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. . . . . ▶ [ ]

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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 12/31/1943

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)
CROWN CORK & SEAL COMPANY, INC.

770 TOWNSHIP LINE ROAD
YARDLEY, PA 19067

2b Employer Identification Number (EIN)
23-1526444

2c Plan Sponsor's telephone number
215-698-5100

2d Business code (see instructions)
332900

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	ALFRED J. DERMODY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	2484
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)**	2279
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	2282
b	Retired or separated participants receiving benefits	**6b**	80
c	Other retired or separated participants entitled to future benefits	**6c**	201
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2563
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	40
f	Total. Add lines **6d** and **6e**.	**6f**	2603
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**	124
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 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)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	**(1)** [X]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(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)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

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**	192432452
b Actuarial value	**2b**	192432452

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	40	5088126	5088126
b For terminated vested participants	165	11369355	11369355
c For active participants	2279	147533633	151878377
d Total	2484	163991114	168335858

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**	5.41 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	13931822
b Expected plan-related expenses	**6b**	1263304
c Target normal cost	**6c**	15195126

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

10/02/2026
Date

JOSEPH C. SNELL
Type or print name of actuary

26-05878
Most recent enrollment number

AON CONSULTING, INC.
Firm name

610-834-2100
Telephone number (including area code)

MSC# 17833
PO BOX 7505
FORT WASHINGTON, PA 19034
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	24214303
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	24214303
10	Interest on line 9 using prior year's actual return of 7.72 %	0	1869344
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		9527277
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 5.09 %		484938
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		10012215
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	18000000
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	8083647

Part III Funding Percentages

14	Funding target attainment percentage	14	109.51 %
15	Adjusted funding target attainment percentage	15	102.68 %
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	102.12 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:	1st segment: 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**	15195126
b Excess assets, if applicable, but not greater than line 31a	**31b**	15195126

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

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

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

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

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

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

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

AON CONSULTING

23-2293237

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	617000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

DECHERT

23-1425587

(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	138536	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

DEGANN CONSULTING

45-2433798

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	91668	Yes [ ] No [X]	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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

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: CC&S MASTER RETIREMENT TRUST

b Name of sponsor of entity listed in (a): NORTHERN TRUST COMPANY

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)
36-1561860-001	M	205342255

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

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)		
(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)	192432452	205342255
(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	192432452	205342255
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	192432452	205342255

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)		
(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)		0
(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)		15791022
(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		15791022
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1256842	
(2) To insurance carriers for the provision of benefits	2e(2)	1884416	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		3141258
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	676863	
(6) Bank or trust company trustee/custodial fees	2i(6)	137834	
(7) Actuarial fees	2i(7)	708668	
(8) Legal fees	2i(8)	138536	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	285668	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1947569
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		5088827
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		10702195
l Transfers of assets:			
(1) To this plan	2l(1)		2207608
(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: WITHUMSMITH+BROWN, PC **(2)** EIN: 22-2027092

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		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**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? [ ] Yes [X] No

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 582332.

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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

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): 36-1561860

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** 6

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: 34.0 % Private Equity: 0.7 % Investment-Grade Debt and Interest Rate Hedging Assets: 15.5 %

High-Yield Debt: 0.0 % Real Assets: 48.4 % Cash or Cash Equivalents: 1.4 % 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_____.

Crown Cork & Seal Company, Inc. Pension Plan

Financial Statements (Modified Cash Basis)
December 31, 2025 and 2024
and Independent Auditor's Report

Crown Cork & Seal Company, Inc.
Pension Plan
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December 31, 2025 and 2024

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Independent Auditor's Report

To the Participants and Plan Administrator of
Crown Cork & Seal Company, Inc. Pension Plan:

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

We have performed audits of the financial statements of Crown Cork & Seal Company, Inc. Pension Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits—modified cash basis as of December 31, 2025 and 2024, and the related statements of changes in net assets available for benefits—modified cash basis for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Crown Cork & Seal Company, Inc. Pension Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("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 ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note 8 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting described in Note 2; this includes 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 financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of the modified cash basis of accounting.
Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with the modified cash basis of accounting.

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

Basis of Accounting

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

Withum Smith + Brown, PC

October 13, 2026

Crown Cork & Seal Company, Inc.
Pension Plan
Statements of Net Assets Available for Benefits (Modified Cash Basis)
December 31, 2025 and 2024

	2025	2024
Assets		
Interest in Crown Cork & Seal Company, Inc. Master Retirement Trust	$ 205,342,255	$ 192,432,452
Total assets	205,342,255	192,432,452
Liabilities	—	—
Net assets available for benefits	$ 205,342,255	$ 192,432,452

The accompanying notes are an integral part of these financial statements.

Crown Cork & Seal Company, Inc.
Pension Plan
Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis)
For the Years Ended December 31, 2025 and 2024

	2025	2024
Additions:		
Net investment income allocated from the Crown Cork & Seal Company, Inc. Master Retirement Trust	$ 15,791,022	$ 48,481,590
Employer contributions	-	118,800,000
Total additions	15,791,022	167,281,590
Deductions:		
Benefits paid to participants	1,256,842	105,828,995
Payments to insurance carriers	1,884,416	729,870,620
Total benefits paid	3,141,258	835,699,615
Administrative expenses	1,947,569	9,364,388
Total deductions	5,088,827	845,064,003
Net increase / (decrease)	10,702,195	(677,782,413)
Transfers from Crown Cork & Seal Company Inc. Pension Plan for Certain Designated Groups	2,207,608	-
Net assets available for benefits		
Beginning of year	192,432,452	870,214,865
End of year	$ 205,342,255	$ 192,432,452

The accompanying notes are an integral part of these financial statements.

1. Description of Plan

The following description of the Crown Cork & Seal Company, Inc. Pension Plan (the "Plan") is provided for general information purposes only. For a more complete description, including vesting and benefit provisions, refer to the plan document, available from Crown Holdings, Inc. (the "Company"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

General

The Plan is a defined benefit pension plan covering eligible full-time salaried employees, whose wages and conditions of employment are not determined by collective bargaining agreements, and eligible full-time hourly employees of the Company, including certain employees who are subject to the terms of collective bargaining agreements. The Plan is administered by the Crown Cork & Seal Company, Inc. Benefit Plans Committee.

The Plan was amended effective January 1, 2019 and any salaried employee who commences employment or reemployment on or after January 1, 2019 is not eligible to participate or recommence participation in the Plan.

As of December 31, 2025 and 2024, the Plan has a 100.00% and 98.91%, respectively, interest in the Crown Cork & Seal Company, Inc. Master Retirement Trust ("Master Trust"). The assets of the Master Trust are held by the Plan's trustee, Northern Trust Company.

Effective December 31, 2025, the Crown Cork & Seal Company, Inc. Pension Plan for Certain Designated Groups was merged into the Plan.

Merger of Plan Assets and Accumulated Plan Benefits

Effective December 31, 2025, the Crown Cork & Seal Company, Inc. Pension Plan for Certain Designated Groups was merged into the Plan. As a result of the merger, associated net assets available for benefits totaling $2,207,608 were transferred to the Plan. The actuarial present value of accumulated plan benefits attributable to the merged participants and beneficiaries was $1,807,947 as of the merger date. The excess of net assets available for benefits transferred over the actuarial present value of accumulated plan benefits, totaling $399,661, reflects the merged plan's overfunded status as of the merger date. All net assets available for benefits, including the excess, were transferred to the Plan. Following the merger, all obligations related to the merged participants and beneficiaries became the responsibility of the Plan.

Pension Benefits

Participants who have completed at least five years of service are eligible to receive a retirement benefit commencing on their effective retirement date as defined by the plan document. Benefits are payable in the form of a straight life annuity for unmarried participants and a qualified 50% joint and survivor annuity for married participants. Participants may elect to receive benefits in other optional forms in accordance with the terms of the plan document. Participants may be entitled to death and disability benefits in accordance with the terms of the plan document.

The Plan permits early retirement; ages, years of service, and payment options vary in accordance with the plan document. If a participant terminates before rendering five years of service, the participant forfeits the right to receive their accumulated plan benefits. A vested participant will receive a lump sum distribution at the time of termination if the present value of the actuarial equivalent of the accrued benefit is $7,000 or less.

The Plan purchased a group annuity contract during 2024 to fully guarantee benefits for nearly all of the retirees and deferred vested participants covered as of August 28, 2024, the date of the annuity purchase. Participants actively employed at the time of the purchase were not impacted. Approximately $730,000,000 of assets from the Master Trust were used to complete the transaction in 2024, and a premium adjustment of nearly $1,900,000 was paid to the insurance carrier in 2025.

2. Summary of Significant Accounting Policies

Basis of Accounting

The Plan prepares its financial statements on the modified cash basis of accounting. Under this method of accounting, Company and participant contributions are recorded when received by the Plan. Although the modified cash basis of accounting represents a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America, it is an acceptable method of accounting under the reporting requirements of the Department of Labor ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA.

Use of Estimates

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis). In addition, certain investment related expenses are included in net investment income presented in the Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis).

Investment Valuation and Income Recognition
The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Benefit Plans Committee determines the Plan's valuation policies using information provided by the trustee. See Note 3 for a discussion of fair value measurements.

Purchases and sales of securities are recorded on the trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net investment income includes the Plan's gains and losses on investments bought and sold as well as held during the year by the Master Trust.

Subsequent Events
The Plan has evaluated subsequent events for recognition or disclosure through October 13, 2026, the date the financial statements were available to be issued.

3. Fair Value of Measurements

The Plan measures on a recurring basis its investments at fair value in accordance with the FASB codification, "Fair Value Measurement," which provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance are described as follows:

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

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

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

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

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

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

Securities Valuation

The following is a description of the valuation methodologies used for assets measured at fair value in the Plan and in the Plan's interest in the Master Trust (see Note 10). There have been no changes in methodologies used at December 31, 2025 or 2024.

Common stocks are valued at the latest quoted sales prices or official closing prices taken from the primary market in which each security trades.

Mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Fixed income securities, which include corporate bonds, are valued using the latest bid prices or valuations based on a matrix system (which considers such factors as benchmark yields, reported trades, broker/dealer quotes, issuer spreads, benchmark securities, bids, and other reference data including market research publications).

Investments in real estate property are valued based on third party appraisals as of the valuation date. The valuation incorporates the income capitalization and the comparable sale methodologies. The income capitalization methodology reflects the risk adjustments for vacancy rates inherent in the long-term lease agreements based on industry standard guidelines as well as rental rates of comparable properties in the same geographical region. The sales comparison methodology is intended to estimate a value through comparable improved sales within a competitive geographical area relevant to the specific real estate held by the Plan. This methodology reflects the risk adjustments for timing, location and physical characteristics.

Private equity funds are reported at fair value using NAV as determined by the investment managers. The Plan considers valuations provided to it by the general partners of the funds. The values assigned to private equity funds are based upon available information and do not necessarily represent amounts which might ultimately be realized. Because of the inherent uncertainty of valuation, those estimated fair values may differ significantly from the values that would have been used had a ready market for the private equity funds existed and those differences could be material. The private equity portfolio consists of corporate finance funds and venture funds. At the underlying company level, the portfolio is predominately weighted towards North America. While the portfolio is fairly diversified by sector, healthcare, technology, and industrial companies represent the primary components of unrealized value. The funds have unfunded commitments and redemption restrictions, but restrictions do not limit the funds from transacting at the NAV in future periods.

Real estate investment funds are valued at the NAV per unit on the valuation date. The real estate funds invest in a diversified portfolio of property types, predominantly: office, industrial, multi-family and retail sectors. These funds have no unfunded commitments and each fund has redemption restrictions. These redemption restrictions do not limit the funds from transacting at the NAV in future periods.

Investments in private equity funds and real estate investment funds are categorized in Level 3 of the fair value hierarchy. In determining the level, the Plan considers the length of time until the investment is redeemable, including notice and lock-up periods or any other restriction on the disposition of the investment. The Plan also considers the nature of the portfolios of the underlying funds and their ability to liquidate their underlying investments.

4. Plan Termination

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

a. Benefits attributable to participant contributions.

b. Annuity benefits former employees or their beneficiaries have been receiving for at least three years, or annuity benefits that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding the plan termination.

c. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. Governmental agency) up to the applicable limitations (discussed below).

d. All other vested benefits (that is, vested benefits not insured by the PBGC).

e. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees. Whether all participants receive their benefits, should the Plan terminate

at some future time, will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

5. Related Party and Party In Interest Transactions

The Master Trust owns real properties, which are valued by independent appraisal. One of the properties, which is used by the Company, has been determined to be "qualifying employer real property" as defined by the regulations of ERISA and does not exceed ERISA limitations.

The Master Trust's portfolio of investments included common stock of the Company; all shares of Company common stock were sold in 2024. These are considered qualifying employer securities. This common stock did not exceed ERISA limitations. Net investment income for the Master Trust includes changes in unrealized gains or losses from Company common stock of $(243,183,000) for the year ended December 31, 2024 and $236,970,000 of realized gains for the year ended December 31, 2024. Dividend income from the Company's common stock fund totaled $2,250,000 in 2024.

Certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan.

6. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances, including retirement, death, disability and termination of employment, are included to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. The following significant actuarial assumptions were used in the valuation as of December 31, 2025: (a) actuarial cost method is the Standard Unit Credit Cost Method, (b) actuarial interest rate is 6.60% per annum, compounded annually, (c) life expectancy of participants uses amounts-weighted aggregate rates from the Pri-2012 mortality study projected generationally from 2012 with Scale MP-2021 (November 2025 Endemic version) with blue collar adjustments for healthy participants and disabled retiree rates for disabled participants, and (d) retirement age is as defined in the plan document. The following significant actuarial assumptions were used in the valuation as of December 31, 2024: (a) actuarial cost method is the Standard Unit Credit Cost Method, (b) actuarial interest rate is 7.15% per annum, compounded

annually, (c) life expectancy of participants uses amounts-weighted aggregate rates from the Pri-2012 mortality study projected generationally from 2012 with Scale MP-2021 (November 2024 Endemic version) with blue collar adjustments for healthy participants and disabled retiree rates for disabled participants, and (d) retirement age is as defined in the plan document. 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.

The actuarial present value of accumulated plan benefits at December 31, 2025 and 2024 is as follows:

	2025	2024
Vested benefits:		
Active participants	$ 134,100,754	$ 116,349,345
Terminated participants	14,204,232	9,091,514
Participants currently receiving benefits	16,387,163	4,401,494
Total vested benefits	164,692,149	129,842,353
Nonvested benefits	4,512,209	3,350,086
Total actuarial present value of accumulated plan benefits	$ 169,204,358	$ 133,192,439

The change in accumulated plan benefits for the years ended December 31, 2025 and 2024 is as follows:

	2025	2024
Total actuarial present value of accumulated plan benefits at the beginning of the year	$ 133,192,439	$ 800,380,296
Increase/(decrease) during the year attributable to:		
Plan amendments	217,485	103,941
Increase from plan merger	1,807,947	-
Assumption changes	13,923,052	3,182,245
Benefits accumulated/plan experience	11,838,807	137,358,883
Increase for interest due to decrease in discount period	9,479,183	27,866,689
Benefits paid	(1,254,555)	(835,699,615)
Total actuarial present value of accumulated plan benefits at the end of the year	$ 169,204,358	$ 133,192,439

The plan amendments in 2025 represent the effects of an increase in the benefit multiplier for certain hourly employees and a freeze to the benefit accruals for another group of hourly employees. Accumulated plan benefits also increased from the merger of the Crown Cork & Seal Company, Inc. Pension Plan for Certain Designated Groups into the Plan on December 31, 2025. The plan amendments in 2024 represent (a) the effects of an increase in the benefit multiplier for certain hourly employees, (b) the closing of two locations, and (c) the impact of a lump sum offering and annuity purchase completed in 2024. The assumption changes in 2025 are a result of using a more current mortality improvement scale. The assumption changes in 2024 represent a change in the mortality tables to determine life expectancy because the annuity settlement in 2024 resulted in insufficient annuitants to have credible plan specific mortality experience. Benefits paid in 2025 exclude payments to insurance carriers of approximately 1,900,000, which represent a premium adjustment to the group annuity contract purchased in 2024.

