment, otherwise based on the accrued benefit deferred to age 65.

SCHEDULE SB ATTACHMENTS

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Plan Provisions Since Prior Year

None.

SCHEDULE SB ATTACHMENTS

Former participants of the Copper and Brass Sales Hourly-Rated Employees Retirement Plan

Plan Provisions

Effective date and most recent amendment	December 31, 1958, as amended effective December 31, 2021. The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022.
Covered employees	All union hourly employees covered by collective bargaining agreement with one of the following: a. **Detroit** International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America, Local No. 337 - (not eligible if hired after June 19, 1998) b. **Cleveland** International Association of Machinists, Aero Space Workers, AFL-CIO District No. 54 – (not eligible if hired after November 1, 1999) c. **Grand Rapids** General Teamsters Union, Local No. 406 – (not eligible if hired after September 1, 1998) d. **Chicago** Machinery, Scrap Iron, Metal & Steel Chauffeurs, Warehousemen, Handlers, Helpers, Alloy Fabricators, Theatrical, Exposition, Convention and Trade Show Employees Union, Local No. 714, International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America – (not eligible if hired after April 16, 2000)
Participation date	Date of becoming a covered employee

SCHEDULE SB ATTACHMENTS

Definitions

Vesting service

One Year of Service is granted for each calendar year in which a participant completes at least 1,000 hours of service.

Pension service

One year of credited service is granted for each calendar year in which a participant completes at least 1,441 hours. Reduced 0.1 for each 160 hours less than 1,600 (except 0.1 is credited if hours are greater than or equal to 80 and less than 161).

Normal retirement date (NRD)

Chicago, Detroit and Grand Rapids: Age 65.

Cleveland: Age 65, or age 62 with 30 years of vesting service.

Monthly pension benefit

Equal to credited service multiplied by the benefit unit in effect on the participant's last day worked.

Detroit	
Last Day Worked	Benefit Unit
06/16/2000 – 06/15/2001	$29.00
06/16/2001 – 06/15/2002	30.00
06/16/2002 – 06/15/2003	31.00
06/16/2003 – 06/15/2004	33.00
06/16/2004 – 06/15/2005	34.00
06/16/2005 – 06/15/2006	35.00
06/16/2006 – 06/15/2007	36.00
06/16/2007 and later	39.00

Cleveland	
Last Day Worked	Benefit Unit
11/01/1999 – 10/31/2002	$27.50
11/01/2002 – 10/31/2003	28.50
11/01/2003 – 10/31/2004	29.50
11/01/2004 – 10/31/2005	30.50
11/01/2005 – 10/31/2006	32.00
11/01/2006 – 10/31/2007	33.00
11/01/2007 – 10/31/2009	34.00
11/01/2009 – 10/31/2010	34.25
11/01/2010 – 10/31/2011	34.75
11/01/2011 – 10/31/2012	35.05
11/01/2012 – 10/31/2013	35.20
11/01/2013 – 10/31/2014	35.35
11/01/2014 – 10/31/2015	35.60
11/01/2015 and later	36.00

Grand Rapids	
Last Day Worked	Benefit Unit
09/01/2001 – 08/31/2002	$30.00
09/01/2002 – 08/31/2003	31.00
09/01/2003 – 08/31/2004	33.00
09/01/2004 – 08/31/2005	34.00
09/01/2005 – 08/31/2006	35.00

SCHEDULE SB ATTACHMENTS

09/01/2006 – 08/31/2007	36.00
09/01/2007 and later	39.00

Chicago Last Day Worked	Benefit Unit
04/16/1999 – 04/15/2000	$21.00
04/16/2000 – 04/15/2005	25.00
04/16/2005 and later	26.00

Monthly preretirement death benefit

55% of Joint & 55% Survivor benefit payable at earliest retirement date. (No charge for coverage.)

Eligibility for Benefits

Normal retirement

Retirement on NRD

Early retirement

Cleveland, Detroit and Grand Rapids: Age 60 and ten years of credited service, or age 55 with 85 points (age plus credited service).

Chicago: Age 60 and five years of credited service, or age 55 with 85 points (age plus credited service).

Postponed retirement

Retirement after NRD

Vested termination

A participant is 100% vested upon completion of 5 years of vesting service. However, all participants become 100% vested upon reaching Normal Retirement Age.

Disability

Cleveland, Detroit and Grand Rapids: 10 years of credited service (vesting service for Cleveland) and Permanent and Total Disability as determined by the Board.

Chicago: 5 years of vesting service and Permanent and Total Disability, as determined by the Board.

