Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

1b Three-digit plan number (PN) ▶ 015

1c Effective date of plan 01/01/1972

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)
DANA LIMITED

P.O. BOX 1000
MAUMEE, OH 43537

2b Employer Identification Number (EIN) 26-1318190

2c Plan Sponsor's telephone number 419-887-3000

2d Business code (see instructions) 336300

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.	10/15/2026	LAURA BOWLES
	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 ☐ Same as Plan Sponsor

DANA INCORPORATED INVESTMENT COMMITTEE

3939 TECHNOLOGY DRIVE
MAUMEE, OH 43537

3b Administrator's EIN: 26-1318190

3c Administrator's telephone number: 419-887-3000

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	273
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)**	29
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	27
b	Retired or separated participants receiving benefits	**6b**	176
c	Other retired or separated participants entitled to future benefits	**6c**	39
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	242
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	27
f	Total. Add lines **6d** and **6e**.	**6f**	269
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1B 1I

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
DANA LIMITED

D Employer Identification Number (EIN)
26-1318190

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**	12016824
b Actuarial value	**2b**	12016824

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	197	8370928	8370928
b For terminated vested participants	48	628520	628520
c For active participants	29	868570	868570
d Total	274	9868018	9868018

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**	5.23 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	97000
c Target normal cost	**6c**	97000

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

09/18/2026
Date

CHRISTOPHER D RICHMOND
Type or print name of actuary

26-08687
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

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

PO BOX 674401
HOUSTON, TX 77267
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)	3709993	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	86000	0
9	Amount remaining (line 7 minus line 8)	3623993	0
10	Interest on line 9 using prior year's actual return of 3.18 %	115243	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.11 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	3739236	0

Part III Funding Percentages

14	Funding target attainment percentage	14	83.88 %
15	Adjusted funding target attainment percentage	15	121.77 %
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	121.93 %
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: %	[X] N/A, full yield curve used
b Applicable month (enter code)			**21b**	
22 Weighted average retirement age			**22**	67

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [ ] Prescribed - separate [X] 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 [X] No

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

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [ ] Yes [X] 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**	97000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

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**	97000

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	97000	0	97000

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 [X] 2021

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
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

B Three-digit plan number (PN) ▶ 015

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
DANA LIMITED

D Employer Identification Number (EIN)
26-1318190

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: DANA LIMITED MASTER TRUST

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

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)
26-1318190-143	M	12019889

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):

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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):

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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

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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
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500
DANA LIMITED

D Employer Identification Number (EIN)
26-1318190

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)	12016824	12019889
(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	12016824	12019889
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	12016824	12019889

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)		944988
(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		944988
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	941923	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		941923
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)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		941923
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		3065
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [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: REHMANN ROBSON LLC **(2)** EIN: 38-3635706

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		50000000
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 580984.

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
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500
DANA LIMITED

D Employer Identification Number (EIN)
26-1318190

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): 36-3046063

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 0

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ 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: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

Dana Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant

Years Ended December 31, 2025 and 2024

Financial Statements

Rehmann

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

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Note: Supplemental schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended, have been omitted because they are not applicable.

Rehmann

INDEPENDENT AUDITORS' REPORT

October 13, 2026

Dana Incorporated Investment Committee
Dana Victor Reinz Division Pension Plan for Hourly Paid
Employees at the Robinson, Illinois Plant
Maumee, Ohio

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

We have performed audits of the financial statements of ***Dana Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant*** (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits (modified cash basis) as of December 31, 2025 and 2024, the related statements of changes in net assets available for benefits (modified cash basis) for the years then ended, and the statement of accumulated plan benefits as of December 31, 2024, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements (the "financial statements").

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024 and for the years then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

HLB We are an Independent Member of THE GLOBAL ADVISORY AND ACCOUNTING NETWORK

7124 W. Central Ave, Toledo, OH 43617 419.865.8118

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Independent Auditors' 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 method of accounting described in Note 2.

- 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 Independent Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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 method of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

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 method of accounting described in Note 2, and for determining that the modified cash basis method 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.

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

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

Independent Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

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

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of the modified cash basis method of accounting described in Note 2.

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 method of accounting described in Note 2.