7. Tax Status

The Plan received a determination letter dated October 27, 2015 from the Internal Revenue Service ("IRS") that the Plan is designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"), and accordingly, is not subject to federal or local income taxes. The plan administrator believes the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require the plan's administrator to evaluate uncertain tax positions taken by the Plan. The financial effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. There are no uncertain tax positions taken or expected to be taken by the Plan. The Plan has recognized no interest or penalties related to uncertain tax positions. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

8. Financial Information Certified by Trustee

The plan administrator has elected the method of compliance as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA for 2025 and 2024. Accordingly, Northern Trust Company, the trustee of the Plan, has certified to the completeness and accuracy of all investments reported in the accompanying Statements of Net Assets Available for Benefits (Modified Cash Basis) as of December 31, 2025 and 2024 and the related investment activity reported in the Statements of Changes in Net Assets Available for Benefits (Modified Cash Basis) for the years ended December 31, 2025 and 2024.

9. Funding Policy and Participant Contributions

The Plan's funding policy is for the Company to make contributions determined on an actuarial basis by an independent actuary in amounts deemed necessary to fund benefits provided by the Plan. During 2024, the Company made additional contributions to fund the group annuity contract purchased. The Plan has met the ERISA minimum funding requirements for 2025 and 2024.

Prior to January 1, 2017, participants who were salaried employees in certain locations could elect to contribute 5% of their annual compensation to the Plan. Contributions were subject to certain IRS limitations. The Plan was amended on January 1, 2017 to terminate this contributory feature, and participants may no longer make contributions to the Plan. At December 31, 2025 and 2024, the balance of contributions made by active participants was $911,671 and $1,135,798, respectively. Participant balances continue to earn interest in accordance with the provisions of the Plan.

10. Investment in Master Trust

All of the Plan's investments were in the Master Trust as of December 31, 2025 and 2024. The assets of the Master Trust are held by the trustee. As of December 31, 2025 and 2024, the Plan's interest in the net assets of the Master Trust was 100.00% and 98.91%, respectively. Investment income and administrative expenses related to the Master Trust are allocated based on the Plan's interest in the net assets of the Master Trust.

The following tables present the net assets of the Master Trust and the Plan's undivided interest as of December 31, 2025 and 2024:

	2025	
	Master Trust Balances	Plan's Interest in Master Trust Balances
Common stocks	$ 402	$ 402
Mutual funds	101,663,367	101,663,367
Real estate investment funds	71,508,887	71,508,887
Private equity funds	1,495,434	1,495,434
Real estate – direct	27,825,000	27,825,000
Investments at fair value	202,493,090	202,493,090
Cash and cash equivalents	3,072,939	3,072,939
Pending sales and purchases, net	(567,489)	(567,489)
Accrued income	343,715	343,715
Total Master Trust net assets	$ 205,342,255	$ 205,342,255

	2024	
	Master Trust Balances	Plan's Interest in Master Trust Balances
Common stocks	$ 402	$ 398
Corporate bonds	13,500	13,353
Mutual funds	50,810,772	50,258,995
Real estate investment funds	106,098,690	104,946,516
Private equity funds	1,754,968	1,735,910
Real estate – direct	27,650,000	27,349,736
Investments at fair value	186,328,332	184,304,908
Cash and cash equivalents	8,218,013	8,128,770
Pending sales and purchases, net	(384,553)	(380,377)
Accrued income	383,314	379,151
Total Master Trust net assets	$ 194,545,106	$ 192,432,452

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

	2025	2024
Investment income:		
Net appreciation in fair value of investments	$ 7,856,534	$ 31,803,539
Interest and dividends	3,169,071	11,644,138
Other investment income	4,937,449	5,650,405
Total investment income	$ 15,963,054	$ 49,098,082

The net appreciation in fair value of investments (including investments bought, sold and held during the year) consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

The following table summarizes investments measured at fair value on a recurring basis for the Master Trust as of December 31, 2025 and 2024:

	2025	2024
Level 1		
Common stocks	$ 402	$ 402
Mutual funds	101,663,367	50,810,772
	101,663,769	50,811,174
Level 2		
Corporate bonds	—	13,500
	—	13,500
Level 3		
Real estate investment funds	71,508,887	106,098,690
Private equity funds	1,495,434	1,754,968
Real estate – direct	27,825,000	27,650,000
	100,829,321	135,503,658
Investments at fair value	202,493,090	186,328,332
Cash and cash equivalents	3,072,939	8,218,013
Pending sales and purchases, net	(567,489)	(384,553)
Accrued income	343,715	383,314
Total Master Trust net assets	$ 205,342,255	$ 194,545,106

The following table sets forth a summary of certain changes in the fair value of Level 3 assets in the Master Trust for the years ended December 31, 2025 and 2024:

	Year Ended December 31, 2025		
	Private Equity Funds	Real Estate Funds and Direct	Total
Purchases	$ 9,778	$ -	$ 9,778
Sales	$ (320,236)	$ (33,886,959)	$ (34,207,195)

	Year Ended December 31, 2024		
	Private Equity Funds	Real Estate Funds and Direct	Total
Purchases	$ 6,953	$ 15,179,353	$ 15,186,306
Sales	$ (311,362)	$ (30,665,318)	$ (30,976,680)

Quantitative Information about Significant Unobservable Inputs Used in Level 3 Fair Value Measurements

The following table represents the Plan's Level 3 investments in real estate, the valuation techniques used to measure the fair value of these investments in real estate, and the significant unobservable inputs and the ranges of values for those inputs.

		December 31, 2025		
Investment in Real Estate	Fair Value	Valuation Techniques	Unobservable Inputs	Ranges
Industrial	$27,825,000	Income Capitalization Method	Rental rate	$5.83 - $7.80
			Vacancy rate	4%
		Comparable Sale Method	Date of sale, size and building characteristics (price per square foot)	$69.04 - $95.00

		December 31, 2024		
Investment in Real Estate	Fair Value	Valuation Techniques	Unobservable Inputs	Ranges
Industrial	$27,650,000	Income Capitalization Method	Rental rate	$5.66 - $7.51
			Vacancy rate	4%
		Comparable Sale Method	Date of sale, size and building characteristics (price per square foot)	$67.50 - $94.97

11. Risks and Uncertainties

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

The Master Trust's portfolio of investments included $168,919,562 concentrated in five investments as of December 31, 2025 and $122,274,748 concentrated in four investments as of December 31, 2024.

In addition, the Plan's investments through the Master Trust consist of marketable debt and equity securities which are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that

changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits (Modified Cash Basis).

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

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

Active Salaried Employees

Number of Participants and Average Compensation

Attained Age	Years of Credited Service									
	<1	**1-4**	**5-9**	**10-14**	**15-19**	**20-24**	**25-29**	**30-34**	**35-39**	**40+**
<25		40 $67,512								
25-29		70 $69,690	12							
30-34		101 $73,076	55 $84,461	8						
35-39	1	80 $69,948	49 $84,709	25 $108,927	8					
40-44	1	59 $69,239	40 $88,454	16	25 $116,206	8				
45-49	1	57 $69,098	28 $95,244	16	19	14	6			
50-54		49 $67,081	38 $97,873	25 $126,273	26 $97,203	12	24 $129,284	7		
55-59		49 $66,480	33 $99,880	27 $124,620	31 $107,265	9	18	15	12	
60-64		16	22 $91,113	21 $132,003	20 $93,857	10	14	19	17	7
65-69		4	7	5	8	4	4	4	5	4
70+		2	2		4	2	3	2		2

N-1,322

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Active Hourly Employees

Number of Participants and Average Compensation

Attained Age	Years of Credited Service									
	<1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+
<25		31 $60,084								
25-29		42 $64,277	10							
30-34		62 $61,496	33 $69,297	4						
35-39	1	56 $60,141	21 $71,850	11	3					
40-44		52 $61,426	14	7	16	2	1			
45-49		44 $59,753	15	21 $66,165	12	9	13			
50-54		37 $61,267	22 $59,155	17	14	11	19	13		
55-59		31 $57,184	13	14	23 $65,073	13	19	23 $75,581	17	1
60-64		25 $60,677	11	11	10	12	17	16	20 $67,783	12
65-69		3	1	5	5	3	7	5	4	5
70+		2	2			2	1	1	3	7

N-957

Annual compensation amounts were determined assuming 2,080 hours worked per year. Also, this grid includes one participant who is not included in the counts due to multiple benefits.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

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

Interest Rates for Minimum Funding Purposes	Based on segment rates with a four-month lookback (as of September 2024), each adjusted as needed to fall within the 25-year average interest rate stabilization corridor under ARPA
1st Segment Rate	5.07%
2nd Segment Rate	5.31%
3rd Segment Rate	5.50%
Interest Rates for Maximum Tax Purposes	Based on segment rates with a four-month lookback (as of September 2024), without regard to interest rate stabilization
1st Segment Rate	5.07%
2nd Segment Rate	5.33%
3rd Segment Rate	5.36%
Salary Increases	
Minimum Funding Target Normal Cost	See Tables 1-5
Maximum Tax Expected Benefit Increase	See Tables 1-5
Social Security Wage Base Increases	Future wage indices are based on a national wage increase of 3.30% per year.
Social Security COLA Increases	2.30%
Optional Payment Form Election Percentage	50% life annuity 20% joint and 50% survivor annuity 30% joint and 100% survivor annuity Of the participants assumed to elect a life annuity, participants known to have a 6-year certain and life normal form of payment are assumed to elect a 6-year certain and life annuity. All other participants are assumed to elect a single life annuity.
Retirement Age	
Active Participants	See Tables 6-10
Terminated Vested Participants	See Tables 11-12

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

For ERISA Requirements

Mortality Rates	
Healthy	2012 base mortality rates for annuitants and non-annuitants per §1.430(h)(3)-1(d), projected generationally for years beyond 2012 using IRS-prescribed mortality improvement rates per §1.430(h)(3)-1(b)(1)(iii)
Disabled	Revenue Ruling 96-7 mortality table for disability after December 31, 1994
Withdrawal Rates	See Tables 13-14
Disability Rates	See Table 15
Decrement Timing	Middle-of-year decrements (except that retirement is assumed to occur at the beginning of the year for ages where the assumed retirement rate is 100%)
Surviving Spouse Benefit	It is assumed that 80% of salaried males and 65% of salaried females and 60% of hourly males and 50% of hourly females have an eligible spouse. Males are assumed to be two years older than their spouses.
Special Termination Benefit in Event of Plan Closure	Several of the hourly groups have special termination benefits which are only triggered in the event of layoff or plant closure. No increase in plan liabilities has been assumed to reflect these benefits.
Benefit and Compensation Limits	Projected benefits and compensation are limited by the current IRC section 415 maximum benefit of $280,000 and the IRC section 401(a)(17) compensation limit of $350,000.
Valuation of Plan Assets	Fair Market Value
Trust Expenses Included in Target Normal Cost	$1,263,304. Administrative expenses are based on the average of actual administrative expenses paid over the last two years (excluding PBGC premiums and adjusted for inflation) plus the estimated PBGC premium paid in the current year.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Actuarial Method	Standard unit credit cost method
Valuation Date	January 1, 2025

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Table 1

Merit Salary Increase Rates[1] — Hourly Crawfordsville Employees (Rider 16)

Age	Rate	Age	Rate
20	6.10%	50	2.60%
21	5.90%	51	2.50%
22	5.80%	52	2.40%
23	5.70%	53	2.30%
24	5.60%	54	2.20%
25	5.50%	55	2.10%
26	5.40%	56	2.00%
27	5.20%	57	1.90%
28	5.10%	58	1.80%
29	5.00%	59	1.70%
30	4.90%	60	1.60%
31	4.80%	61	1.50%
32	4.60%	62	1.30%
33	4.50%	63	1.20%
34	4.40%	64	1.10%
35	4.30%	65+	1.00%
36	4.20%		
37	4.00%		
38	3.90%		
39	3.80%		
40	3.70%		
41	3.60%		
42	3.50%		
43	3.40%		
44	3.30%		
45	3.20%		
46	3.00%		
47	2.90%		
48	2.80%		
49	2.70%		

[1] The merit salary increase rates above do not include the additional inflation assumption of 2.30 percent.

Table 2

Merit Salary Increase Rates[1] — Hourly Central States Can Employees (Rider 39)

Age	Rate	Age	Rate
20	6.90%	50	1.60%
21	6.60%	51	1.50%
22	6.40%	52	1.50%
23	6.10%	53	1.50%
24	5.90%	54	1.40%
25	5.60%	55	1.40%
26	5.40%	56	1.40%
27	5.10%	57	1.30%
28	4.90%	58	1.30%
29	4.60%	59	1.30%
30	4.40%	60	1.20%
31	4.10%	61	1.20%
32	3.90%	62	1.20%
33	3.60%	63	1.10%
34	3.40%	64	1.10%
35	3.10%	65+	1.10%
36	2.90%		
37	2.60%		
38	2.40%		
39	2.10%		
40	1.90%		
41	1.90%		
42	1.80%		
43	1.80%		
44	1.80%		
45	1.70%		
46	1.70%		
47	1.70%		
48	1.60%		
49	1.60%		

[1] The merit salary increase rates above do not include the additional inflation assumption of 2.30 percent.

Table 3

Merit Salary Increase Rates[1] — Hourly Anchor Hocking Employees (Rider 41)

Age	Rate	Age	Rate
20	4.50%	50	1.40%
21	4.30%	51	1.30%
22	4.20%	52	1.30%
23	4.00%	53	1.30%
24	3.90%	54	1.30%
25	3.70%	55	1.30%
26	3.60%	56	1.20%
27	3.50%	57	1.20%
28	3.30%	58	1.20%
29	3.20%	59	1.20%
30	3.00%	60	1.20%
31	2.90%	61	1.10%
32	2.70%	62	1.10%
33	2.60%	63	1.10%
34	2.40%	64	1.10%
35	2.30%	65+	1.10%
36	2.10%		
37	2.00%		
38	1.80%		
39	1.70%		
40	1.50%		
41	1.50%		
42	1.50%		
43	1.50%		
44	1.50%		
45	1.40%		
46	1.40%		
47	1.40%		
48	1.40%		
49	1.40%		

[1] The merit salary increase rates above do not include the additional inflation assumption of 2.30 percent.

Table 4

Merit Salary Increase Rates[1] — Hourly in Salaried Riders

Age	Rate	Age	Rate
20	5.60%	50	2.40%
21	5.50%	51	2.30%
22	5.40%	52	2.20%
23	5.30%	53	2.10%
24	5.20%	54	2.00%
25	5.10%	55	2.00%
26	4.90%	56	1.90%
27	4.80%	57	1.80%
28	4.70%	58	1.70%
29	4.60%	59	1.60%
30	4.50%	60	1.50%
31	4.40%	61	1.40%
32	4.30%	62	1.30%
33	4.10%	63	1.20%
34	4.00%	64	1.10%
35	3.90%	65+	1.00%
36	3.80%		
37	3.70%		
38	3.60%		
39	3.40%		
40	3.30%		
41	3.20%		
42	3.20%		
43	3.10%		
44	3.00%		
45	2.90%		
46	2.80%		
47	2.70%		
48	2.60%		
49	2.50%		

[1] The merit salary increase rates above do not include the additional inflation assumption of 2.30 percent.

Table 5

Merit Salary Increase Rates[1] — All Other Employees

Age	Rate	Age	Rate
20	6.30%	50	2.50%
21	6.20%	51	2.40%
22	6.00%	52	2.30%
23	5.90%	53	2.30%
24	5.70%	54	2.20%
25	5.60%	55	2.10%
26	5.40%	56	2.00%
27	5.30%	57	1.90%
28	5.10%	58	1.80%
29	5.00%	59	1.80%
30	4.80%	60	1.70%
31	4.70%	61	1.60%
32	4.50%	62	1.50%
33	4.40%	63	1.40%
34	4.20%	64	1.30%
35	4.10%	65+	1.20%
36	3.90%		
37	3.80%		
38	3.60%		
39	3.50%		
40	3.40%		
41	3.30%		
42	3.20%		
43	3.10%		
44	3.00%		
45	2.90%		
46	2.80%		
47	2.80%		
48	2.70%		
49	2.60%		

[1] The merit salary increase rates above do not include the additional inflation assumption of 2.30 percent.