Preretirement death benefit

5 Years of Vesting Service and married at time of death

SCHEDULE SB ATTACHMENTS

Benefits Paid Upon the Following Events

Normal retirement

The monthly pension benefit determined as of NRD

Early retirement

Detroit: Monthly pension benefit adjusted according to the following table (interpolated to nearest month of age):

Age	Factor
62-65	1.000
61	0.933
60	0.867
59	0.808
58	0.752
57	0.694
56	0.635
55	0.579

Grand Rapids: Monthly pension benefit reduced by 5/9% per month for each complete month commencement precedes age 65. Benefit is unreduced if participant has 90 points.

Cleveland and Chicago: Monthly pension benefit reduced by 5/9% per month for each complete month commencement precedes age 65.

Alternative Early Retirement Benefit (Cleveland, Grand Rapids and Chicago only): Monthly pension Benefit plus $96.00 per month with the total reduced 5/9% per month for each complete month benefit commencement precedes age 62, less $96.00 per monthly payment after age 62.

Supplemental benefit

If age 55 with 20 years of credited service upon termination prior to age 60, it provides $600.00 per month. Upon termination at age 60, it provides $625.00 per month. Upon termination at age 61, it provides $650.00. Regardless of commencement age, benefit reduces to $420.00 per month from age 62 to 65. The supplement is prorated for less than 30 years of credited service, and is offset by the regular early retirement benefit being paid.

Postponed retirement

The monthly pension benefit determined as of the actual retirement date

Vested termination

The monthly pension benefit payable at age 65, reduced 5/9% per month for first 60 months prior to age 65, reduced an additional 5/18% per month for the next 60 months, and actuarially reduced for any additional months that benefit

commencement precedes age 55. Unreduced benefit payable at any age for Grand Rapids participant with 10 years of credited service and 90 points.

Disablement

If a participant is eligible for an unreduced Federal Social Security Disability Insurance Benefit, then disability benefit is accrued benefit as of date of disability, with no reduction for early commencement, payable to age 65 if participant remains disabled.

If participant is not eligible for an unreduced Federal Social Security Disability Insurance Benefit, then disability benefit is accrued benefit at date of disability multiplied by two.

For Cleveland Only: Effective November 1, 2008, $68 per month multiplied by credited service.

For Detroit Only: Benefit determined above is reduced by any benefit payable from company disability insurance.

Preretirement death

The monthly preretirement death benefit

Other Plan Provisions

Forms of payment

In lieu of the normal form of payment, which is a straight life annuity, the following actuarially equivalent optional forms of payment are available:

- Ten Year Certain and Life
- Joint & 50%, 55%, 66 2/3%, 75% or 100% Contingent Annuity
- Lump sum

Actuarial equivalence for annuity options is based on a 7.5% interest rate and the 1983 GAM (unisex). Lump sum distributions are based on the GATT interest rate for the December preceding payment, rounded down to the next lowest 0.5%. Using the 1983 GAM (unisex) mortality table for lump sums prior to 2003, and the RR2001-62 mortality table beginning in 2003. Lump sums for participants eligible for Early Retirement are based on the accrued benefit (not including any supplement) reduced for immediate payments, otherwise based on the accrued benefit deferred to age 65.

SCHEDULE SB ATTACHMENTS

Pension Increases	None
Plan participants' contributions	None
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. Increases in the dollar limits are not assumed for determining contributions.

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Plan Provisions Since Prior Year

None.

SCHEDULE SB ATTACHMENTS

Former participants of the ThyssenKrupp Industrial Solutions (USA), Inc. Retirement Plan

Plan Provisions

Effective date and most recent amendment	The Plan was restated on December 1, 2001 as amended effective December 31, 2021. The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022.
Participation date	Participation is closed to employees hired after December 31, 2013 and those who do not meet participation requirements by January 1, 2015.

Definitions

Plan Year	The twelve-month period ending December 31.
Eligibility Requirements	Completion of one Year of Service. Age 21. Has made a written agreement to make Participant Contributions. Effective January 1, 2006, period of Service is granted during which the Employee elected to make contributions.
Years of Credited Service	Years and complete months of service, beginning on Employment Commencement Date. Prior to January 1, 2006, period of Service is granted during which the Employee elected to make contributions.
Average earnings	Final average earning is determined based on the highest five consecutive years pay out of the most recent 10 years compensation.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65.

SCHEDULE SB ATTACHMENTS

Accrued benefit	Effective January 1, 2006 One and one-half percent (1.5%) of Final Average Earnings multiplied by the number of Years of Credited Service, prior to January 1, 2006 plus one percent (1.0%) of Final Average Earnings multiplied by Years of Credited Service after December 31, 2005. Benefit accruals are frozen as of December 31, 2017. In no event shall a Participant's Accrued Benefit be less than the Benefit Attributable to Participant Contributions.
Normal form of payment	The Normal Form of Payment is a modified cash refund annuity. For married participants: The Normal Form of Payment must be elected with spousal consent. If no election is made, then the form of payment is automatically a joint and 50% contingent annuity with the spouse as the co-pensioner. This form of payment is actuarially equivalent to the Normal Form of Payment.