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



DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statements of Net Assets Available for Benefits

(Modified Cash Basis Method of Accounting)

	December 31	
ASSETS	**2025**	**2024**
Plan interest in Dana Master Pension Trust, at fair value (equal to net assets available for benefits)	**$ 12,019,889**	**$ 12,016,824**

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statements of Changes in Net Assets Available for Benefits

(Modified Cash Basis Method of Accounting)

	Year Ended December 31	
	2025	**2024**
Additions to net assets attributed to		
Plan interest in Dana Master Pension Trust net appreciation in fair value of investments	$ 819,667	$ 141,338
Plan interest in Dana Master Pension Trust net investment income	215,876	231,232
Total additions	**1,035,543**	**372,570**
Deductions from net assets attributed to		
Benefits paid to participants	941,923	934,641
Administrative expenses	90,555	111,512
Total deductions	**1,032,478**	**1,046,153**
Net change in net assets available for benefits	**3,065**	**(673,583)**
Net assets available for benefits		
Beginning of year	12,016,824	12,690,407
End of year	**$ 12,019,889**	**$ 12,016,824**

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statement of Accumulated Plan Benefits

December 31, 2024

Actuarial present value of accumulated plan benefits	
Vested benefits	
Participants currently receiving payments	$ 7,930,162
Other participants	1,394,569
Total vested benefits (equal to actuarial present value of accumulated plan benefits)	**$ 9,324,731**

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Statement of Changes in Accumulated Plan Benefits

Year Ended December 31, 2024

Increase (decrease) during the year attributable to		
Decrease in the discount period	$	543,422
Change in actuarial assumptions (Note 2)		(172,433)
Benefits paid to participants		(934,641)
Actuarial gains		(23,228)
Net decrease		**(586,880)**
Actuarial present value of accumulated plan benefits		
Beginning of year		9,911,611
End of year	**$**	**9,324,731**

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

1. DESCRIPTION OF THE PLAN

The following brief description of the ***Dana Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant*** (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined benefit pension plan established to provide pension benefits to individuals who are employed by an indirect subsidiary of ***Dana Limited*** (the "Company") who are members of the collective bargaining unit represented by District 167 of the International Association of Machinists and Aerospace Workers and its Local No. 2293, AFL-CIO. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

Effective May 31, 2007, the Plan was frozen for all participants. Participants who were actively employed at that time became fully vested on that date. Future benefits will be calculated based on a participant's retirement date and credited service through May 31, 2007 ("freeze date"). The monthly benefit amount was also frozen at $21 per month (for participants who retired on or after April 20, 2000) for each year of credited service earned prior to June 1, 2007.

Dana Incorporated is the Company's parent. The Plan is administered by the Dana Incorporated Investment Committee (the "Investment Committee"), who is responsible for oversight of the Plan and the appropriateness of the Plan's investments and monitors investment performance. Northern Trust Company ("Northern Trust") is the trustee of the Plan. Northern Trust holds all assets of the Plan in accordance with the service provider contract with the Company.

Funding Policy

Minimum required contributions to the Plan are based upon valuations performed by an independent actuary. The *Pension Protection Act of 2006* ("PPA") determines minimum required contributions as the sum of (a) the value of benefits earned during the year, (b) expected administrative expenses paid from the trust during the year, and (c) an amortization of any unfunded obligation over seven years. The Plan has met the minimum funding requirements prescribed by ERISA.

Notes to Financial Statements

Pension Benefits

Participants are entitled to monthly pension benefits beginning at normal retirement age (65) which are equal to specified rates multiplied by total years of credited service. The benefit is typically paid in the form of a joint and surviving spouse annuity; however, participants may elect to waive the survivor benefit option in the manner prescribed by ERISA. If the present value of the accrued benefit is less than $1,000, the benefit will be paid to the participant in a single lump-sum without the participant's consent. A participant with an accrued benefit greater than $1,000 but less than or equal to $5,000 may be paid in a lump-sum with the participant's written consent or will have their interest in the Plan transferred in a direct rollover to an individual retirement account administered by Vanguard Fiduciary Trust Company or other individual retirement account administered by a trustee as designated by the Investment Committee if the participant fails to elect a distribution or rollover option.