Table 6

Retirement Rates — Hourly Seattle and IAM Employees (Rider 10 & 31)

Age	Years of Service	
	0-29	30+
50	0.00%	15.00%
51	0.00%	15.00%
52	0.00%	15.00%
53	0.00%	15.00%
54	0.00%	15.00%
55	0.00%	30.00%
56	0.00%	30.00%
57	0.00%	30.00%
58	0.00%	30.00%
59	0.00%	30.00%
60	40.00%	30.00%
61	40.00%	30.00%
62	50.00%	50.00%
63	50.00%	20.00%
64	50.00%	30.00%
65	50.00%	50.00%
66	50.00%	50.00%
67	50.00%	50.00%
68	50.00%	50.00%
69	50.00%	50.00%
70+	100.00%	100.00%

Table 7

Retirement Rates — Hourly Crawfordsville, Dayton and Anchor Hocking Employees (Rider 16, 26 & 41)

Age	Rate
50	0.00%
51	0.00%
52	0.00%
53	0.00%
54	0.00%
55	0.00%
56	0.00%
57	0.00%
58	0.00%
59	0.00%
60	15.00%
61	15.00%
62	20.00%
63	20.00%
64	20.00%
65	40.00%
66	40.00%
67	40.00%
68	50.00%
69	50.00%
70+	100.00%

Table 8

Retirement Rates — Hourly Winchester and USWA Employees (Rider 7 & 30)

Age	Years of Service	
	0-29	30+
50	0.00%	10.00%
51	0.00%	10.00%
52	0.00%	10.00%
53	0.00%	10.00%
54	0.00%	10.00%
55	15.00%	10.00%
56	10.00%	10.00%
57	10.00%	10.00%
58	10.00%	10.00%
59	10.00%	10.00%
60	10.00%	10.00%
61	10.00%	10.00%
62	10.00%	40.00%
63	20.00%	15.00%
64	25.00%	35.00%
65	35.00%	35.00%
66	35.00%	35.00%
67	35.00%	35.00%
68	50.00%	50.00%
69	50.00%	50.00%
70+	100.00%	100.00%

Table 9

Retirement Rates — Hourly in Salaried Riders

Age	Rate
50	0.00%
51	0.00%
52	0.00%
53	0.00%
54	0.00%
55	5.00%
56	5.00%
57	5.00%
58	5.00%
59	5.00%
60	10.00%
61	10.00%
62	15.00%
63	10.00%
64	30.00%
65	35.00%
66	35.00%
67	25.00%
68	25.00%
69	25.00%
70+	100.00%

Table 10

Retirement Rates — All Other Employees

Age	Rate
50	0.00%
51	0.00%
52	0.00%
53	0.00%
54	0.00%
55	5.00%
56	5.00%
57	5.00%
58	5.00%
59	5.00%
60	5.00%
61	10.00%
62	20.00%
63	10.00%
64	20.00%
65	35.00%
66	35.00%
67	35.00%
68	30.00%
69	30.00%
70+	100.00%

Table 11

Retirement Rates — Hourly Terminated Vested Participants

Age	Rate
55	5.00%
56	5.00%
57	3.00%
58	3.00%
59	3.00%
60	10.00%
61	10.00%
62	20.00%
63	20.00%
64	20.00%
65+	100.00%

Table 12

Retirement Rates — Salaried Terminated Vested Participants

Age	Rate
55	3.00%
56	3.00%
57	3.00%
58	3.00%
59	3.00%
60	3.00%
61	3.00%
62	5.00%
63	5.00%
64	30.00%
65+	100.00%

Table 13

Withdrawal Rates — Hourly Seattle, Crawfordsville, Dayton, IAM and Anchor Hocking Employees (Rider 10, 16, 26, 31 & 41)

Age	Years of Service	
	0-4	5+
15	15.00%	15.00%
16	15.00%	15.00%
17	15.00%	15.00%
18	15.00%	15.00%
19	15.00%	15.00%
20	15.00%	15.00%
21	15.00%	15.00%
22	15.00%	15.00%
23	15.00%	15.00%
24	15.00%	15.00%
25	15.00%	25.00%
26	15.00%	25.00%
27	15.00%	25.00%
28	15.00%	25.00%
29	15.00%	25.00%
30	25.00%	10.00%
31	25.00%	10.00%
32	25.00%	10.00%
33	25.00%	10.00%
34	25.00%	10.00%
35	20.00%	10.00%
36	20.00%	10.00%
37	20.00%	10.00%
38	20.00%	10.00%
39	20.00%	10.00%

Table 13 (continued)

Withdrawal Rates — Hourly Seattle, Crawfordsville, Dayton, IAM and Anchor Hocking Employees (Rider 10, 16, 26, 31 & 41)

Age	Years of Service	
	0-4	5+
40	20.00%	5.00%
41	20.00%	5.00%
42	20.00%	5.00%
43	20.00%	5.00%
44	20.00%	5.00%
45	20.00%	5.00%
46	20.00%	5.00%
47	20.00%	5.00%
48	20.00%	5.00%
49	20.00%	5.00%
50	10.00%	5.00%
51	10.00%	5.00%
52	10.00%	5.00%
53	10.00%	5.00%
54	10.00%	5.00%
55	10.00%	7.50%
56	10.00%	7.50%
57	10.00%	7.50%
58	10.00%	7.50%
59	10.00%	7.50%
60+	20.00%	7.50%

Table 14

Withdrawal Rates — All Other Employees

Age	Years of Service	
	0-4	5+
15	15.00%	15.00%
16	15.00%	15.00%
17	15.00%	15.00%
18	15.00%	15.00%
19	15.00%	15.00%
20	20.00%	15.00%
21	20.00%	15.00%
22	20.00%	15.00%
23	20.00%	15.00%
24	20.00%	15.00%
25	15.00%	15.00%
26	15.00%	15.00%
27	15.00%	15.00%
28	15.00%	15.00%
29	15.00%	15.00%
30	15.00%	10.00%
31	15.00%	10.00%
32	15.00%	10.00%
33	15.00%	10.00%
34	15.00%	10.00%
35	15.00%	10.00%
36	15.00%	10.00%
37	15.00%	10.00%
38	15.00%	10.00%
39	15.00%	10.00%

Table 14 (continued)

Withdrawal Rates — All Other Employees

Age	Years of Service	
	0-4	5+
40	15.00%	5.00%
41	15.00%	5.00%
42	15.00%	5.00%
43	15.00%	5.00%
44	15.00%	5.00%
45	10.00%	5.00%
46	10.00%	5.00%
47	10.00%	5.00%
48	10.00%	5.00%
49	10.00%	5.00%
50	10.00%	5.00%
51	10.00%	5.00%
52	10.00%	5.00%
53	10.00%	5.00%
54	10.00%	5.00%
55	15.00%	10.00%
56	15.00%	10.00%
57	15.00%	10.00%
58	15.00%	10.00%
59	15.00%	10.00%
60	15.00%	10.00%
61	15.00%	10.00%
62	15.00%	10.00%
63	15.00%	10.00%
64	15.00%	10.00%
65+	20.00%	30.00%

Table 15

Disability Rates

Age	Rate	Age	Rate
15	0.03%	45	0.10%
16	0.03%	46	0.10%
17	0.03%	47	0.10%
18	0.03%	48	0.10%
19	0.03%	49	0.10%
20	0.03%	50	0.12%
21	0.03%	51	0.12%
22	0.03%	52	0.12%
23	0.03%	53	0.12%
24	0.03%	54	0.12%
25	0.03%	55	0.25%
26	0.03%	56	0.25%
27	0.03%	57	0.25%
28	0.03%	58	0.25%
29	0.03%	59	0.25%
30	0.03%	60	0.35%
31	0.03%	61	0.35%
32	0.03%	62	0.35%
33	0.03%	63	0.35%
34	0.03%	64	0.35%
35	0.06%	65+	0.00%
36	0.06%		
37	0.06%		
38	0.06%		
39	0.06%		
40	0.10%		
41	0.10%		
42	0.10%		
43	0.10%		
44	0.10%		

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.)
- ☒ a single-employer plan
- ☐ a DFE (specify) _____

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 12/31/1943

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)

CROWN CORK & SEAL COMPANY, INC.

770 TOWNSHIP LINE ROAD

YARDLEY PA 19067

2b Employer Identification Number (EIN) 23-1526444

2c Plan Sponsor's telephone number 215-698-5100

2d Business code (see instructions) 332900

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	[signature]	10/13/26	ALFRED J. DERMODY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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
CROWN CORK & SEAL COMPANY, INC. PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
CROWN CORK & SEAL COMPANY, INC.

D Employer Identification Number (EIN)
23-1526444

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**	192,432,452
b Actuarial value	**2b**	192,432,452

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	40	5,088,126	5,088,126
b For terminated vested participants	165	11,369,355	11,369,355
c For active participants	2,279	147,533,633	151,878,377
d Total	2,484	163,991,114	168,335,858

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**	5.41%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	13,931,822
b Expected plan-related expenses	**6b**	1,263,304
c Target normal cost	**6c**	15,195,126

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

Joseph C. Snell JCS
Signature of actuary

10/02/2026
Date

Joseph C. Snell
Type or print name of actuary

2605878
Most recent enrollment number

AON CONSULTING, INC.
Firm name

610-834-2100
Telephone number (including area code)

MSC# 17833
PO Box 7505
Fort Washington PA 19034
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	24,214,303
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	24,214,303
10	Interest on line 9 using prior year's actual return of 7.72%	0	1,869,344
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		9,527,277
	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 5.09%		484,938
	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		10,012,215
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	18,000,000
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	8,083,647

Part III Funding Percentages

14	Funding target attainment percentage	14	109.51%
15	Adjusted funding target attainment percentage	15	102.68%
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	102.12%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

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

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

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

21 Discount rate:

a Segment rates:

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

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	15,195,126
b Excess assets, if applicable, but not greater than line 31a	31b	15,195,126

32 Amortization installments:

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

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0

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

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

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

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

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

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

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

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

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

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

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	1,634,348	244,470	442,034	2,320,852
2026	2,894,332	377,409	433,811	3,705,552
2027	4,111,736	440,277	424,294	4,976,307
2028	5,239,248	514,520	414,828	6,168,596
2029	6,313,117	620,665	405,374	7,339,156
2030	7,295,359	662,747	395,891	8,353,997
2031	8,183,413	689,263	386,340	9,259,016
2032	8,918,418	697,582	376,681	9,992,681
2033	9,625,088	714,142	366,878	10,706,108
2034	10,243,116	736,704	356,894	11,336,714
2035	10,777,521	776,269	346,700	11,900,490
2036	11,225,487	796,289	336,268	12,358,044
2037	11,623,156	823,747	325,572	12,772,475
2038	11,984,683	862,134	314,590	13,161,407
2039	12,222,552	868,997	303,297	13,394,846
2040	12,459,492	878,539	291,669	13,629,700
2041	12,609,273	877,742	279,677	13,766,692
2042	12,705,706	883,119	267,290	13,856,115
2043	12,720,438	890,439	254,480	13,865,357
2044	12,758,634	886,389	241,219	13,886,242
2045	12,770,529	874,175	227,488	13,872,192
2046	12,640,272	859,950	213,281	13,713,503
2047	12,501,878	839,561	198,612	13,540,051
2048	12,276,661	812,177	183,515	13,272,353
2049	12,045,709	787,907	168,063	13,001,679
2050	11,769,116	762,440	152,380	12,683,936
2051	11,449,611	731,230	136,641	12,317,482
2052	11,095,617	709,656	121,057	11,926,330
2053	10,710,825	675,743	105,874	11,492,442
2054	10,335,352	647,039	91,352	11,073,743
2055	9,899,325	621,111	77,716	10,598,152
2056	9,486,757	590,107	65,165	10,142,029
2057	9,020,206	562,788	53,840	9,636,834
2058	8,552,490	536,009	43,819	9,132,318
2059	8,073,131	503,968	35,131	8,612,230

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2060	7,581,206	472,589	27,743	8,081,538
2061	7,091,365	439,092	21,585	7,552,042
2062	6,624,723	408,272	16,552	7,049,547
2063	6,168,277	378,529	12,520	6,559,326
2064	5,722,043	349,026	9,353	6,080,422
2065	5,303,941	321,028	6,913	5,631,882
2066	4,895,604	294,530	5,067	5,195,201
2067	4,510,521	269,528	3,696	4,783,745
2068	4,143,604	246,010	2,694	4,392,308
2069	3,793,865	223,969	1,971	4,019,805
2070	3,467,385	203,397	1,456	3,672,238
2071	3,161,482	184,278	1,091	3,346,851
2072	2,876,263	166,595	833	3,043,691
2073	2,610,682	150,314	648	2,761,644
2074	2,363,762	135,386	513	2,499,661

Schedule SB Attachment (Form 5500)—2025 Plan Year

Crown Cork & Seal Company, Inc. Pension Plan

EIN: 23-1526444 PN: 001

Schedule A

Crown Cork & Seal Company, Inc. Pension Plan — Non-Organized Locations

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
11	Arden	01/01/1986	N/A	Closed	$17.00 times service from 01/01/1986.	65/5	65/5	55/15
12	Batesville	01/01/1992	N/A	Closed March 2024	Effective 04/01/2014, $27.00 times years of service. Effective 04/01/2016, $29.00 times years of service. Effective 04/01/2017, $30.00 times years of service. Effective 04/01/2018, $31.00 times years of service. Effective 04/01/2019, $32.00 times years of service. Effective 04/01/2020, $33.00 times years of service. Effective 04/01/2022, $34.00 times years of service. Effective 04/01/2023, $35.00 times years of service.	65/5	65/5	55/15
22	Cheraw	10/30/1979	N/A	Ongoing	Effective 04/01/2012, $29.00 times years of service. Effective 04/01/2016, $31.00 times years of service. Effective 04/01/2017, $32.00 times years of service. Effective 04/01/2019, $33.00 times years of service. Effective 04/01/2020, $34.00 times years of service. Effective 04/01/2021, $35.00 times years of service. Effective 04/01/2022, $36.00 times years of service. Effective 04/01/2023, $37.00 times years of service. Effective 04/01/2024, $38.00 times years of service. Effective 04/01/2025, $39.00 times years of service.	65/5	65/5	55/15
27	Crawfordsville	10/31/1963	N/A	Ongoing	($1.50 times period of participation) + (0.85% times (average monthly compensation – $400) times period of participation), minimum benefit of $25 per month.	65/0	65/0	60/5

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
37	Hanover	07/01/1998	N/A	Ongoing	Service Period Benefit Multiplier Before 04/01/2011 $24.00 04/01/2011 to 03/31/2016 $25.00 04/01/2016 to 03/31/2017 $27.00 04/01/2017 to 03/31/2018 $29.00 04/01/2018 to 03/31/2019 $33.00 04/01/2019 to 03/31/2020 $35.00 04/01/2020 to 03/31/2021 $36.00 04/01/2021 to 03/31/2022 $37.00 04/01/2022 to 03/31/2023 $38.00 04/01/2023 to 03/31/2025 $39.00 04/01/2025 and after $40.00	65/5	65/5	55/15
45	Dubuque	06/01/2020	N/A	Ongoing	Effective 06/01/2020, $37.00 times years of service Effective 04/01/2025, $38.00 times years of service	65/5	65/5	55/15

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
47	Winter Garden	01/01/1984	N/A	Ongoing	Benefit level based on the following: **Effective 4/1/16** **Grade** / **Benefit Multiplier** 1–2 / $30.00 3–4 / $31.00 5–6 / $32.00 7–10 / $33.00 **Effective 4/1/17, for service earned prior to 4/1/18** **Grade** / **Benefit Multiplier** 1–2 / $31.00 3–4 / $32.00 5–6 / $33.00 7–10 / $34.00 **Effective 4/1/18 for service earned after 4/1/18** **Grade** / **Benefit Multiplier** 1–2 / $32.00 3–4 / $33.00 5–6 / $34.00 7–10 / $35.00	65/5	65/5	55/10
51	Titusville	04/01/1995	N/A	Closed	$8.00 times service from 06/01/1991.	65/5	65/5	55/15