Eligibility for Benefits

Normal retirement	Attainment of age 65.
Early retirement	Attainment of age 55.
Postponed retirement	Any age after attaining Normal Retirement Age.
Vested termination	Completion of at least five Years of Service. A participant will also become vested upon attainment of Early Retirement Age (age 55).
Preretirement death benefit	All participants are eligible for Death benefits under the plan.

SCHEDULE SB ATTACHMENTS

Benefits Paid Upon the Following Events

Normal retirement

Accrued benefit at Normal Retirement.

Early retirement

The monthly pension benefit determined as of the early retirement date, reducing according to the factors from the following table:

Attained age	Factor
64	91.6%
63	84.1%
62	77.5%
61	71.5%
60	66.3%
59	61.5%
58	57.2%
57	53.3%
56	49.8%
55	46.6%

Postponed retirement

Accrued Benefit using continued Years of Service and Total Annual Compensation.

Vested termination

The monthly pension benefit determined as of the termination date. If eligible, the participant may elect to commence benefits under the Early Retirement section of the plan (As early as 55).

Preretirement death

The participant's surviving spouse shall receive the spousal benefit of the 100% joint and contingent benefit based upon the Accrued Benefit at date of death payable at what would have been the participant's Normal Retirement Date. If eligible, the benefit may be paid on a reduced basis on what would have been the participant's earliest Early Retirement Date.

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Available optional forms include a social security adjustment option, a 66 $^{2}/_{3}$% joint and survivor option, a 75% joint and survivor annuity, a 100% joint and survivor annuity, a ten-year certain and life annuity, or (for married participants) a life annuity. Actuarial equivalence is based on an interest rate of 4½% and the 1951 Group Annuity Mortality Table with a 6-year setback for the participant and a 1-year setback for the spouse.
Pension Increases	None
Plan participants' contributions	2.25% of Earnings. Effective January 1, 2006, employee contributions are no longer required or allowed.
Maximum limits 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. Increases in the dollar limits are not assumed for determining contributions.

Future Plan Changes

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

Changes in Plan Provisions Since Prior Year

None.

SCHEDULE SB ATTACHMENTS

Former participants of the ThyssenKrupp Crankshaft Company Retirement Income Plan

Plan Provisions

Effective date and most recent amendment

The plan was originally effective January 1, 1977 and restated effective January 1, 2008. The plan was last amended, effective December 31, 2021.The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022.

Covered employees

Production and maintenance employees at thyssenkrupp Crankshaft Company, LLC's Danville Plant who were hired prior to May 3, 1994 and who have at least 1,000 hours in their first year or any plan year thereafter are eligible to participate in the plan. Leased employees are not eligible. Participation commences on the first day an eligible employee performs an hour of employment with thyssenkrupp Crankshaft Company, LLC.

Participation in the plan was frozen effective September 30, 2010.

Participation date

Date of becoming a covered employee

Definitions

Years of service

One Year of Service is granted for each plan year commencing on or after January 1, 1977, in which an employee works at least 1,000 hours. Additional service is granted to those who were participants on January 1, 1977 who would have been eligible to participate prior to January 1, 1977 if the Plan had been in existence.

Credited service

For plan years beginning on or after January 1, 1977, one year of Credited Service will be earned for full-time employees in which 2,340 hours are worked in a plan year, with a fraction of service credited to employees with at least 180 hours of employment. One year of Credited Service will be earned for part-time employees in which 2,000 hours are worked in a plan year, with a fraction of service credited to employees with at least 1,000 hours of employment. Credited service is limited as follows based on age at the annuity commencement date.

Age of Commencement	Credited Service Limit
62 or older	35
61	34
60	33

59	32
58	31

Credited service accruals were frozen for all participants as of September 30, 2010. However, a participant shall be credited with years of credited service after September 30, 2010 for the purpose of determining eligibility for early retirement.

Normal retirement date (NRD)

First of month coinciding with or next following the attainment of age 65 with five years of pension service

Monthly pension benefit

Benefit rate times Credited Service, as limited for the age at the annuity commencement date.

Date of Termination	Benefit Rate
6/1/2002 – 5/31/2003	$32.00
6/1/2003 – 5/31/2004	$33.00
6/1/2004 – 6/30/2005	$34.00
7/1/2005 – 6/30/2006	$35.00
7/1/2006 – 6/30/2007	$36.00
7/1/2007 – 6/30/2008	$37.00
7/1/2008 – 6/30/2009	$38.00
7/1/2009 and after	$39.00

Benefit accruals are frozen to all participants effective September 30, 2010.

Monthly preretirement death 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 55th birthday

Eligibility for Benefits

Normal retirement

Retirement on NRD

Early retirement

Age 58 and five years of Credited Service.