Participants are eligible for early retirement upon attaining age 60 with 10 years of credited service. Early retirement benefits are generally equal to the accrued normal retirement benefit actuarily reduced for retirement prior to age 65. Benefits for participants who do not commence receiving payments until after they reach normal retirement age are actuarially increased to take into account the number of months after the normal retirement date, excluding months in which the pension benefit was suspended because the participant worked for the Company.

Death and Disability Benefits

If an active or terminated vested participant dies prior to benefit commencement, a benefit is payable to the beneficiary equal to 50% of the participant's accrued normal retirement benefit, as stated in the Plan document. Such benefit is reduced for payments made prior to age 65 and for election of the joint annuitant option.

A participant with 15 or more years of credited service that becomes permanently and totally disabled is eligible to receive disability benefits under the Plan.

Vesting

All participants are fully vested in their benefits.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the modified cash basis method of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Consequently, contributions are recognized when received rather than when earned and Plan expenses are recognized when paid rather than when the obligation is incurred.

Notes to Financial Statements

Use of Estimates

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

Master Trust Agreement

The Plan's net assets, along with the net assets of three other pension plans, are held by Northern Trust in the Dana Master Pension Trust (the "Master Trust"). The net assets of the participating plans have been commingled in the Master Trust for investment purposes only. Employer contributions, when made, benefit payments and certain administrative expenses are identified for each respective participating plan whereas earnings and administrative expenses not specifically related to each plan are allocated proportionately to the participating plans. The allocation is based on the relative dollar value investment of the participating plans in the Master Trust, with the exception of income related to certain investments, which is allocated to each plan to match the duration of the associated pension liability.

Investment Valuation and Income Recognition

The Master Trust'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 Investment Committee determines the Master Trust's valuation policies utilizing information provided by the investment managers and trustee. See Note 4 for a discussion of the Master Trust's fair value measurements.

Net investment income of the Master Trust includes interest, dividends and distributions received on such investments, and net income from swaps and swaptions. Net change in fair value of the Master Trust includes the aggregate gains and losses on investments bought and sold as well as held during the year. Investment income of the Master Trust is recorded when earned on the accrual basis. Dividend income is recorded on the ex-dividend date.

Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits consist of those future benefit payments attributable, in accordance with the Plan provisions, to participants credited with service through the freeze date. These accumulated benefits are expected to be paid to retired or terminated vested participants or their surviving spouses, or presently eligible participants or their surviving spouses. Future estimated plan benefits used to measure accumulated plan benefits include amounts payable in the event of retirement, death, disability or termination of employment to the extent they are deemed attributable to credited service through the freeze date.

Notes to Financial Statements

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

The significant actuarial assumptions used in the valuation as of and for the year ended December 31, 2024 (most recent information available) are as follows:

Rates of Mortality	Based upon custom mortality tables using historical experience projected generationally using the MP-2021 scale.
Retirement Age	Based upon age stated in the Plan document and actual experience.
Valuation Interest Rate	6.00%

All actuarial methods and assumptions used in 2024 were consistent with those used in 2023 except that the Valuation Interest Rate was updated from 5.75% to 6.00%.

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

Contributions

Contributions are recorded when received by the trustee.

Payment of Benefits

Benefits payments to participants are recorded when paid.

Notes to Financial Statements

Administrative Expenses

Certain of the Plan's administrative expenses are paid directly by the Company and, accordingly, they are not reflected in the Plan's financial statements. Administrative fees and expenses for legal, actuarial, audit and record keeping services, Pension Benefit Guaranty Corporation ("PBGC") insurance premiums and services provided by the trustee, investment managers and administrative service providers are generally borne by the Plan. These expenses are party-in-interest transactions, which qualify for exemption from prohibited transaction rules under ERISA.

Subsequent Events

In preparing these financial statements, Plan management has evaluated, for potential recognition or disclosure, significant events or transactions that occurred during the period subsequent to the most recent statement of net assets available for benefits presented herein, through the date these financial statements were available to be issued.

3. MASTER TRUST

The Master Trust includes the net assets of four defined benefit pension plans. The Master Trust is administered under the supervision of the Board of Directors of Dana Incorporated which has appointed the Investment Committee to oversee the administration of the investments. The Investment Committee executes this duty by appointing Northern Trust and various investment managers to direct the Master Trust's investments. The Plan's interest in the Master Trust represents 2.42% and 2.44% of net assets available for benefits of the Master Trust at December 31, 2025 and 2024, respectively.