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Computation Method	Reduction	30-Year	Magic Numbers	Disability
11	Arden	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit offset by Workers' Compensation and Social Security.
12	Batesville	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability.
22	Cheraw	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability.
27	Crawfordsville	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	N/A
37	Hanover	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability.
45	Dubuque	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability.
47	Winter Garden	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability.
51	Titusville	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit offset by Workers' Compensation and Social Security.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
11	Arden	N/A	Life, 50%, 75%, 100%	N/A	1 year	Service with Carolina Can counts for eligibility and vesting purposes.
12	Batesville	N/A	Life, 25%, 50%, 75%, 100%	N/A	1 year	
22	Cheraw	N/A	Life, 50%, 75%, 100%	N/A	1 year	
27	Crawfordsville	N/A	Life, 50, 75%, 100%	N/A	1 year	
37	Hanover	N/A	Life, 50%, 75%, 100%	N/A	N/A	
45	Dubuque	N/A	Life, 50%, 75%, 100%	N/A	N/A	
47	Winter Garden	N/A	Life, 50%, 66⅔%, 75%, 100%, 5 C&C, 10 C&C, 15 C&C	N/A	N/A	Late retirement factors also apply. Count hours for benefit accruals.
51	Titusville	N/A	Life, 50, 75%, 100%	N/A	1 year	

Crown Cork & Seal Company, Inc. Pension Plan — Organized Locations

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
89	Sandston	01/01/1992	N/A	Closed	1/12 of the sum of: (1.1% times (the lower of final average earnings or covered compensation) times years of service from 11/01/1991) + (1.5% times (final average earnings – covered compensation) times (years of service from 11/01/1991) + Tredegar accrued benefit.	65/5	60/10 or 65/5	55/10
143	Northern Engineering	01/01/1992	N/A	Closed	$15.00 times years of service.	65/5	65/5	55/15
1	Philadelphia	06/30/1956	IAM Local 159 and SMW Local 266	Closed	IAM Local 159: $24.50 times years of service. SMW Local 266: $26.50 times years of service.	65/0	65/0	55/15
3	Winchester	06/30/1956	IAM Lodge 10	Frozen	$32.50 times years of service. No additional benefit service after 03/31/2014. Benefit accruals earned for the period 01/01/2004 through 03/31/2004 are offset by benefit accruals from the IAM multiemployer plan.	65/0	65/0	55/15

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit		Normal Retire	Full Retire	Early Retire
6	Decatur	01/01/1997	SMW Local 218	Closed March 2024	**Service Period**	**Benefit Multiplier**	65/5	65/5	55/15
					Before 01/01/2000	$10.00			
					01/01/2000 to 12/31/2000	$13.00			
					01/01/2001 to 12/31/2005	$18.00			
					01/01/2006 to 12/31/2008	$21.00			
					01/01/2009 to 12/31/2010	$23.00			
					01/01/2011 to 12/31/2017	$26.00			
					01/01/2018 to 12/31/2018	$27.00			
					01/01/2019 to 12/31/2020	$29.00			
					01/01/2021 Onward	$32.00			

Plant Number	Location	Computation Method	Reduction	30-Year	Magic Numbers	Disability
89	Sandston	Elapsed Time Method	7/12% for each month before full retirement.	N/A	N/A	15 years of service. Accrued benefit offset by Workers' Compensation and Social Security.
143	Northern Engineering	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit offset by Workers' Compensation and Social Security.
1	Philadelphia	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	Yes[1]	70/75	15 years of service. Factor = $6.00. At least $100.00 but no more than $200.00.
3	Winchester	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	Yes	N/A	15 years of service. Accrued benefit offset by Social Security.
6	Decatur	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability reduced by Workers' Compensation.

[1] Subject to non-compete agreement.

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
89	Sandston	N/A	Life, 50%, 75%, 100%	N/A	1 year	Temporary benefit payable for early retirement with 15 years of service. Normal form for the Tredegar piece is 5 C&C. Service with Tredegar counts for eligibility and vesting purposes.
143	Northern Engineering	N/A	Life, 50%, 75%, 100%	N/A	1 year	Years of service before Crown subsidiary counts for eligibility and vesting purposes. For benefit accrual, the following schedule applies: **Service On Acquisition** — **Credit Given** 0–10 — Service on Acquisition 10 but not 20 — 10 20 or more — 0
1	Philadelphia	N/A	Life, 50%, 75%, 100%	N/A	1 year—Layoff 2 year—Medical	2 years creep for eligibility only. Special Window.
3	Winchester	N/A	Life, 50%, 75%, 100%	N/A	2 years	
6	Decatur	N/A	Life, 50%, 75%, 100%	N/A	1 year	

<table>
<tr><th>Plant Number</th><th>Location</th><th>Plan Effective Date</th><th>Union</th><th>Status</th><th>Monthly Benefit</th><th>Normal Retire</th><th>Full Retire</th><th>Early Retire</th></tr>
<tr><td>13</td><td>Pulaski Park</td><td>01/23/1997 (Previously part of USWA Master)</td><td>USWA</td><td>Ongoing</td><td>For future years only (step):
Service from 01/23/1997 $16.00
Service from 01/01/2001 $17.00
Service from 12/04/2006 $21.50
Service from 05/01/2008 $26.50
Service from 01/01/2010 $30.00
Service from 01/01/2013 $34.00

Grandfathered benefit for those hired before 01/23/1997:

<table><tr><th>Grade</th><th>Benefit Multiplier</th></tr><tr><td>1</td><td>$38.15</td></tr><tr><td>2–3</td><td>$38.80</td></tr><tr><td>4</td><td>$40.15</td></tr><tr><td>5</td><td>$40.80</td></tr><tr><td>6–7</td><td>$41.50</td></tr></table></td><td>65/5</td><td>65/5

Grand-fathered benefit: 62/10 or 65/5</td><td>55/15

Grand-fathered benefit: 55/10</td></tr>
<tr><td>14</td><td>Seattle</td><td>06/01/1950</td><td>IBT Local 117</td><td>Ongoing</td><td><table><tr><th>Service Period</th><th>Benefit Multiplier</th></tr><tr><td>Before 1/1/2011</td><td>$28.00</td></tr><tr><td>1/1/2011 to 12/31/2013</td><td>$31.00</td></tr><tr><td>1/1/2014 to 12/31/2018</td><td>$34.00</td></tr><tr><td>1/1/2019 Onward</td><td>$37.00</td></tr></table></td><td>65/5</td><td>62/10 or 65/5</td><td>60/10</td></tr>
<tr><td>15</td><td>Spartanburg</td><td>11/01/1978</td><td>IBT Local 28</td><td>Ongoing</td><td><table><tr><th>Service Period</th><th>Benefit Multiplier</th></tr><tr><td>Before 12/31/2013</td><td>$25.50</td></tr><tr><td>01/01/2014 to 12/31/2020</td><td>$29.00</td></tr><tr><td>01/01/2014 to 12/31/2020</td><td>$29.00</td></tr><tr><td>01/01/2021 to 12/31/2025</td><td>$32.00</td></tr><tr><td>01/01/2026 Onward</td><td>$38.00</td></tr></table></td><td>65/0</td><td>65/0</td><td>55/15</td></tr>
<tr><td>17</td><td>Baltimore</td><td>06/30/1956</td><td>IAM Local 1672</td><td>Closed</td><td>$26.50 times years of service (accruals stop on 10/01/1998).</td><td>65/0</td><td>65/0</td><td>55/15</td></tr>
</table>

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
18	Baltimore	Closed	GCIU Local 582	Closed	$18.00 times years of service.	65/0	65/0	55/15
20	N. Bergen	02/01/1964	SMW Local 28	Closed	$21.50 times years of service.	65/0	65/0	55/10

<table>
<tr><th>Plant Number</th><th>Location</th><th>Computation Method</th><th>Reduction</th><th>30-Year</th><th>Magic Numbers</th><th>Disability</th></tr>
<tr><td>13</td><td>Pulaski Park</td><td>Elapsed Time Method</td><td>5/9% per month to age 60, 5/18% per month thereafter.

Grandfathered benefit:

<table><tr><th>Age</th><th>Factor</th></tr><tr><td>55</td><td>0.556</td></tr><tr><td>56</td><td>0.601</td></tr><tr><td>57</td><td>0.651</td></tr><tr><td>58</td><td>0.707</td></tr><tr><td>59</td><td>0.768</td></tr><tr><td>60</td><td>0.837</td></tr><tr><td>61</td><td>0.914</td></tr><tr><td>62</td><td>1.000</td></tr></table></td><td>Grand-fathered benefit: Yes</td><td>Grandfathered benefit: 70/75. Rule Of 65. Supplement of $365.00 payable until eligibility for Social Security supplement reduced by outside earnings for Rule of 65. DVB lump sum eligible.</td><td>15 years of service. Accrued benefit at date of disability.

Grandfathered benefit: 10 years of service. Supplement is offset by Social Security.</td></tr>
<tr><td>14</td><td>Seattle</td><td>Elapsed Time Method</td><td>1/2% for each month before full retirement.</td><td>Yes</td><td>N/A</td><td>10 years of service. Supplement of $365.00 offset by Social Security.</td></tr>
<tr><td>15</td><td>Spartanburg</td><td>Elapsed Time Method</td><td>5/9% per month to age 60, 5/18% per month thereafter.</td><td>N/A</td><td>N/A</td><td>15 years of service. Accrued benefit offset by Social Security.</td></tr>
<tr><td>17</td><td>Baltimore</td><td>Elapsed Time Method</td><td>5/9% per month to age 60, 5/18% per month thereafter.</td><td>Yes[1]</td><td>70/75. Supplement of $230.00 payable until eligible for unreduced Social Security.</td><td>10 years of service. Supplement of $230.00 offset by unreduced Social Security.</td></tr>
<tr><td>18</td><td>Baltimore</td><td>Elapsed Time Method</td><td>5/9% per month to age 60, 5/18% per month thereafter.</td><td>Yes[1]</td><td>N/A</td><td>15 years of service. Factor = $14.00. At least $50.00 but no more than $75.00.</td></tr>
<tr><td>20</td><td>N. Bergen</td><td>Elapsed Time Method</td><td>1/2% per month before full retirement.</td><td>Yes with age 55</td><td>N/A</td><td>15 years of service. 60% of accrued benefit until NRD.</td></tr>
</table>

[1]Subject to non-compete agreement.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
13	Pulaski Park	Grand-fathered benefit: $132.50	Life, 50%, 75%, 100%	Grandfathered benefit: Yes 520/560 hours	Grandfathered benefit: 2 years	Employees hired before 01/23/1997 are grandfathered in the different USW Plan benefit, as specified.
14	Seattle	N/A	Life, 50%, 75%, 100%	520/560 hours	2 years	Certain employees are grandfathered under IAM Master.
15	Spartanburg	N/A	Life, 50%, 75%, 100%	N/A	2 years	
17	Baltimore	Yes $100.00	Life, 50%, 75%, 100%	520 hours	2 years	SIB is paid in addition to joint and survivor.
18	Baltimore	N/A	Life, 50%, 75%, 100%	N/A	2 years	
20	N. Bergen	N/A	Life, 50%, 75%, 100%	N/A	1 year	

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit		Normal Retire	Full Retire	Early Retire
21	Oshkosh	01/01/1992	IAM Local 30	Ongoing	**Service Period**	**Benefit Multiplier**	65/0	65/0	55/15
					Before 01/01/2013	$25.00			
					01/01/2013 to 12/31/2016	$33.00			
					01/01/2017 to 12/31/2024	$37.00			
					01/01/2025 to 12/31/2027	$41.00			
					After 12/31/2027	$45.00			
29	Puerto Rico	01/01/1993	Movimento Solidario Sindical	Ongoing	Effective 01/01/2002: $22.00 times years of service.		65/5	65/5	55/15
38	Fairless Hills	06/30/1956	SMW Local 266	Closed	$27.50 times years of service.		65/0	65/0	55/15
40	Omaha	06/01/1960	GCIU Local 543	Ongoing	If hired before 09/03/1985, years of service times $29.00. If hired on or after 09/03/1985, years of service times $25.25.		65/5	62/15 or 65/5	60/15
48	Orlando	01/01/1984	USWA Local 6206	Closed	$21.00 times years of service.		65/0	65/0	55/10
49	Plymouth	01/01/1984	USWA Local 7565	Closed	$21.00 times years of service.		65/0	65/0	55/10
50	Metals	01/01/1984	USWA Local 7565	Closed	$24.00 times years of service.		65/0	65/0	55/10

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit		Normal Retire	Full Retire	Early Retire
52	Toledo	04/01/1993	USWA Local 7238	Ongoing	**Service Period**	**Benefit Multiplier**	65/5	65/5	55/15
					Before 05/01/1994	$9.00			
					05/01/1994–04/30/1995	$10.00			
					05/01/1995–04/30/1996	$11.00			
					05/01/1996–06/30/1997	$13.00			
					07/01/1997–12/31/1997	$13.50			
					01/01/1998–12/31/1998	$14.00			
					01/01/1999–05/31/2004	$14.50			
					06/01/2004–05/31/2012	$30.00			
					06/01/2012–05/31/2014	$35.00			
					06/01/2014–05/31/2017	$38.00			
					06/01/2017–05/31/2018	$39.00			
					06/01/2018–05/31/2019	$40.00			
					06/01/2019–05/31/2020	$42.00			
					06/01/2020–05/31/2021	$43.00			
					06/01/2021–05/31/2022	$44.00			
					06/01/2022–05/31/2025	$45.00			
					06/01/2025 onward	$48.00			
53	Arlington	01/01/1993	URW Local 865	Closed	$16.00 times years of service on or after 12/11/1992 to 02/29/1996, plus $17.00 times years of service from 03/01/1996 to 02/28/1998, plus $18.00 times years of service on or after 03/01/1998.		65/5	65/5	55/10

Plant Number	Location	Computation Method	Reduction	30-Year	Magic Numbers	Disability
21	Oshkosh	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit offset by Social Security.
29	Puerto Rico	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	10 years of service. Accrued benefit offset by Social Security.
38	Fairless Hills	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	Yes	70/75	15 years of service. Factor = $6.00. At least $100.00 but no more than $200.00.
40	Omaha	Elapsed Time Method	1/2% per month before full retirement.	Yes[1]	Special Early (75/80). Supplement of $130.00 payable until eligible for Social Security.	15 years of service. Accrued benefit at date of disability. Supplement of $130.00 offset by Social Security.
48	Orlando	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	No service requirement. Accrued benefit at date of disability.
49	Plymouth	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	No service requirement. Accrued benefit at date of disability.
50	Metals	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	No service requirement. Accrued benefit at date of disability.
52	Toledo (Nationwide Coil Coating)	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit at date of disability. Minimum $200.00.
53	Arlington	Elapsed Time Method	1/2% per month before full retirement.	N/A	N/A	10 years of service. Accrued benefit at date of disability. Benefit offset by Workers' Compensation.