Postponed retirement

Retirement after NRD

Vested termination

A participant is 100% vested upon completion of five Years of Service.

Disability

Total and permanent disability as determined by the Pension Committee and the Social Security Administration and five years of

SCHEDULE SB ATTACHMENTS

	Credited Service.
Supplemental Benefit	Age 58 and 25 Years of Credited Service.
Automatic Benefit Increases	Participant who retired with a Normal, Late or Early Retirement benefit on or after January 1, 2006.
Qualified Pre-Retirement Survivor Annuity	Married, with five Years of Credited Service.
Alternative death benefit for participants in active service	Age 55 with 5 Years of Credited Service.

Benefits Paid Upon the Following Events

Normal retirement	The monthly pension benefit determined as of NRD
Early retirement	Accrued benefit as of early retirement date payable immediately, reduced 6% per year for retirement prior to age 62.
Postponed retirement	The greater of (i) the actuarial equivalent of the normal retirement benefit or (ii) the accrued benefit calculated at the deferred retirement date.
Vested termination	Accrued benefit (with credited service limited to 35 years) as of termination date payable at age 65. Reduced accrued benefit (with credit service limited based on commencement age) payable at age 58, reduced 6% per year for benefit commencement prior to age 62.
Disablement	Monthly benefit of benefit rate times Credited Service (maximum 35 years) at Disability Retirement Date without reduction for early commencement.
Supplemental Benefit	Temporary benefit payable to age 62. The monthly temporary benefit is $1,600 ($1,800 effective June 1, 2008) unless the accrued benefit calculated as of the retirement date.

SCHEDULE SB ATTACHMENTS

Automatic Benefit Increases	The Normal, Deferred or Early Retirement benefit and the Supplemental benefits shall be increased to reflect benefit rate increases effective July 1, 2006, July 1, 2007, July 1, 2008 and July 1, 2009.
Qualified Pre-Retirement Survivor Annuity	Spouse will receive the benefit that would be payable under the 50% Joint and Survivor option calculated assuming the employee terminated employment, survived to the earliest retirement age, retired and elected the 50% Joint and Survivor annuity, and died the next day.
Alternative death benefit for participants in active service	Accrued benefit reduced by 6% per year for commencement before age 62, payable for 120 monthly installments beginning on the earliest retirement date. Married participants with 5 Years of Service are required to waive the Qualified Pre-Retirement Survivor Annuity to receive the Alternative Death Benefit.

Other Plan Provisions

Forms of payment	Preretirement death benefits are payable only as described above. Monthly pension benefits are paid as described above as a ten-year certain and life annuity, if the participant has no spouse as of the date payments begin, or if the participant so elects. Otherwise, benefits are paid in the form of a 50% joint and survivor annuity option or, if the participant elects and the spouse consents, another actuarially equivalent optional form offered by the plan. Optional forms are a life annuity, ten-year certain and life annuity, joint and 50%, 66 2/3%, 75% and 100% contingent annuities with a joint annuitant, social security adjustment, and a cash-out of the lump sum value of a participant's accrued benefit if the lump sum value is less than $5,000.
Pension Increases	None
Plan participants' contributions	None
Actuarial Equivalence	Factors to convert from the Ten-Year Certain and Life Annuity to other annuity forms are listed in Appendix A of the plan document. Actuarial equivalence for cash-out purposes is based on the applicable mortality table specified in IRC Section 417(e) and the interest rate described in IRC Section 417(e) for the November preceding the plan

	year in which the date of payment occurs.
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. Increases in the dollar limits are not assumed for determining contributions.

Future Plan Changes

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

Changes in Benefits Valued Since Prior Year

None.

SCHEDULE SB ATTACHMENTS

Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees

Plan Provisions

Effective date and most recent amendment	The effective date is September 30, 1965 and as amended and restated effective January 1, 2013 and further amended effective December 31, 2018. The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022.
Participation date	Each hourly paid employee of the Company working at the Aurora-Ravenna location whose customary employment is for at least 1,000 hours a year becomes a participant on his date of hire. Participation is closed to employees hired on or after November 1, 2007.

Definitions

Vesting service	1/10 year is credited for each 100 hours of service with the Company or an Affiliate, to a maximum of one year of service during a Plan Year.
Benefit service	1/10 year is credited for each 170 hours of service with the Company or an Affiliate, to a maximum of one year of service during a Plan Year. Any Covered Employee who ceases to be a Covered Employee on or before November 1, 2007 or was re-employed by the Company on or after November 1, 2007 shall cease to be credited with Years of Benefit Service under the Plan effective May 1, 2008. Effective December 31, 2018, the plan is frozen for all participants. All Covered Employees have been granted three Years of additional Benefit service on January 1, 2019 except those who ceased to be credited with Years of Benefit Service under the Plan effective May 1, 2008, as described above.

SCHEDULE SB ATTACHMENTS

Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 with five years of participation.

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	Retirement before NRD and on or after both attaining age 60 and completing ten years of vesting service
Postponed retirement	Retirement after NRD
Deferred vested termination	Termination for reasons other than death or retirement after completing five years of vesting service
Disability	Permanent and total disability prior to NRD, and participant has ten or more 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

The monthly normal retirement benefit, if paid under the normal form, is equal to Benefit Service times the Benefit Unit in effect when the service was earned as set forth below:

Benefit Unit	Period of Benefit Service
$12.00	prior to 11/1/1976
$15.00	11/1/1976 to 10/31/1991
$16.00	11/1/1991 to 10/31/1993
$19.00	11/1/1993 to 10/31/1994
$20.00	11/1/1994 to 10/31/1995
$21.00	11/1/1995 to 10/31/1997
$22.00	11/1/1997 to 10/31/1998
$25.00	11/1/1998 to 10/31/1999
$27.00	11/1/1999 to 10/31/2000
$28.00	11/1/2000 to 10/31/2001
$30.00	11/1/2001 to 10/31/2002
$32.00	11/1/2002 to 10/31/2003
$34.00	11/1/2003 to 10/31/2004

$36.00	11/1/2004 to 10/31/2005
$38.00	11/1/2005 to 10/31/2006
$40.00	11/1/2006 to 10/31/2007
$41.00	11/1/2007 to 10/31/2008
$42.00	11/1/2008 to 10/31/2009
$43.00	11/1/2009 to 10/31/2010
$44.00	11/1/2010 to 10/31/2011
$45.00	11/1/2011 to 12/31/2018

All benefits are frozen as of December 31, 2018.

Employees electing to receive company matching contributions under the Defined Contribution Plan effective May 1, 2008 will cease benefit accruals under this pension plan.

Early retirement

The monthly benefit available at early retirement is the amount of normal retirement benefit based on service up to actual retirement (accrued normal retirement benefit). The benefit commences at age 65 unless the employee elects a reduced benefit commencing prior to age 65. The reduction is 1/180 for each month that commencement precedes age 65.

Effective January 1, 1999, participants age 62 with at least 25 years of Vesting Service or participants age 62 with 10 years of Vesting Service and a seniority date prior to January 1, 1982 are eligible for the monthly benefit described above, but without reduction for early commencement.

Effective November 1, 2001, these participants are eligible to receive an additional benefit of $350 per month until age 65 or for one year, if shorter.

Deferred vested termination

The deferred vested benefit is the accrued normal retirement benefit payable at age 65 or, alternatively, a reduced pension payable as early as age 60 if the employee has at least 10 years of Vesting Service. The reduction is 1/180 for each month that commencement precedes age 65.

Disablement

The accrued normal retirement benefit is payable immediately (unreduced).

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Regular Preretirement spouse's benefit	Upon death of an employee after age 60 and completion of 10 years of Vesting Service, the surviving spouse will receive 50% of the benefit which would have been paid if the employee had retired on the day prior to his death. The 50% is reduced by 1/2% for each year that the employee is more than 5 years older than the spouse.
Preretirement spouse's benefit for vested participants	Upon death of a married participant after 5 years of Vesting Service and not eligible for retirement from employment with the Company, the surviving spouse will receive 50% of the benefit which would have been paid if the participant had terminated employment on the earlier of his date of death or actual termination date and had survived to and retired on his Earliest Retirement Date under the 50% Joint & Survivor option.
Prior plan account value distribution	Each participant's account due to participation in the Plan in effect on December 31, 1975 earns annual interest at a rate equal to 6% prior to 1983 and the Fund earnings rate on a market value basis for each Plan Year thereafter and vests at the rate of 10% a year beginning after 1 year (the 10% is changed to 20% effective January 1, 1989). Upon termination of employment, the reduced vested portion of a member's account will be paid in five annual installments, including interest on the undistributed portion. The reduction, if any, equals the actuarial value of benefits for which the employee is eligible upon termination of employment and which are due to service prior to January 1, 1976.

Other Plan Provisions

Forms of payment	For normal, early, or disability retirements, the normal form of payment is a 50% Joint and Survivor annuity providing the participant was married on his date of retirement; otherwise, a straight-life basis applies. For the deferred vested termination benefit, unless elected otherwise, actuarially reduced benefits are automatically paid to married participants on a 50% Joint and Survivor basis; otherwise a straight-life basis applies.
Pension increases	None

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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. Increases in the dollar limits are not assumed for determining contributions.

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

None.