[1] Subject to non-compete agreement.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
21	Oshkosh	N/A	Life, 50%, 75%, 100%	N/A	20 months	
29	Puerto Rico	N/A	Life, 50%, 75%, 100%	N/A	1 year	
38	Fairless Hills	N/A	Life, 50%, 75%, 100%	N/A	1 year — Layoff 2 year — Medical	2 years creep for eligibility only.
40	Omaha	Yes $107.50	Life, 50%, 75%, 100%	520 hours	2 years	
48	Orlando	N/A	Life, 50%, 66⅔%, 75%, 100%, 5 C&C, 10 C&C, 15 C&C	N/A	N/A	Late retirement factors also apply; count hours for percentage of benefit accrued; different factor if employed by Automated Container; may elect distribution at NRD while active.
49	Plymouth	N/A	Life, 50%, 66⅔%, 75%, 100%, 5 C&C, 10 C&C, 15 C&C	N/A	N/A	Late retirement factors also apply; count hours for percentage of benefit accrued; different factor if employed by Automated Container; may elect distribution at NRD while active.
50	Metals	N/A	Life, 50%, 66⅔%, 75%, 100%, 5 C&C, 10 C&C, 15 C&C	N/A	N/A	Late retirement factors also apply; count hours for percentage of benefit accrued; different factor if employed by Automated Container; may elect distribution at NRD while active.
52	Toledo (Nationwide Coil Coating)	N/A	Life, 50%, 75%, 100%	N/A	1 year	
53	Arlington	N/A	Life, 50%, 75%, 100%	N/A	2 years	Service from Kerr counts for eligibility and vesting.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
71	Walla Walla	06/01/1950	IBT Local 556	Frozen	$24.50 times years of service. Benefit accruals frozen as of 03/31/1996.	65/5	62/10 or 65/5	60/10
73	St. Louis	06/01/1950	GCIU Local 505	Closed	$23.50 times years of service before 10/01/1982 plus $27.50 times years of service on or after 10/01/1982.	65/5	62/10 or 65/5	60/10
82	Dayton	06/01/1950	IUE Local 804	Ongoing	**Service Period** / **Benefit Multiplier** Before 1/1/2013 — $28.00 01/01/2013 to 12/31/2017 — $31.00 01/01/2018 to 12/31/2020 — $34.00 01/01/2021 to 12/31/2023 — $37.00 01/01/2024 to 12/31/2024 — $39.00 01/01/2025 Onward — $41.00	65/5	65/5	60/15
83	Union City	05/16/1983	USWA Local 7631	Closed	Service only from 05/16/1983. Based on Group Class: **Group** / **Rate** 1 — $28.25 2 — $29.25 3 — $30.25 4 — $31.25 5 — $32.25	65/5	62/10 or 65/5	60/10

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit		Normal Retire	Full Retire	Early Retire
84	Owatonna	01/01/1998	IAM	Ongoing	**Service Period**	**Benefit Multiplier**	65/5	65/5	55/15
					Before 12/31/2009	$22.00			
					01/01/2010 to 12/31/2012	$25.00			
					01/01/2013 to 12/31/2015	$28.00			
					01/01/2016 to 03/31/2019	$32.00			
					04/01/2019 to 03/31/2022	$33.00			
					04/01/2022 to 03/31/2023	$34.00			
					04/01/2023 to 03/31/2024	$35.00			
					04/01/2024 onward	$36.00			
87	Portland	06/01/1950	IBT Local 206	Frozen	Years of service times $26.00. Benefit accruals are frozen as of 07/31/1995.		65/5	62/10 or 65/5	60/10

Plant Number	Location	Computation Method	Reduction	30-Year	Magic Numbers	Disability
71	Walla Walla	Elapsed Time Method	1/2% per month before full retirement.	Yes	Special Early (75/80). Supplement of $365.00 payable until eligible for Social Security. Supplement is offset by any outside earnings.	10 years of service. Accrued benefit at date of disability. Supplement of $365.00 offset by Social Security.
73	St. Louis	Elapsed Time Method	1/2% per month before full retirement.	Yes[1]	Special Early (75/80). Supplement of $130.00 payable until eligible for Social Security.	10 years of service. Accrued benefit at date of disability. Supplement of $130.00 is offset by Social Security.
82	Dayton	Elapsed Time Method	1/2% per month before full retirement.	N/A	Special Early (75/80). Supplement of $100.00 payable until eligible for unreduced Social Security.	15 years of service. Accrued benefit at date of disability plus supplement of $100.00 offset by unreduced old age Social Security.
83	Union City	Elapsed Time Method	1/2% per month before full retirement.	Yes	No	10 years of service. At least $250.00. Accrued benefit at date of disability plus supplement of $400.00 is offset by Social Security.
84	Owatonna	Elapsed Time Method	5/9% per month to age 60, 5/18% per month thereafter.	N/A	N/A	15 years of service. Accrued benefit without reduction.
87	Portland	Elapsed Time Method	1/2% per month before full retirement.	Yes	Special Early (75/80). Supplement of $365.00 payable until eligible for Social Security. Supplement is offset by any outside earnings.	10 years of service. Accrued benefit at date of disability plus supplement of $365.00 is offset by Social Security. Eliminated 07/31/1995.

[1] Subject to non-compete agreement.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
71	Walla Walla	$132.50	Life, 50%, 75%, 100%	520/560 hours	2 years	Transferred to multi-employer effective 03/31/1996.
73	St. Louis	N/A	Life, 50%, 75%, 100%	520/560 hours	2 years	
82	Dayton	N/A	Life, 50%, 100%	520 hours	2 years	
83	Union City	N/A	Life, 50%	Flat 400 hours	2 years	Pop-up survivor benefit; flat 5% reduction for joint and survivor; service from Kaiser counts for eligibility and vesting purposes.
84	Owatonna	N/A	Life, 50%, 100%	N/A	1 year	
87	Portland	No Eff. 7/95	Life, 50%, 100%	520/560 hours as of 7/1995	2 years	Transfer to multi-employer plan effective 07/01/1995. Service under multi-employer plan counts for eligibility purposes.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

<table>
<tr><th>Plant Number</th><th>Location</th><th>Plan Effective Date</th><th>Union</th><th>Status</th><th>Monthly Benefit</th><th>Normal Retire</th><th>Full Retire</th><th>Early Retire</th></tr>
<tr><td>94</td><td>Swedesboro</td><td>06/01/1950</td><td>IAM Local 159</td><td>Closed</td><td>((1.67% of FAE) times (years of service from 01/01/1986)) minus ((1.67% of primary Social Security benefit) times (years of service from 01/01/1986 (maximum of 30))). If retire before 65, multiply the following quotient to the offset portion of the formula: Projected service to age 65 (maximum 30) divided by projected service to age 65.</td><td>65/5</td><td>62/15 or 65/5</td><td>55/15</td></tr>
<tr><td>40
43
64
66
71
73
74
76
87</td><td>Omaha
Van Nuys (Closed)
Pocatello
LaCrosse
Walla Walla
St. Louis (Closed)
Mankato
Olympia
Portland</td><td>06/01/1950</td><td>IAM — Master</td><td>Frozen</td><td>Based on Job Classes:
<table><tr><th>JC</th><th>Current Rate</th></tr><tr><td>1–5</td><td>$26.50</td></tr><tr><td>6–9</td><td>$27.15</td></tr><tr><td>10–13</td><td>$27.80</td></tr><tr><td>14–15</td><td>$28.50</td></tr><tr><td>16–17</td><td>$29.15</td></tr><tr><td>18–19</td><td>$29.80</td></tr><tr><td>20 and over</td><td>$30.50</td></tr></table>Benefit accruals frozen as of 05/31/1996.</td><td>65/5</td><td>62/10 or 65/5</td><td>60/10</td></tr>
</table>

Plant Number	Location	Computation Method	Reduction	30-Year	Magic Numbers	Disability
94	Swedesboro	Elapsed Time Method	5/12% per month before full retirement.	N/A	Special Early (75/80)	10 years of service. Accrued benefit at date of disability.
40 43 64 66 71 73 74 76 87	Omaha Van Nuys (Closed) Pocatello LaCrosse Walla Walla St. Louis Mankato Olympia Portland	Elapsed Time Method	1/2% per month before full retirement.	Yes[2]	Special Early (65/75/80). Supplement of $365.00 payable until eligible for Social Security. Reduced by outside earnings.	10 years of service. Supplement of $365.00 offset by Social Security.

[2] Subject to non-compete agreement.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
94	Swedesboro	N/A	Life, 50%, 75%, 100%	N/A	2 years	Service with Del Monte counts for eligibility and vesting purposes. Benefit service counts only from 01/01/1986.
40 43 64 66 71 73 74 76 87	Omaha Van Nuys (Closed) Pocatello LaCrosse Walla Walla St. Louis Mankato Olympia Portland	Yes $132.50	Life, 50%, 75%, 100%	Yes 520/560 hours	2 years	Transfer to multi-employer plan effective 06/01/1996.

Schedule SB Attachment (Form 5500)—2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Plan Effective Date	Union	Status	Monthly Benefit	Normal Retire	Full Retire	Early Retire
2 5 13 25 39 40 54 67 68 73 95	Worland Salisbury Pulaski Park[1] Milwaukee (Closed) Hurlock (Closed) Omaha Alsip Cincinnati (Closed) Atlanta (Closed) St. Louis (Closed) Shoreham (Closed)	CBP Locations — 06/01/1950 Crown Original Locations— 06/30/1956	USWA — Master	Frozen	Based on Job Classes: JC(H) / JC(S) / Rate 1–5 / 0–2 / $38.00 6–9 / 3–4 / $38.65 10–13 / 5–6 / $39.30 14–15 / 7 / $40.00 16–17 / 8 / $40.65 18–19 / 9 / $41.30 20 & Over / 10 & Over / $42.00 Benefit accruals frozen as of 11/01/2004.	65/5	62/10 or 65/5	55/10

[1] USWA Master until 01/23/1997.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	Computation Method	Reduction		30-Year	Magic Numbers	Disability
2	Worland	Elapsed Time Method	**Age**	**Factor**	Yes[7]	70/75[1]. Rule of 65. Supplement of $365.00 payable until eligible for Social Security. Supplement is reduced by outside earnings for Rule of 65. If shutdown, DVBs with 17 years of service on last day worked are eligible for a lump sum benefit buyout.	10 years of service. Accrued benefit at date of disability plus supplement of $365.00 offset by Social Security.
5	Salisbury		55	0.556			
13	Pulaski Park		56	0.601			
25	Milwaukee (Closed)		57	0.651			
39	Hurlock (Closed)		58	0.707			
40	Omaha		59	0.768			
54	Alsip		60	0.837			
67	Cincinnati (Closed)		61	0.914			
68	Atlanta (Closed)		62	1.000			
73	St. Louis (Closed)						
95	Shoreham (Closed)						

[7] Subject to non-compete agreement.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Plant Number	Location	SIB	Options	Allowance	Continued Service	Notes
2 5 13 25 39 40 54 67 68 73 95	Worland Salisbury Pulaski Park Milwaukee (Closed) Hurlock (Closed) Omaha Alsip Cincinnati (Closed) Atlanta (Closed) St. Louis (Closed) Shoreham (Closed)	Yes $132.50	Life, 50%, 75%, 100%	Yes 520/560	2 years	#25 Milwaukee — certain employees have annuity offset; grandfathering provisions exist for former CCC employees — greater of benefit accrual on 03/01/1993 using CCC actuarial factors or all service using CC&S actuarial factors.

Schedule SB Attachment (Form 5500) —2025 Plan Year

Crown Cork & Seal Company, Inc. Pension Plan

EIN: 23-1526444 PN: 001

Schedule B

Schedule SB Attachment (Form 5500) —2025 Plan Year

Crown Cork & Seal Company, Inc. Pension Plan

EIN: 23-1526444 PN: 001

Crown Cork & Seal Company, Inc. Pension Plan Prior Employment Benefits

Prior Company	Eligible Participants	Service Credited By Crown Cork & Seal, Inc.	Notes
Carolina Can	Salaried Carolina Can employees as of 01/01/1986.	Benefit service is credited from 01/01/1986. Vesting and eligibility service are credited from the original Carolina Can hire date.	
Del Monte Corp. at Ridgefield Park Plant	Salaried Del Monte employees as of 06/01/1983 at Ridgefield Plant.	Benefit service is credited from 06/01/1983. Vesting and eligibility service are credited from the original Del Monte hire date.	1
Del Monte Corp. at Swedesboro Plant	Salaried Del Monte employees as of 01/01/1986 at Swedesboro Plant.	Benefit service is credited from 01/01/1986. Vesting and eligibility service are credited from the original Del Monte hire date.	1
Figgie International	Continental Salaried employees as of 09/30/1988 who became employees of Figgie International.	Benefit service is credited up to 09/30/1988. Vesting and eligibility service are credited for service after 10/01/1988 with Figgie International.	2
Kaiser Aluminum & Chemical Corp.	Salaried Kaiser Aluminum employees as of 05/16/1983.	Benefit service is credited from 05/16/1983. Vesting and eligibility service are credited from the original Kaiser Aluminum hire date.	1
Kerr Glass Manufacturing Corp.	Salaried Kerr Glass employees as of 12/11/1992.	Benefit service is credited from 12/11/1992. Vesting and eligibility service are credited from the original Kerr Glass hire date.	
La Warre Precision Technologies, Inc.	Salaried La Warre employees as of 06/01/1991.	Benefit service is credited from 06/01/1991. Vesting and eligibility service are credited from the original La Warre Precision hire date.	
Tri-Valley Growers	Salaried Tri-Valley employees as of 01/01/1995.	Benefit service is credited from 01/01/1995. Vesting and eligibility service are credited from the original Tri-Valley hire date.	
United Can Co. at Perrysburg Plant	Salaried United Can Co. employees as of 04/26/1974 at Perrysburg Plant.	Benefit, vesting and eligibility service are all credited from the original United Can Co. hire date. Benefit is offset by vested United Can benefit.	
United Can Co. at La Mirada Plant	Salaried United Can Co. employees as of 05/04/1974 at La Mirada Plant.	Benefit, vesting and eligibility service are all credited from the original United Can Co., hire date. Benefit is offset by vested United Can benefit.	
United States Can Co.	Continental Salaried employees as of 12/31/1987 who became employees of United States Can Co.	Benefit service is credited up to 12/31/1987. Vesting and eligibility service are credited for service after 01/01/1988 with United States Can Co.	2
Western Can Co.	Salaried Western Can Co. employees as of 07/01/1986.	Benefit service is credited from 07/01/1986. Vesting and eligibility service are credited from the original Western Can Co. hire date. Accrued WesCan, Inc. benefit as of 07/01/1986 is 100% vested.	1

Notes:

(1) Original acquisition made by CBP which was then acquired by Crown on 07/15/1990. Benefits are calculated in accordance with the CBP prior plan, where applicable.

(2) These are groups which were sold by CBP. Benefits are payable under the terms of the CBP Plan which was in effect at the time.

Retirement Benefits

<table>
<tr><th>Plan</th><th>Normal</th><th>Early</th><th>All Other</th></tr>
<tr>
<td>Continental Beverage Packaging Inc.</td>
<td>Basic: 1⅔% FAE times benefit service less 1⅔%. Social Security benefit times benefit service up to 30 years plus the cash balance benefit. The Social Security benefit was frozen as of 12/31/1987.
Minimum:
$15 per month for each year of continuous service.
Additional benefit for participants who contributed to Supplemental Plan:
Supplemental Benefit:
(1) + (2) + (3):
(1) 0.75% x (FAE – $4,800) x SVC from 1/1964 to 1,75; plus
(2) 0.25% x (FAE – $4,800) x SVC after 1/1964; plus
(3) 0.25% x (FAE – $4,800) x SVC prior to 1/1964 from time first eligible for membership, but not before 09/01/1950.</td>
<td>Schedule of Early Retirement Reductions:
<table><tr><th rowspan="2">Benefit Amount</th><th colspan="3">Type of Early Retirement</th></tr><tr><th>Unreduced</th><th>Partially Reduced</th><th>Reduced</th></tr><tr><td colspan="4">The sum of (1) + (2) + (3) + (4):</td></tr><tr><td>(1) Cash Balance benefit;</td><td colspan="3">Actuarial Equivalent Benefit</td></tr><tr><td>(2) The prior plan benefit derived from service prior to 12/31/1984;</td><td>None</td><td>None</td><td>5% per year</td></tr><tr><td>(3) The prior plan benefit derived from service from 01/01/1985 to 12/31/1987;</td><td>None</td><td>5% per year</td><td>5% per year</td></tr><tr><td>(4) The Prior Plan benefit derived from pay increases subsequent to 12/31/1987.</td><td colspan="3">For all three types, this part of the benefit is reduced according to a fixed schedule. Sample early retirement factors are as follows:
<table><tr><th>Age</th><th></th><th>Age</th><th></th></tr><tr><td>65</td><td>1.000</td><td>59</td><td>0.502</td></tr><tr><td>63</td><td>0.787</td><td>57</td><td>0.406</td></tr><tr><td>61</td><td>0.626</td><td>55</td><td>0.331</td></tr></table></td></tr></table></td>
<td>Same as the Crown Cork & Seal Salaried Plan.</td>
</tr>
</table>