SCHEDULE SB ATTACHMENTS

Rotek Salaried and Florence Hourly Pension Plan

Plan Provisions

Effective date and most recent amendment" similar to previous sections	The effective date is July 1, 1985; restated effective January 1, 2013. Most recently amended effective March 31, 2021. The Plan was further amended for the merger of Rotek Salaried and Florence Hourly Pension Plan and Rotek Incorporated Pension Plan for Aurora-Ravenna Hourly Employees into the Plan effective December 31, 2022.
Participation	• Salaried: Each salaried employee of the Company becomes a participant on his date of hire. Participation was frozen as of October 15, 2008 and participants at that time were allowed to make an irrevocable election to cease future benefit accruals as of January 1, 2009. • Florence: Each hourly paid employee of the Company whose customary employment is for at least 1,000 hours a year becomes a participant on his date of hire. Participation was frozen as of October 15, 2008 and participants at that time were allowed to make an irrevocable election to cease future benefit accruals effective January 1, 2009.

Definitions

Vesting service	• Salaried: One year is credited for each 365-day period of employment (completed 30-day periods count as 1/12) with the Controlled Group. Defontaine employees are credited with up to five years of Vesting Service prior to July 1, 1990. • Florence: 1/10 year is credited for each 100 hours of service with the Company or an Affiliate, to a maximum of one year of service during a Plan Year.
Benefit service	• Salaried: One year is credited for each 365-day period of employment after January 1, 1979 (completed 30-day periods count as 1/12) with the Controlled Group as a salaried employee and Plan participant. Defontaine employees are credited with Benefit Service on and after January 1, 1992 through December 31, 1995. Any Covered Employee who ceases to be a Covered Employee as of January 1, 2009 shall cease to be credited with years of Benefit Service under the Plan. Benefit service was frozen effective December 31, 2018.

Plan Name:	thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN:	22-2393554/003
Plan Sponsor:	thyssenkrupp North America, LLC
Valuation Date:	January 1, 2025

	• Florence: 1/10 year is credited for each 170 hours of service with the Company or an Affiliate, to a maximum of one year of service during a Plan Year. Former Crawler division employees cease benefit service accrual on and after October 31, 1995. Any Covered Employee who ceases to be a Covered Employee as of January 1, 2009 shall cease to be credited with Years of Benefit Service under the Plan. Benefit service was frozen effective March 31, 2021. If actively employed on April 1, 2021, Florence hourly participants are credited with an additional year of service as of that date.
Salaried covered compensation	Covered Compensation is the average of annual Social Security wage bases over the 35-year period ending with the year in which a participant would attain Social Security Retirement Age.
Salaried average earnings	Average earnings equal the monthly average of the highest 5 consecutive years' base earnings, excluding annual bonuses, out of the 10-year period preceding retirement.
Normal retirement date (NRD)	First of month coinciding with or next following the attainment of age 65 or at least 5 years after date of participation if later.

Eligibility for Benefits

Normal retirement	Retirement on NRD
Early retirement	• Salaried: Retirement before NRD and on or after both attaining age 55 and completing ten years of vesting service • Florence: Retirement before NRD and on or after both attaining age 60 and completing ten years of vesting service
Deferred vested termination	Termination for reasons other than death or retirement after completing five years of vesting service
Disability	• Florence: Eligible if disabled after 10 or more years of Vesting Service
Preretirement death benefit	Death while eligible for normal, early, postponed, or deferred vested retirement benefits, with a surviving spouse

SCHEDULE SB ATTACHMENTS

Benefits Paid Upon the Following Events

Normal retirement

- Salaried: The monthly normal retirement benefit, if paid on a straight-life basis, is equal to the greater of (a) or (b) less (c) below:

  (a) 1.05% of average monthly earnings up to the employee's monthly Covered Compensation (determined at the date of termination) plus 1.60% of average monthly earnings in excess of Covered Compensation, with the sum times years of Benefit Service, up to 30 years.

  (b) $10.00 times years of Benefit Service (maximum 30);

  (c) the accrued benefit as of June 30, 1985 under the prior plan.

In no case will the benefit be less than the accrued benefit as of December 31, 1988 or as of December 31, 1993, under the Plan in effect as of those dates.

Effective January 1, 2009 those participants that elected to do so ceased benefit accruals under the plan.

All benefits for Salaried participants are frozen as of December 31, 2018.

- Florence: The monthly normal retirement benefit, if paid under the normal form, is equal to Benefit Service times the Benefit Unit in effect when the service was earned as set forth below:

Benefit Unit	Period of Benefit Service
$12.00	prior to 1/1/1987
13.00	1/1/1987 to 12/31/1989
14.00	1/1/1990 to 12/31/1990
15.00	1/1/1991 to 12/31/1991
16.00	1/1/1992 to 12/31/1993
19.00	1/1/1994 to 12/31/1994
20.00	1/1/1995 to 12/31/1995
21.00	1/1/1996 to 12/31/1997
22.00	1/1/1998 to 12/31/1998
25.00	1/1/1999 to 12/31/1999
27.00	1/1/2000 to 12/31/2000
28.00	1/1/2001 to 12/31/2001
30.00	1/1/2002 to 12/31/2002
32.00	1/1/2003 to 12/31/2003
34.00	1/1/2004 to 12/31/2004
36.00	1/1/2005 to 12/31/2005
38.00	1/1/2006 to 12/31/2006
40.00	1/1/2007 to 12/31/2007
41.00	1/1/2008 to 12/31/2008
42.00	1/1/2009 to 12/31/2009
43.00	1/1/2010 to 12/31/2010

SCHEDULE SB ATTACHMENTS

44.00	1/1/2011 to 12/31/2011
45.00	On and after 1/1/2012

Effective January 1, 2009 those participants that elected to do so ceased benefit accruals under the plan.

All benefits for Florence hourly participants are frozen as of March 31, 2021.

Early retirement

- Salaried: The monthly benefit available at early retirement is the amount of normal retirement benefit based on earnings and service up to actual retirement (accrued normal retirement benefit). The benefit commences at age 65 unless the employee elects a reduced benefit commencing prior to age 65. The reduction is .4167% for each month that commencement precedes age 65.
- Florence: The monthly benefit available at early retirement is the amount of normal retirement benefit based on service up to actual retirement (accrued normal retirement benefit). The benefit commences at age 65 unless the employee elects a reduced benefit commencing prior to age 65. The reduction is 1/180 for each month that commencement precedes age 65.
- If the participant has 25 years of service and is age 62 or older, the benefit is unreduced for early commencement. Additionally, a temporary monthly supplement of $350 is payable as a life only annuity until attainment of age 65.

Deferred vested termination

- Salaried: The deferred vested benefit is the accrued normal retirement benefit payable at age 65 or, alternatively, an actuarially reduced pension payable as early as age 55 if the employee has at least 10 years of Vesting Service.
- Florence: The deferred vested benefit is the accrued normal retirement benefit payable at age 65 or, alternatively, a reduced pension payable as early as age 60 if the employee has at least 10 years of Vesting Service. The reduction is 1/180 for each month that commencement precedes age 65.

Disablement

- Florence: The accrued normal retirement benefit is payable immediately (unreduced).

SCHEDULE SB ATTACHMENTS

Preretirement spouse's benefit

- Salaried: Upon death of a married participant after 5 years of Vesting Service, the surviving spouse will receive 50% of the benefit which would have been paid if the participant had terminated employment on the earlier of his date of death or actual termination date and had survived to and retired on his Earliest Retirement Date under the 50% Joint & Survivor option.
- Florence: Upon death of an employee after age 60 and completion of 10 years of Vesting Service, the surviving spouse will receive 50% of the benefit which would have been paid if the employee had retired on the day prior to his death. The 50% is reduced by 1/2% for each year that the employee is more than 5 years older than the spouse.

Florence Preretirement spouse's benefit for vested participants

Upon death of a married participant after 5 years of Vesting Service, and not eligible for retirement from employment with the Company, the surviving spouse will receive 50% of the benefit which would have been paid if the participant had terminated employment on the earlier of his date of death or actual termination date and had survived to and retired on his earliest Retirement Date under the 50% Joint and Survivor option.

Florence Prior plan account value distribution

Each participant's account due to participation in the Plan in effect on December 31, 1975 earns annual interest at a rate equal to 6% prior to 1983 and the Fund earnings rate on a market value basis for each Plan Year thereafter and vests at the rate of 10% a year beginning after 1 year (the 10% is changed to 20% effective January 1, 1989). Upon termination of employment, the reduced vested portion of a member's account will be paid in five annual installments, including interest on the undistributed portion. The reduction, if any, equals the actuarial value of benefits for which the employee is eligible upon termination of employment and which are due to service prior to January 1, 1976.

SCHEDULE SB ATTACHMENTS

Other Plan Provisions

Forms of payment

- Salaried: An employee may elect to receive his benefit on a straight-life basis or on an actuarially equivalent 10-year certain and life or 100%, 75% or 50% Joint and Survivor basis. Unless otherwise elected, any benefit payable under the Plan shall be paid:

  (1) on a 50% Joint and Survivor basis, if the employee is married on the date his benefit commences; or

  (2) on a straight-life basis otherwise.

- Florence: For normal, early, or disability retirements, the normal form of payment is a 50% Joint and Survivor annuity providing the participant was married on his date of retirement; otherwise, a straight-life basis applies.

  For the deferred vested termination benefit, unless elected otherwise, actuarially reduced benefits are automatically paid to married participants on a 50% Joint and Survivor basis; otherwise a straight-life basis applies.

Future Plan Changes

No future plan changes were recognized in determining minimum and maximum contributions.

Changes in Benefits Valued Since Prior Year

None.