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

<table>
<tr><th>Plan</th><th>Normal</th><th>Early</th><th>All Other</th></tr>
<tr><td>Continental Can (CCIC)</td><td>Same as Continental Beverage Packaging Inc.</td><td>Same as Continental Beverage Packaging Inc.</td><td>Same as Continental Beverage Packaging Inc.</td></tr>
<tr><td>Citrus Central</td><td>31% times FAE times accrued benefit adjustment times short service percent, less any earned hourly plan benefit.</td><td>Benefits which commence prior to age 65 are reduced according to the following schedule:
<table><tr><th>Number of Years Retired Early</th><th>Percentage of Earned Benefit</th><th>Number of Years Retired Early</th><th>Percentage of Earned Benefit</th></tr><tr><td>1</td><td>93%</td><td>6</td><td>63%</td></tr><tr><td>2</td><td>86%</td><td>7</td><td>60%</td></tr><tr><td>3</td><td>80%</td><td>8</td><td>56%</td></tr><tr><td>4</td><td>73%</td><td>9</td><td>53%</td></tr><tr><td>5</td><td>66%</td><td>10</td><td>50%</td></tr></table></td><td>Same as the Crown Cork & Seal Salaried Plan.</td></tr>
<tr><td>H-C Industries</td><td>($18 + 0.6% times (FAE – $4,800)) times benefit service through 03/31/1989.</td><td>Same as the Crown Cork & Seal Salaried Plan.</td><td>Same as the Crown Cork & Seal Plan.</td></tr>
<tr><td>Tredegar Industries</td><td>Accrued benefit at date of acquisition as shown on Schedule 2 of Rider No. 6 of Crown Cork & Seal Salaried Plan.</td><td>Accrued benefit reduced by 7/12 of 1% for each month commencement precedes age 60. Temporary Supplement is paid until age 62 or death. The benefit supplement is calculated according to the following schedule:
<table><tr><th rowspan="2">Monthly Amount Per Year of Service</th><th colspan="2">Age at Early Retirement</th></tr><tr><th>Has Attained Age</th><th>Has Not Attained Age</th></tr><tr><td>$5.00</td><td>60</td><td>62</td></tr><tr><td>$4.60</td><td>59</td><td>60</td></tr><tr><td>$4.20</td><td>58</td><td>59</td></tr><tr><td>$3.80</td><td>57</td><td>58</td></tr><tr><td>$3.40</td><td>56</td><td>57</td></tr><tr><td>$3.00</td><td>55</td><td>56</td></tr></table></td><td>Same as the Crown Cork & Seal Salaried Plan.</td></tr>
</table>

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Eligibility Requirements

Plan	Normal	Early		All Other
Continental Beverage Packaging, Inc.	Attainment of age 65.	Unreduced Early:	Attainment of age 62 and completion of 15 years vesting service.	Same as Crown Cork & Seal Salaried Plan.
		Partially Reduced Early:	Attainment of age 55 and completion of 30 years vesting service; as of 01/01/1985 participant must be at least age 40 and have 15 years of prior employment service.	
		Reduced Early:	Attainment of age 55 and completion of five years vesting service.	
Continental Can (CCIC)	Same as Continental Beverage Packaging, Inc.	Same as Continental Beverage Packaging, Inc.		Same as Continental Beverage Packaging, Inc.
Citrus Central	Attainment of age 65.	Attainment of age 55 and completion of 10 years service.		Same as the CC&S Salaried Plan.
H-C Industries	Same as CC&S Salaried Plan.	Attainment of age 55 and completion of 15 years service, or attainment of age 60.		Same as the CC&S Salaried Plan.
Tredegar Industries	Same as CC&S Salaried Plan.	Attainment of age 55 and completion of 10 years service. Temporary Supplement: Attainment of age 55 and completion of 15 years.		Same as the CC&S Salaried Plan.

Other Definitions

Plan	Compensation	Final Average Earnings Period	Normal Form Of Payment (Single)	Participation Eligibility
Continental Beverage Packaging, Inc.	For years prior to 1991 compensation includes base, overtime and incentive comp. Effective 01/01/1991, compensation includes base pay only.	60 consecutive months of the last 120 months prior to terminations, or as of 01/01/1991 if greater.	Life annuity	Salaried employees of Continental Can Co. as of 07/15/1990.
Continental Can (CCIC)	For years prior to 08/01/1991, compensation includes base, overtime and incentive comp. Effective 08/01/1991, compensation includes base pay only.	Same as Continental Beverage Packaging, Inc.	Same as Continental Beverage Packaging, Inc.	Salaried employees of CCIC as of 05/16/1991.
Citrus Central	Calendar year total earnings.	Five years	10-year certain and continuous	Salaried employees of Citrus Central as of 03/01/1992.
H-C Industries	Calendar year W-2 pay.	10 years	Life annuity	Salaried employees of H-C Industries as of 04/01/1989 employed at the Crawfordville facility.
Tredegar Industries	Not available	Not available	5-year certain and continuous	Salaried employees of Tredegar Industries as of 11/01/1991.

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Plan	Benefit Service	Employee Contributions	Accrued Benefit Adjustment	Short Service Percentage
Continental Beverage Packaging, Inc.	Service up to 12/31/1987 is credited in determining the benefit amount under the prior plan.	Prior to 01/01/1975: 5% of compensation in excess of $400 per month.	N/A	N/A
Continental Can (CCIC)	Same as Continental Beverage Packaging, Inc.	Same as Continental Beverage Packaging, Inc.	N/A	N/A
Citrus Central	Service up to 02/28/1992 is credited in determining the benefit amount.	None	The ratio of benefit service to 02/28/1992 divided by benefit service expected at age 65, not greater than 100%.	The quotient (to two decimal places) obtained by dividing (i) the number of whole months of employment with Citrus by (ii) 120, not greater than 1.0.
H-C Industries	Service up to 03/31/1989 is credited in determining the benefit amount.	None	N/A	N/A
Tredegar Industries	Service up to 10/31/1991 is credited in determining the benefit amount.	Contributions made prior to 07/01/1970 are credited with interest at the following rates: Prior to 1977: 2% per year. 1977 through 1987:5% per year. On and after 01/01/1988: 120% of the Federal Mid-Term rate in effect each January.	N/A	N/A

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Crown Cork & Seal Company, Inc. Pension Plan
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Plan	Cash Balance Benefit
Continental Beverage Packaging, Inc.	The Cash Balance Account, effective from 01/01/1988 to 12/31/1990, was credited monthly with an amount of 3.0% of total earning for that month plus 0.5% of total earnings when the cumulative total earnings for the year exceeded the Social Security taxable wage base for the year. Interest credited to the Cash Balance Account is credited with interest on a monthly basis based on the monthly yield on 90-day commercial paper determined as of the last business day of the prior month. The Cash Balance Account is converted to an actuarially equivalent annuity, where actuarial equivalence is based on the UP84 mortality table and the PBGC lump sum interest rate plus 0.75% as in effect on the first day of the month preceding the date of determination. Effective 01/01/2012 the conversion basis is 417(e).
Continental Can (CCIC)	Same as Continental Beverage Packaging, Inc.
Citrus Central	
H-C Industries	
Tredegar Industries	

Schedule SB Attachment (Form 5500)—2025 Plan Year

Crown Cork & Seal Company, Inc. Pension Plan

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Schedule C

Schedule SB Attachment (Form 5500)—2025 Plan Year

Crown Cork & Seal Company, Inc. Pension Plan

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Plans Merged Into the Crown Cork & Seal Company, Inc. Pension Plan

Plan Number	Plan Name
003	Crown Cork & Seal Company, Inc. Hourly Pension Plan for SMW L-266 of Phila. Plt No. 1 & Fairless Hills Plt No. 38
004	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IAM Local 159 of Philadelphia Plant No. 1
005	Crown Cork & Seal Company, Inc. Hourly Pension Plan for SMW Local 28 for Former EEs of North Bergen Plant No. 20
006	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IAM Local 1672 of Baltimore Plant No. 17
007	Crown Cork & Seal Company, Inc. Hourly Pension Plan for GCIU Local 582 of Baltimore Plant No. 18
008	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IAM Lodge 10 of Winchester Plant No. 3
010	Crown Cork & Seal Company, Inc. Hourly Pension Plan for GCIU Local 582 for Former EEs of Baltimore Plant No. 10
012	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IBT Local 28 of Spartanburg Plant No. 15
013	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union EEs of Cheraw, S.C. Plant No. 22
016	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union Employees of Arden Plant No. 11
017	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union Employees of Crawfordsville Plant No. 27
022	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union Employees of Batesville Plant No. 12
023	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IBT Local 200 of Oshkosh Plant No. 21
025	Crown Cork & Seal Company, Inc. Hourly Pension Plan for USWA L-6206 Plt # 48, L-7565 Plt #49, SMW Plt #50 & N-U Plt #47
026	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union Employees of Sandston Plant No. 89
027	Crown Cork & Seal Company, Inc. Hourly Pension Plan for USWA Local 9242 of Puerto Rico Plant No. 29
028	Crown Cork & Seal Company, Inc. Hourly Pension Plan for United RCL&P Workers of America L-685 of Arlington Plt #53
029	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Non-Union EEs of Northern Engineering and Machine Corp.
30	Crown Cork & Seal Company, Inc. Hourly Pension Plan for USWA L-7238 of Nationwide Coil Coating Co., Inc. Plant No. 52
032	Crown Cork & Seal Company, Inc. Hourly Pension Plan for Certain Designated Locations
037	Crown Cork & Seal Company, Inc. Hourly Pension Plan for N-U Employees of Crown Precision Tech. at Titusville Plant No. 51
033	Crown Cork & Seal Company, Inc. Pension Plan for Employees of Van Dorn Company
034	Crown Cork & Seal Company, Inc. Hourly Pension Plan for IAM Local 233 of Solon Plant No. 55
038	Crown Cork & Seal Company, Inc. Pension Plan for Non-Salaried Employees of Risdon Corporation
040	Crown Cork & Seal Company, Inc. Pension Plan for Non-Salaried Employees of Anchor Hocking Packaging Co.

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Other Information to Fully and Fairly Disclose the Actuarial Position of the Plan

Due to software limitations with the electronic filing process, information filed electronically cannot be controlled by the Enrolled Actuary. The values on the signed Schedule SB will govern to the extent there are any differences in the entries filed electronically and the actual data contained on the signed Schedule SB.

Proprietary and Confidential

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
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Schedule SB, Part V — Summary of Plan Provisions

General Information

Plan Name	Crown Cork & Seal Company, Inc. Pension Plan
Original Effective Date	December 31, 1943
Effective Date of Last Restatement	January 1, 2021
Plan Year	January 1 to December 31
Employer Fiscal Year	January 1 to December 31
Employer ID Number	23-1526444
Plan Administrator's ID Number	23-1526444
Plan Number	001
Plan Type	Defined Benefit Pension Plan
Plan Administrator	Administrative Committee

Plan Changes Since the Prior Year

The valuation reflects the following plan changes since the prior year.

- Effective April 1, 2024, Cheraw benefit multiplier increased from $37.00 to $38.00 for all years of service.
- Effective April 1, 2024, Owatonna benefit multiplier increased from $35.00 to $36.00 for service on or after April 1, 2024
- Effective April 1, 2024, Central States Hourly Participants at Massillon benefit multiplier increased for the job levels listed below for service on or after April 1, 2024
  - Job level 2 benefit multiplier increased from $31.00 to $32.00
  - Job level 3 benefit multiplier increased from $32.00 to $33.00
  - Job level 4 benefit multiplier increased from $33.00 to $34.00
  - Job levels 5-6 benefit multiplier increased from $35.00 to $36.00
- Effective January 1, 2025, Oshkosh benefit multiplier increased from $37.00 to $41.00 for service on or after January 1, 2025.
- Effective January 1, 2025, Dayton benefit multiplier increased from $39.00 to $41.00 for service on or after January 1, 2025.
- Effective December 31, 2025, the Crown Cork & Seal Company, Inc. Pension Plan for Certain Designated Groups merged with and into the Crown Cork & Seal Company, Inc. Pension Plan.

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Crown Cork & Seal Company, Inc. Pension Plan
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The following plan changes were made and will be reflected in future valuations.

- Effective January 1, 2028, Oshkosh benefit multiplier increased from $41.00 to $45.00 for service on or after January 1, 2028.
- Effective April 1, 2025, Cheraw benefit multiplier increased from $38.00 to $39.00 for all years of service
- Effective June 1, 2025, Toledo benefit multiplier increased from $45.00 to $48.00 for service on or after June 1, 2025.
- Effective April 1, 2025, Hanover benefit multiplier increased from $39.00 to $40.00 for service on or after April 1, 2025.
- Effective April 1, 2025, Dubuque benefit multiplier increased from $37.00 to $38.00 for all years of service.
- Effective January 1, 2026, Spartanburg benefit multiplier increases from $32.00 to $38.00 for service on or after January 1, 2026.

Crown Salaried Employees (Rider 1)

Eligibility to Participate	Salaried and certain hourly employees, not covered under another plan of the employer, whose wages and conditions or employment are not determined by collective bargaining between the employer and a third party are eligible to participate in the plan as of the first of the month following the completion of one year of service.
Contributions	Effective January 1, 1993, employees who elect to participate in the Supplemental Pension Plan shall contribute 5% of their applicable compensation. Prior to January 1, 1993, a participating employee's contribution was 5% of applicable monthly compensation in excess of $400. Effective December 31, 2016, employee contributions are no longer permitted or required. The employer pays the remaining costs of the plan.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or following attainment of age 65 and completion of five years of service.
Early Retirement	The first of the month coincident with or following attainment of age 55 and completion of 15 years of service.
Disability Retirement	Totally and permanently disabled, while actively employed by the employer, after the completion of 15 years of service. The disability must render the employee unable to perform any occupation and be expected to continue for life.
Late Retirement	With the attainment of normal retirement age, the first day of the month next or following the actual date of retirement.
Normal Retirement Benefit	(1) plus (2) plus (3) but not less than $100 per month, as determined below: (1) Basic Pension Plan Benefit—1¼% of the participant's final average compensation times years of credited service.

(2) Supplemental Pension Plan Benefit—The greater of (a) and (b):

(a) The sum of (i) and (ii):

(i) 1¼% of participant's final average compensation in excess of $4,800 times years of service as of January 1, 1993 during which the participant made contributions to the plan; and

(ii) 1¼% of participant's final average compensation times years of service after December 31, 1992 while participating in the Supplemental Plan.

(b) The benefit derived from employee contributions.

(3) Past Service Benefit — The benefit attributable to service performed for a previous employer.

Early Retirement Benefit	Accrued benefit to early retirement date payable at normal retirement date reduced by 5/9% for each of the first 60 months and by 5/18% for each of the next 60 months by which the starting date of the annuity precedes normal retirement date.
Disability Benefit	Accrued benefit beginning as of the participant's disability retirement date without reduction for early commencement reduced by workers' compensation benefits.
Vested Deferred Benefit	
Eligibility	Participants with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.
Amount	Unless the participant elects otherwise the benefit for participants who terminate prior to normal retirement is the participant's accrued benefit payable at normal retirement date. In addition, a participant who contributed to the supplemental plan is always 100% vested in his or her contributions. A participant who terminates employment prior to the completion of five years of service receives a refund of his contributions with interest.

Final Average Compensation	Highest consecutive five-year average of the last 10 years of compensation.
Compensation	End of year base salary exclusive of overtime, bonuses, and commissions.
Year of Service	A year of service is credited for each year during an employee's period of service, which begins on his or her date of hire and ends on the employee's severance from service date.
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced qualified joint and survivor annuity with 50% continuation to the participant's spouse, which is the actuarial equivalent of a life annuity.
Optional Forms	An actuarial equivalent 25%, 75%, or 100% joint and survivor annuity.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the tabular factors as specified for Crown Salaried participants in Rider 1 of the plan document.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	Vested in accrued benefit and married throughout the one-year period ending with the date of the participant's death.
Amount	A benefit determined as if the participant terminated employment on the date of his death, survived to the earliest he could retire under the plan, retired on that day with a QJSA and died on the next day.

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Crown Hourly Employees (Riders 5–37, 43)

Eligibility to Participate

Hourly paid employees at the locations are eligible to participate in the plan after the attainment of:

- Age 20: Riders 30 and 36-Schedule A
- Age 21: Rider 31
- Age 21 and the completion of one year of service: Riders 5, 6, 7, 8, 11, 12, 13, 14, 17, 18, 19, 23, 24, 25, 26, 27, 28, 32, 36-Schedule B
- The completion of one year of service: Riders 9, 10, 15, 16, 20, 29, 33, 34, 35, 37, 43
- The completion of one month of service: Riders 21, 22

Contributions

Retirement benefits under the plans are funded entirely by the employer. Employee contributions are neither required nor allowed.

Eligibility for Retirement

Normal Retirement	Based on the attainment of age and the completion of years of service as shown in Schedule A under "Normal Retire".
Early Retirement	Based on the attainment of age and the completion of years of service as shown in Schedule A under "Early Retire".
Layoff, Disability, and Plant Shutdown Retirement	Based on the attainment of age, the completion of years of service and the sum of age and service as shown in Schedule A under "Magic Numbers" after a layoff, disability or plant shutdown. A participant continues to receive credit for age and service while on layoff as shown under "Notes" of Schedule A.
30-Year Retirement	Completion of 30 years of service applicable to certain groups as shown in Schedule A under "30-Year".
Disability Retirement	Totally and permanently disabled and the completion of years of service as shown in Schedule A under "Disability".

Normal Retirement Benefit

Based on the benefit formula for each group as shown in Schedule A under "Monthly Benefit". For all groups other than Sandston and Crawfordsville, the normal retirement benefit is based on a dollar amount per year of service. The normal retirement benefit for Sandston and Crawfordsville is based on final average earnings as defined below.

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Crawfordsville

Average monthly compensation — Highest average monthly compensation during the lesser of a participant's final 10 consecutive plan years of employment or his or her full period of employment. Compensation is defined as a participant's wages for federal income tax withholding plus 401(k) elective deferrals and Section 125 deductions.

Sandston

Final average earnings — Average annual compensation for the three consecutive calendar years that produce the highest average during the five consecutive calendar years preceding the date of determination. Compensation is defined as a participant's wages for federal income tax withholding plus 401(k) elective deferrals and Section 125 deductions.

Covered compensation — Average of the taxable wage bases for each calendar year in the 35-year period ending with the calendar year in which the participant reaches his or her Social Security normal retirement age.

Other Retirement Benefits

Retirement allowance — For certain locations as shown in Schedule A under "Allowance", a participant who retires at his or her normal or early retirement date may elect to receive a lump sum in lieu of his or her first three monthly pension benefit payments equal to 520 (560 if the participant is entitled to five weeks of vacation in his final year of employment, applicable only to certain location as noted in Schedule A) hours of pay at the participant's applicable straight time hourly rate. The retirement allowance is reduced by vacation pay received in the year of retirement calculated on the basis of 40 hours per week.

Magic Number Retirements — Participants who retire under the magic number retirement receive unreduced benefits after the period of continuous service expires. In addition, a monthly supplement is payable in some cases as shown in Schedule A under "Magic Numbers".

Early Retirement Benefit	Accrued benefit at date of retirement reduced by the actuarial reduction factors shown in Schedule A under "Reduction" for each year benefit commencement precedes full retirement as shown under "Full Retire" of Schedule A.
Disability Benefit	The benefit shown in Schedule A under "Disability" payable until normal retirement, after which, a participant receives his accrued benefit at date of disability.
Vested Deferred Benefit	
Eligibility	Participants with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested benefit.
Amount of Benefit	Unless a participant elects otherwise, a participant's deferred vested benefit is equal to his accrued benefit at date of termination payable at his or her normal retirement date.
Forms of Payment	
Normal Form	Standard
Single Employee	Life annuity.
Married Employee	An actuarially reduced qualified joint and survivor annuity with 50% continuation to the participant's spouse, which is the actuarial equivalent of a life annuity.
Optional Forms	As illustrated in Schedule A under "Options".
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the tabular factors as specified for Crown Hourly participants in Riders 5–37 of the plan document.
Spouse’s Preretirement Death Benefit	
Eligibility Requirement	The spouse of a participant who dies with a vested benefit is eligible for the statutory Retirement Equity Act (REA) death benefit. An additional survivor income benefit may be payable to the spouse of a participant who dies with 10 years of service as shown in Schedule A under "SIB”.
Amount	The statutory Retirement Equity Act (REA) death benefit is determined as if the participant separated from service on the date of death, survived to the earliest date he could retire under the plan, retired on that day with a

50% qualified joint and survivor annuity, and died the next day.

The Survivor Income Benefit (SIB) is equal to the amount shown in Schedule A under "SIB" commencing at date of death.

A participant's surviving spouse who is eligible for the SIB will receive the greater of the statutory REA death benefit or the SIB. The surviving spouse of a participant who dies before his earliest retirement date will receive the SIB benefit until the date the participant would had met the conditions for early retirement and then the greater of the SIB benefit or the statutory REA benefit thereafter.

Risdon and Anchor Hocking Salaried Employees (Rider 4)

Eligibility to Participate	All salaried employees of Risdon Corporation, Anchor Hocking Packaging, Zeller Plastik and CarnuardMetalbox Enterprises are eligible to participate in the plan as of the first of the month following the completion of one year of service and attainment of age 21.
Contributions	Retirement benefits under the plans are funded entirely by the employer. Employee contributions are neither required nor allowed.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or immediately preceding the date a member reaches age 65.
Early Retirement	Attainment of age 55 and completion of 10 years of service.
Disability Retirement	Total and permanent disability while in active service, after the attainment of age 50 and completion of 10 years of service.
Late Retirement	With the attainment of normal retirement age, the first day of the month next following retirement.
Normal Retirement Benefit	
March 31, 2003 Accrued Benefit	The greater of (1) minus (2), and (3): (1) 1⅔% of the member's average annual compensation multiplied by the number of years of participation up to a maximum of 30 years. (2) 1⅔% of the Social Security benefit payable at normal retirement age multiplied by the number of years of his credited service up to a maximum of 30 years. (3) The minimum annual amount of normal pension is equal to the minimum benefit factor of $204 times credited service. For members with annual compensation in excess of $150,000 as of January 1, 1994, the normal retirement benefit shall not be less than the sum of (1) and (2) below: (1) The member's accrued benefit as of March 31, 1994. (2) The normal retirement benefit, as determined above, based on years of participation on or after April 1, 1994.

	For members who transfer from hourly to salaried, the benefit under this plan will be determined based on all years of participation in both plans then offset by their benefit earned under the hourly plan.
Benefit Accruals After March 31, 2003	For member with less than 30 years of service as of March 31, 2003, the member will receive the greater of (1) and (2): (1) Benefit determined under the standard Crown benefit formula for all years of service ("Crown All Service Formula"). (2) Frozen March 31, 2003 accrued benefit plus future benefit accruals under the standard Crown benefit formula ("Crown Future Service Formula"). This benefit is payable as a straight life annuity without COLA. A participant may elect to receive his frozen March 31, 2003 accrued benefit payable with COLA ("Protected Benefit").
Early Retirement Benefit	The following early retirement provisions are applicable to members with 30 years of service as of March 31, 2003 and to the March 31, 2003 accrued benefit under the Crown future service formula. The Crown standard early retirement factors are applied in all other cases. (1) For a member retiring on or after attaining age 62, his or her accrued benefit shall not be reduced; (2) For a member retiring on or after age 60 and prior to age 62, his or her accrued benefit shall be reduced by 3% for each year benefit commencement precedes age 62; (3) For a member retiring prior to age 60, his or her accrued benefit shall be reduced by 5% for each year benefit commencement precedes his or her normal retirement date.
Disability Benefit	Accrued benefit commencing at the member's disability retirement date without reduction for early commencement.

Vested Deferred Benefit

Eligibility	Members with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.
Amount	Unless the participant elects otherwise the benefit for participants who terminate prior to normal retirement is the participant's accrued benefits payable at normal retirement date. Alternatively, benefits may commence as early as age 55 in which case benefits determined under the CMB formula are reduced 5% per year prior to normal retirement date. All other benefits are reduced in accordance with the Crown standard early retirement reduction factors.
Average Annual Compensation	The average of a member's compensation for the highest 60 consecutive months.
Compensation	On or before March 31, 2003 or for employees with 30 years of service as of March 31, 2003, compensation includes the basic rate of earnings paid to an employee, including shift differential, overtime, 401(k) deferrals, and Section 125 contributions, but excluding bonuses and extra compensation paid during the year; however, earnings shall include bonuses earned for the current year, where the bonuses earned for the year shall be prorated among the number of moths of the member’s employment in the year. In all other cases, the Crown salaried plan definition of compensation applies.
Primary Social Security Benefit	Old age benefit under Social Security payable at the member’s normal retirement age. In determining the benefit, estimated earnings history shall be calculated by applying a salary scale, projected backward at an annual rate of 6% from the member’s earliest annualized compensation. In the case of a member who terminates employment prior to attaining normal retirement age, the member’s future earnings are assumed to continue at his or her annual rate of pay as of his or her termination of employment.

Years of Participation	Years of service begin with the employee's date of employment by a participating company. For the following groups, years of participation for benefit accrual purposes begins as follows: • Anchor Hocking Packaging Co. January 1, 1993 • Zeller Plastik, Inc. January 1, 1995 • Ironwood Industries, Inc. January 1, 1995 • AMS America, Inc. January 1, 1997 For AMS America employees, all employment with AMS America on or after July 1, 1994 shall be treated as employment with a participating company for purposes of membership in the plan, benefit eligibility, and vesting.
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced 50% qualified joint and survivor annuity (QJSA).
Optional Forms	25%, 50%, 75%, and 100% joint and survivor benefits.
Optional Payment Form Conversion Factor	
March 31, 2003 Accrued Benefit	The equivalent actuarial value of the normal form of benefit is based on the Unisex Pension 1984 mortality table without setback in the case of a Risdon hourly participant and set back three years in the case of a spouse and an interest rate of 9%.
Benefit Accruals After March 31, 2003	The equivalent actuarial value of the normal form of benefit is based on the current IRC section 417(e) table for lump sums and an interest rate of 5%.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	Vested in accrued benefit and married at time of death.
Amount	A benefit determined as if the participant terminated employment on the date of his death, survived to the earliest he could retire under the plan, retired on that day with a QJSA and died on the next day.

Postretirement Cost-of-Living Adjustment	As of October 31 of each even year, benefits are adjusted from 2% to 6% effective the following January 1. This applies to benefits in pay status for at least one year. The adjustment is based on the ratio of three-month averages of the CPI (all items—U.S. city average). No increase is provided if the percentage change in the CPI is less than 2%.

Constar Salaried Employees (Rider 3)

Eligibility to Participate	Salaried employees (other than leased employees) employed on the effective date become a member as of the effective date. A salaried employee who becomes employed after the effective date becomes a member as of the first of the month following the completion of one year of service and attainment of age 21. No new employees are eligible to participate after September 30, 2004.
Contributions	Retirement benefits under this plan are funded entirely by the employer.
Eligibility for Retirement	
Normal Retirement	The first day of the month coinciding with or immediately following a member's sixty-fifth birthday.
Early Retirement	The first day of the month coinciding with or immediately following the date on which a member attains age 55 and completes five years of benefit service.
Disability Retirement	The later of the date payments from the employer's long-term disability insurance plan ceases or the member's normal retirement date after the completion of five years of benefit service.
Late Retirement	Date of retirement after normal retirement date.
Normal Retirement Benefit	The annual benefit is the maximum of the benefit resulting from the pension accumulation formula, the offset formula, or the minimum retirement benefit formula, but not less than the accrued benefit as of December 31, 1993. (1) Pension Accumulation Formula The pension accumulation benefit is equal to 105% of the accrued benefit as of December 31, 1988 plus 2% of all subsequent earnings. (2) Offset Formula The offset formula benefit is equal to a gross benefit less the Social Security allowance. The gross benefit is equal to 2% of final earnings times years of service up to 30.

	The Social Security allowance is the lesser of a member's (a) covered compensation or (b) the member's Social Security final average compensation (not exceeding the taxable wage base) multiplied by 0.75% for each year of service up to 30. If benefits commence prior to the Social Security normal retirement date, the Social Security allowance is reduced by 5/9 of 1% per month for each month up to 60 months, by 5/18 of 1% per month for each month in excess of 60 months up to 120 months, and actuarially reduced thereafter. (3) Minimum Retirement Benefit The minimum retirement benefit is equal to 1988 earnings multiplied by 2% for each year of benefit service up to 20 years, plus 0.25% of 1988 earnings for each year or fraction of a year of service in excess of 20 years that the participant would have had at normal retirement.
Early Retirement Benefit	An amount computed in the same manner as the normal retirement benefit but based on benefit service and final average earnings at the member's early retirement date reduced by 0.5% for each month benefits commence prior to age 62. In the event that the early retirement pension is determined by the offset formula, the 0.5% reduction is applied before deducting the Social Security allowance.
Disability Benefit	Equal to accrued benefit at date of disability payable without reduction.
Vested Deferred Benefit	
Eligibility	Members with at least five years of vesting service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.
Amount	The member's accrued benefit determined as the greater of (1) and (2): (1) The member's normal retirement pension accumulated to date of termination.

	(2) The member's accrued offset benefit, calculated as follows: The gross benefit is equal to 2% of final earnings times benefit service projected to normal retirement up to 30 years multiplied by a fraction, not to exceed one, the numerator of which is benefit service to date of termination and the denominator of which is projected service to the member's normal retirement date, up to 40 years. The Social Security allowance is determined as of the date of termination.
Earnings	Total compensation, including bonuses, commissions, and overtime payments received during each plan year.
Benefit Service	In general all service from date of hire. All benefit accrual ceased September 30, 2004.
Final Earnings	Highest three full consecutive calendar years' average of earnings out of the last 10 consecutive calendar years preceding date of determination.
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced 50% qualified joint and survivor annuity (QJSA).
Optional Forms	50%, 66⅔%, 75%, and 100% joint and survivor benefits, 5 or 10 year certain and life.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the tabular factors as specified for Constar salaried participants in Rider 2 of the plan document.
Spouse’s Preretirement Death Benefit	
Eligibility Requirement	A surviving spouse of a member who had a vested interest in his accrued benefit and had been married to the member through the one-year period ending on the date of death is eligible for a surviving spouse's benefit.
Amount	Determined as if the member separated from service on the date of his death, survived to his or her earliest retirement date, retired on that day with a qualified joint and survivor annuity, and died the next day.

Central States Can Division Employees (Rider 2 and 39)

Eligibility to Participate	All full-time salaried employees or foremen rendering service to the Van Dorn Company, the Davies Can Co., or the Central States Can Co., specified hourly-rated employees not covered by other pension plans whose customary employment is one year (i.e. at least 1,000 hours per year for Rider 2 or a full 12-months for Rider 39), and former participants of Plan #1 and Cleveland Molding Hourly Pension Plan. Effective June 17, 1996, the Davis Can Co. Division was sold.
Contributions	Retirement benefits under this plan are funded entirely by the employer.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or following attainment of age 65.
Early Retirement	The first of the month coincident with or following attainment of age 55 and completion of 10 years of vesting service.
Disability Retirement	Permanent and total disability, while employed by the employer, after the completion of 15 years of vesting service.
Late Retirement	The date of retirement after normal retirement.
Normal Retirement Benefit	For all eligible employees other than hourly-paid employees of the Central States Can Division employed at Massillon Plant No. 42 or No. 44. The sum of (1), (2), and (3) below: (1) Service Prior to January 1, 1989: $13.50 per year of service for Central States Can Company and Composite Can Operations participants. (2) Service After January 1, 1989 to January 1, 2004: One-twelfth of 1.0% of final five-year average earnings up to Social Security covered compensation plus 1.5% of final five-year average earnings in excess of Social Security covered compensation, the sum times service after January 1, 1989 to January 1, 2004. The above monthly pay-related benefit shall be taken to a minimum of $13.50 per year of service from January 1, 1989 to January 1, 2004.

Item (1) and (2) were frozen effective October 1, 2004 for salaried employees. Future accruals are based on the benefit provisions under the standard Crown Salaried Plan.

In addition, participants in the Central States Supplemental Plan on December 31, 1988 receive their accrued benefit under that plan as of that date in addition to any benefits under the regular formula noted above.