Schedule of Assets Held at End of Year - Modified Cash Basis

Form 5500, Schedule H, Line 4i
EIN 22-2393554, Plan No. 003
December 31, 2025

(a)(b) Identity of Issuer	(c) Description of Investment	(d) Cost	(e) Current Value
Aetna Life Insurance Company	Money market insight fund	$ 478,720	$ 478,720

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 32
Schedule of Amortization Bases
as of January 1, 2025

	Type of Base	Date Established	Remaining Amortization Period (Years)	Outstanding Balance	Amortization Payment
Former Budd Company Employee Pension Plan					
1	Shortfall	12/01/2024	15.00000	19,478,509	1,816,669
2	Shortfall	12/01/2023	14.00000	14,662,648	1,432,165
3	Shortfall	12/01/2022	13.00000	10,199,386	1,048,420
	Total			44,340,543	4,297,254
	2 Months of Amortization Payments (10/1/2025 – 11/30/2025)			N/A	**716,209**
thyssenkrupp Defined Benefit Pension Plan North America (pre-merger)					
1	Shortfall	01/01/2025	15.00000	14,400,811	1,342,738
2	Shortfall	01/01/2024	14.00000	0	0
3	Shortfall	01/01/2023	13.00000	0	0
4	Shortfall	01/01/2022	12.00000	(256,589)	(27,913)
5	Shortfall	01/01/2021	11.00000	3,808,163	441,453
	Total			17,952,385	1,756,278
	11 Months of Amortization Payments (1/1/2025 – 11/30/2025)			N/A	**1,609,922**
Total Amortization Payment for 2025 Plan Year				**N/A**	**2,326,131**

Plan Name: thyssenkrupp Defined Benefit Pension Plan North America
EIN / PN: 22-2393554/003
Plan Sponsor: thyssenkrupp North America, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 25
Change in Method

- The Budd Company Employee Pension Plan merged into the thyssenkrupp Defined Benefit Pension Plan North America as of September 30, 2025. Furthermore, the thyssenkrupp Defined Benefit Pension Plan North America was terminated effective November 30, 2025. Approval is not required by the IRS as the mid-year plan merger received automatic approval under Section 5.03 of Revenue Procedure 2017-56.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24
Change in Actuarial Assumptions

- The assumed rate of return on plan assets (before applying the required amount) used to calculate the actuarial value of assets was changed from 5.30% to 5.20%. The expected rate of earnings for the 2025 plan year is 5.50%, as limited by the 3rd segment rate.

SCHEDULE SB ATTACHMENTS

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

Different mortality tables were used for before and after retirement. Below is the breakout of the current population.

Population description	Population size	Mortality table
Non-annuitants (Active employees and participants with deferred benefits)	**379**	Pre-retirement: IRS prescribed fully generational table based on the RP/MP-2014 Society of Actuaries study and subsequent updates (including, for 2025 plan years, the use of the MP-2021 mortality improvement scale). Post-retirement: Plan specific mortality approved by the IRS.
Male and Female annuitant only	**638**	Plan specific mortality approved by the IRS

SCHEDULE SB ATTACHMENTS

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

Substitute mortality tables are used for the following plan populations:

Mortality is assumed to occur according to a plan-specific substitute mortality table with separate male and female rates, as approved by the IRS in 2022 for valuations for the 2023 through 2032 plan years. The mortality rates are applied to all non-disabled annuitants. The prescribed tables apply for non-annuitants before retirement. The tables were developed based on the mortality experience of the annuitant populations for qualified defined benefit pension plans sponsored by thyssenkrupp North America, LLC for the period February 1, 2015 through January 31, 2020. The tables are generational, based on the IRS-prescribed projection scale MP-2021, with a base year of 2017. The table below presents illustrative rates for the base year.

Percentage of Participants Expected to Die Within One Year		
Age	Males	Females
25	0.0603%	0.0221%
30	0.0608%	0.0275%
35	0.0714%	0.0374%
40	0.0807%	0.0495%
45	0.1714%	0.1077%
50	0.4447%	0.2901%
55	0.6237%	0.4059%
60	0.8687%	0.6101%
65	1.2358%	0.9009%
70	1.8372%	1.3932%
75	2.9545%	2.2941%
80	4.9984%	3.9254%
85	8.7491%	7.0030%
90	15.3957%	12.4907%

The single mortality ratio for both genders of the aggregated pension plans is equal to 1.080050. The partial credibility weighting factor for the population determined pursuant to § 1.430(h)(3)-2(e)(2) is 0.592957. The single mortality ratio for both genders of the aggregated pension plans after reflecting the partial credibility weighting factor is 1.047466.

SCHEDULE SB ATTACHMENTS

Prescribed tables are used for the following plan populations:

The prescribed tables apply for non-annuitants (including disabled non-annuitants) before retirement.

The last plan year for which the IRS approval for the substitute mortality tables applies is: 2032.