The monthly retirement benefit of hourly-paid employees of the Central States Can Division, employed at Massillon Plant No. 42 or No. 44 equals the following dollar amount multiplied by years of benefit service prior to April 1, 2011:

- $24 for Level 2
- $25 for Levels 3 and 3A
- $26 for Levels 4 and 4A
- $27 for Levels 5 and 5A
- $28 for Levels 6 and 7

For benefit service from April 1, 2011 to March 31, 2017:

- $25 for Level 2
- $26 for Levels 3 and 3A
- $27 for Levels 4 and 4A
- $29 for Levels 5 and 5A
- $29 for Levels 6 and 7

For benefit service on or after April 1, 2017:

- $27 for Level 2
- $28 for Levels 3 and 3A
- $29 for Levels 4 and 4A
- $31 for Levels 5 and 5A
- $31 for Level 6

For benefit service on or after April 1, 2019:

- $28 for Level 2
- $29 for Levels 3 and 3A
- $30 for Levels 4 and 4A
- $32 for Levels 5 and 5A

- $32 for Level 6

For benefit service on or after April 1, 2020:

- $29 for Level 2
- $30 for Levels 3 and 3A
- $31 for Levels 4 and 4A
- $33 for Levels 5 and 5A
- $33 for Level 6

For benefit service on or after April 1, 2022:

- $30 for Level 2
- $31 for Levels 3 and 3A
- $32 for Levels 4 and 4A
- $34 for Levels 5 and 5A
- $34 for Level 6

For benefit service on or after April 1, 2023:

- $31 for Level 2
- $32 for Levels 3 and 3A
- $33 for Levels 4 and 4A
- $35 for Levels 5 and 5A
- $35 for Level 6

For benefit service on or after April 1, 2024:

- $32 for Level 2
- $33 for Levels 3 and 3A
- $34 for Levels 4 and 4A
- $36 for Levels 5 and 5A
- $36 for Level 6

(3) For a participant who is hired prior to January 1, 1999 and commences payments after December 31, 1997, the benefit cannot be less than the benefit described below:

(a) The amount of any benefit as of December 31, 1988 under the Van Dorn Plan, the Basic Plan, the Supplemental Plan, or the Composite Can Plan.

(b) For terminations after December 31, 1988 and prior to January 1, 1990, $13.50 times benefits service earned after December 31, 1988.

	(c) For terminations after December 31, 1989, (i) plus (ii): (i) 1% x final average compensation up to covered compensation x benefit service after December 31, 1988 (max 30) divided by 12. (ii) 1.5% x final average compensation over covered compensation x benefit service after December 31, 1988 (max) divided by 12.
Early Retirement Benefit	Accrued monthly benefit based on service at early retirement, reduced by ⅓ of 1% for each complete month benefit commencement precedes age 65.
Disability Benefit	Accrued benefit at date of disability retirement commencing at the disability retirement date.
Vested Deferred Benefit	
Eligibility	Participants with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.
Amount	Accrued benefit at date of termination payable at normal retirement.
Compensation	The term "compensation" means total compensation paid including any contributions made on the employee's behalf to the Van Dorn Company Savings Plan as a result of a salary reduction agreement in accordance with Section 401(k) of the code; excluding, however, any amounts attributable to overtime, the M.I.P. bonus program, amounts attributable to group life insurance, other employee welfare benefit plans, or expense reimbursements.
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced 50% qualified joint and survivor annuity (QJSA).
Optional Forms	Life, 50%, 75%, and 100% joint and survivor, or 10-year certain and continuous.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the Unisex Pension 1984 mortality

	table without setback in the case of a Central States participant and set back three years in the case of a spouse and an interest rate of 7%.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	Vested in accrued benefit and married throughout the one-year period ending with the date of the participant's death.
Amount	Determined as if the participant separated service on the day of his death, survived to the earliest date he could retire under the plan, retired on that day with a 50% joint and survivor annuity, and died the next day.

IAM Local 233 of Solon Plan No. 55 Employees (Rider 38)

Eligibility to Participate

Hourly paid employees who are employed at Van Dorn Company's Solon, Ohio Plant and whose terms and conditions of employment are governed by a collective bargaining agreement between Crown Cork & Seal Company, Inc. and the Union, International Association of Machinists and Aerospace Workers' Local Lodge No. 233. Effective June 17, 1996, the Solon Plant was sold.

Contributions

Retirement benefits under this plan are funded entirely by the employer.

Eligibility for Retirement

Normal Retirement

First of the month coincident with or next following the attainment of age 65 and completion of five years of service.

Early Retirement

First of the month coincident with or next following the attainment of age 55 and completion of 10 years of service.

Disability Retirement

Total and permanent disability while an employee of the employer, after the completion of 10 years of service. The employee must be unable to engage in any occupation for a period expected to continue for life and the employee must be receiving federal Social Security benefits.

Normal Retirement Benefit

Monthly benefit unit per year of service varies by service period as follows:

Service Date	Van Dorn Benefit Unit	IAM Plan Benefit Unit
Prior to 01/01/1968	$ 3.75	$ 2.50
01/01/1968 to 12/31/1974	$ 6.60	$ 4.84
01/01/1975 to 12/31/1976	$ 8.25	$ 6.05
01/01/1977 to 12/31/1977	$ 9.90	$ 7.26
01/01/1978 to 12/31/1981	$ 11.55	$ 8.47
01/01/1982 to 12/31/1987	$ 13.20	$ 9.68 to 12/31/1985
01/01/1988 to 12/31/1990	$ 14.20	N/A
01/01/1991 to 12/31/1992	$ 15.20	N/A
01/01/1993 to 03/31/1994	$ 16.20	N/A
04/01/1994 and later	$ 17.20	N/A

	Benefit offset: For participants vested under the IAM Plan B as of December 31, 1985, the benefits described above will be offset by benefits from said plan vested as of January 1, 1986 and attributable to service on or after January 1, 1968.
Early Retirement Benefit	Accrued benefit as of the early retirement date payable at normal retirement. This benefit is reduced by 0.4% for each month by which the starting date of the benefit precedes the participant's normal retirement date.
Disability Benefit	Accrued benefit at date of disability minus the IAM Plan B benefit as of December 31, 1985 beginning at the date of disability.
Vested Deferred Benefit	
Eligibility	Participants with at least five years of service are eligible to receive a deferred vested benefit.
Amount	Accrued benefit at date of termination payable at normal retirement.
Credited Service	Credited service is limited to 30 years, unless a participant was credited with 10 years of service under the IAM Plan B on December 31, 1977 (in which case the participant shall receive credit for all years of service for benefit accrual).
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced 50% qualified joint and survivor annuity.
Optional Forms	Life annuity, 50%, 75%, and 100% joint and survivor annuity, or a 120-month certain and continuous annuity.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the Unisex Pension 1984 mortality table without setback in the case of a Solon participant and set back three years in the case of a spouse and an interest rate of 7%.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	Vested in accrued benefit and married throughout the one-year period ending with the date of the participant's death.
Amount	Determined as if the participant terminated on the day of his death, survived to the earliest date he could retire

under the plan, retired with a 50% joint and survivor annuity, and died the next day.

Risdon Hourly Employees (Rider 40)

Eligibility to Participate	All hourly-paid employees are eligible to participate upon completion of one year of service.
Contributions	Contributions by members are neither required nor permitted.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or immediately preceding the date a member reaches age 65.
Early Retirement	Attainment of age 55 and completion of 10 years of service.
Disability Retirement	Total and permanent disability while in active service, after the attainment of age 50 and completion of 10 years of service.
Late Retirement	With the attainment of normal retirement age, the first ay of the month next following retirement.
Normal Retirement Benefit	A monthly benefit payable at normal retirement equal to $17 ($19 for Belcamp) times years of participation.
Early Retirement Benefit	The accrued normal retirement benefit payable at normal retirement date or at an earlier date, reduced: (1) For a member retiring on or after age 62 and prior to age 65, his or her accrued benefit shall be reduced by 3% for each year benefit commencement precedes age 65; (2) For a member retiring prior to age 62, his or her accrued benefit shall be reduced by 5% for each year benefit commencement precedes his or her normal retirement date.
Disability Benefit	Accrued benefit commencing at the member's disability retirement date without reduction for early commencement. In the event the participant is not eligible for Social Security benefits the disability retirement benefit will be not less than two times the accrued benefit as of disability retirement date.
Vested Deferred Benefit	
Eligibility	Members with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.

Amount	Unless the member elects otherwise the benefit for a member who terminate prior to normal retirement is the member's accrued benefits payable at normal retirement date. Alternatively, benefits may commence as early as age 55 in which case they are reduced 5% per year prior to normal retirement date.
Years of Participation	Years of service begin with the member date of employment by a participating company. For the following groups, years of participation for benefit accrual purposes begins as follows: ● Zeller Plastik, Inc. January 1, 1995 ● Ironwood Industries, Inc. January 1, 1995 ● AMS America, Inc. January 1, 1997 For AMS America employees, all employment with AMS America on or after July 1, 1994 shall be treated as employment with a participating company for purposes of plan membership, benefit eligibility, and vesting.
Forms of Payment	
Normal Form	
Single Employee	Life annuity.
Married Employee	An actuarially reduced 50% qualified joint and survivor annuity (QJSA).
Optional Forms	50%, 75%, and 100% joint and survivor benefits.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the Unisex Pension 1984 mortality table without setback in the case of a Risdon hourly participant and set back three years in the case of a spouse and an interest rate of 9%.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	Vested in accrued benefit and married at time of member's death.
Amount	A benefit determined as if the member terminated employment on the date of his death, survived to the earliest he could retire under the plan, retired on that day with a QJSA and died on the next day.

AHP Division Employees (Rider 41)

Eligibility to Participate	Hourly-rated employees of the following locations are eligible to participate in the plan. Throughout this Summary of Plan Provisions the locations are referred to by Group Code. Effective January 1, 2011 Connellsville employees (Group A and B) were spun-off and into the Crown Cork & Seal Company, Inc. Pension Plan for Certain Designated Groups for Crown Holdings, Inc. Group C — Glassboro employees are eligible to participate upon completion of one year of service. (Glassboro was shutdown and has no active employees.) Group D — Weirton employees are eligible to participate upon completion of one year of service. Group E — Lancaster employees are eligible to participate upon completion of one year of service.
Contributions	Contributions by participating employees are neither required nor permitted.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or following attainment of age 65 and completion of five years of service, including service in the Prior Newell Plan.
Early Retirement	The first of the month coincident with or following attainment of age 60 with 15 years of service.
Disability Retirement	N/A
Late Retirement	With the attainment of normal retirement age, the first day of the month next or following the actual date of retirement.
Normal Retirement Benefit	
Group C	An annual benefit payable monthly equal to 1.1% of compensation each year plus 1.2% of compensation in excess of $25,000 for each year of credited service. A maximum of 30 years minus credited service under the Newell Pension Plan is credited. Moreover, if credited service is limited, the years in which the member had the greatest compensation will be included.

Groups D and E	An annual benefit payable monthly equal to 1.37% of compensation up to $25,000 each year plus 1.85% of compensation in excess of $25,000 for each year of credited service. A maximum of 30 years minus credited service under the Newell Pension Plan is credited. Moreover, if credited service is limited, the years in which the member had the greatest compensation will be included.
Early Retirement Benefit	Accrued benefit to early retirement date payable at normal retirement date reduced according to the following schedule: Benefits are reduced by 0.5% for each month commencement precedes age 65.
Disability Benefit	N/A
Vested Deferred Benefit	
Eligibility	Members with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.
Amount	Unless the member elects otherwise the benefit for members who terminate prior to normal retirement is the member's accrued benefits payable at normal retirement date. Alternatively, the member can elect earlier commencement of benefits which will be reduced according to the following schedule: Groups C, D and E — Benefits can begin as early as age 60 with 15 years of credited service and will be reduced by 0.5% per month for each month prior to normal retirement age. *(**Note**: Due to the Glassboro shutdown, participants vested earlier than five years.)*
Final Average Compensation	Highest consecutive three-year average of the last 10 years of compensation.
Compensation	
Group C	Straight time wages for regular work week. Compensation excludes bonuses, shift premiums, overtime, and severance.

Groups D and E	Straight time wages for regular work week plus 401(k) deferrals and contributions to Section 125 Plans. Compensation excludes bonus, shift premium, overtime, and severance.
Year of Service	A year of service is credited for each year during an employee's period of service, which begins on his or her date of hire and ends on the employee's severance from service date.
Year of Credited Service	A year of credited service equals years of service with the following service excluded: ● Service prior to January 1, 1993. ● Service with a company prior to that company becoming a participating company.
Forms of Payment	
Normal Form	Life annuity.
Married Employee	An actuarially reduced qualified joint and survivor annuity with 50% continuation to the member's spouse, which is the actuarial equivalent of the normal form of payment for single employees.
Optional Forms	Life annuity, joint and 50% survivor annuity, joint and 75% survivor annuity, joint and 100% survivor annuity, and 10-year certain and continuous.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the Unisex Pension 1984 mortality table without setback in the case of an AHP participant and set back three years in the case of a spouse and an interest rate of 9%.
Spouse's Preretirement Death Benefit	
Statutory Death Benefits	
Eligibility	All married vested members are eligible, if not eligible for the non-statutory death benefit and married at least one year.
Amount	A benefit determined as if the member survived to his or her earliest retirement date, retired on that day and elected a qualified 50% joint and survivor annuity then died immediately thereafter.
Non-Statutory Death Benefit	
Eligibility	N/A.
Amount	N/A.

Constar Hourly Employees (Rider 42)

Eligibility to Participate	Hourly paid employees at the Salt Lake City location are eligible to participate in the plan after the attainment of one year of service. Effective November 21, 2002 sponsorship of the Constar Hourly Plan was transferred from Crown Cork & Seal Company, Inc. to Constar International, Inc.
Contributions	Retirement benefits are funded entirely by the employer. employee contributions are neither required nor allowed.
Eligibility for Retirement	
Normal Retirement	The first of the month coincident with or following attainment of age 65.
Early Retirement	The first of the month coincident with or following attainment of age 55 with five years of service.
Disability Retirement	Total and permanent disability while in active service, after the completion of 10 years of service.
Late Retirement	With the attainment of normal retirement age, the first day of the month next or following the actual date of retirement.
Normal Retirement Benefit	A monthly benefit payable at normal retirement equal to $14 times years of participation.
Early Retirement Benefit	If a member retires prior to attaining age 60, his accrued benefit as of early retirement date shall be reduced by 0.5% for each month by which benefit commencement precedes the member's sixty-second birthday. If a member retires on or after attaining age 60 and prior to attaining age 62, his accrued benefit as of early retirement date shall be reduced by 0.25% for each month by which benefit commencement precedes the member’s sixty-second birthday. No reduction is applied to a member’s retirement benefit for members who retire on or after age 62.
Disability Benefit	Normal retirement pension based on the member's service at his or her disability retirement date.
Vested Deferred Benefit	
Eligibility	Members with at least five years of service who do not qualify for retirement under any other retirement eligibility provision of the plan are eligible to receive a deferred vested pension.

Amount	Accrued benefit at date of termination payable at normal retirement date.
Benefit Service	In general, all service from date of hire.
Forms of Payment	
Normal Form	Life annuity.
Married Employee	An actuarially reduced qualified joint and survivor annuity with 50% continuation to the member's spouse, which is the actuarial equivalent of the normal form of payment for single employees.
Optional Forms	Life annuity, joint and 50% survivor annuity, joint and 66⅔% survivor annuity, joint and 75% survivor annuity, joint and 100% survivor annuity, 5 and 10-year certain and continuous.
Optional Payment Form Conversion Factor	The equivalent actuarial value of the normal form of benefit is based on the tabular factors as specified for Hourly Constar participants in Rider 42 of the plan document.
Spouse's Preretirement Death Benefit	
Eligibility Requirement	A surviving spouse of a member who had a vested interest in his accrued benefit and had been married through the one-year period ending on the date of death is eligible for a surviving spouse's benefit.
Amount	Determined as if the member had separated from service on the date of his death, survived to his or her earliest retirement date with an immediate qualified joint and survivor annuity, and died the next day.

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Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Schedule SB, line 25 — Change in Method

- A change in the asset valuation method to market value of assets. This change in funding method meets the conditions described in Section 3.01 of Revenue Procedure 2017-56 and is therefore granted automatic approval.

Schedule SB Attachment (Form 5500) —2025 Plan Year
Crown Cork & Seal Company, Inc. Pension Plan
EIN: 23-1526444 PN: 001

Schedule SB, line 24 — Change in Actuarial Assumptions

- A change in the mortality table from the plan-specific substitute mortality tables developed under IRC §1.430(h)(3)-2 based on experience from 2014 through 2017 to the 2012 base mortality rates for annuitants and non-annuitants per §1.430(h)(3)-1(d), projected generationally for years beyond 2012 using IRS-prescribed mortality improvement rates per §1.430(h)(3)-1(b)(1)(iii).
- A change in the §415 benefit limit increase assumption from $275,000 to $280,000.
- A change in the §401(a)(17) compensation limit increase assumption from $345,000 to $350,000.

The change from the substitute mortality table to the standard mortality table is due to having insufficient credible mortality experience following the 2024 annuity purchase. The funding non-prescribed assumption changes did not reduce the funding shortfall, so approval of the Commissioner is not required.