Effective January 1, 2026, the employer of one of the four plans with an interest in the Master Trust was sold by the Company. Assets totaling approximately $106,000,000 were transferred from the Master Trust in January 2026.

Certain information related to investments disclosed in the accompanying financial statements, including the Plan's interest in the Dana Master Pension Trust held at December 31, 2025 and 2024, and the related Plan's interest in Dana Master Pension Trust net change in fair value of investments and net investment income for the years ended December 31, 2025 and 2024, and the information summarized below, was obtained by management and agreed to and derived from information certified as complete and accurate by Northern Trust.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following presents the net assets available for benefits of plans participating in the Master Trust at December 31:

	2025		2024	
	Master Trust Balances	Plan's Interest in Master Trust	Master Trust Balances	Plan's Interest in Master Trust
Assets				
Investments, at fair value				
Equity securities	$ -	$ -	$ 24,731,589	$ 277,919
Collective trust funds				
Equity securities	80,174,560	816,752	47,334,986	531,921
Bonds	136,677,194	10,194,813	175,329,278	10,495,412
U.S. government agency securities	39,237,041	128,155	11,336,272	124,313
Corporate debt instruments	143,656,476	-	173,466,401	-
State and local bonds	1,176,316	-	1,169,211	-
Foreign government bonds	1,960,664	-	1,888,766	-
Core real estate investment funds	10,302,364	115,495	10,832,382	121,728
Collateralized mortgage obligations	11,019,275	-	9,165,222	81
Investment contract with an insurance company	3,751,750	-	3,672,132	-
Pooled separate accounts	1,539,611	-	1,203,084	-
Interest bearing cash	64,454,067	763,178	29,844,859	450,379
Swaps and swaptions	2,712,517	9,450	1,336,701	13,899
Total investments	496,661,835	12,027,843	491,310,883	12,015,652
Receivables				
Interest and dividends	2,071,942	3,314	2,074,505	3,091
Securities sold not settled	121,034,728	6,210,713	-	-
Due from broker	251,818	956	165,554	(640)
Other receivables	739,975	13,955	-	-
Total receivables	124,098,463	6,228,938	2,240,059	2,451
Total assets	**620,760,298**	**18,256,781**	**493,550,942**	**12,018,103**
Liabilities				
Securities purchased not settled	111,708,021	3,093,485	63,835	717
Due to broker	50,000	943	50,000	562
Other payables	11,445,974	3,142,464	-	-
Total liabilities	123,203,995	6,236,892	113,835	1,279
Net assets available for benefits	**$ 497,556,303**	**$ 12,019,889**	**$ 493,437,107**	**$ 12,016,824**

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following presents the changes in net assets available for benefits of plans participating in the Master Trust for the years ended December 31:

	2025	2024
Additions to net assets attributed to		
Net appreciation (depreciation) in fair value of investments	$ 31,343,554	$ (10,326,672)
Investment income		
Interest	18,217,374	16,000,299
Dividends and distributions	691,780	1,147,277
Net income from swaps and swaptions	934,000	905,461
Total investment income	19,843,154	18,053,037
Employer contributions	4,414,020	7,450,000
Total additions	**55,600,728**	**15,176,365**
Deductions from net assets attributed to		
Benefits paid to participants	46,403,266	46,635,439
Administrative expenses	5,078,266	5,696,477
Total deductions	**51,481,532**	**52,331,916**
Net change in net assets available for benefits	**4,119,196**	**(37,155,551)**
Net assets available for benefits		
Beginning of year	493,437,107	530,592,658
End of year	**$ 497,556,303**	**$ 493,437,107**

Notes to Financial Statements

4. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under Accounting Standards Codification 820 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 Master Trust has the ability to access.

Level 2: Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable for the asset or liability; and
- 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 fair value measurement level within the fair value hierarchy of each of the assets and liabilities of the Master Trust is based on the lowest level of any input that is significant to the fair value measurements. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets and liabilities measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Equity securities: Valued at closing prices reported in an active market.

Collective trust funds: Valued using the net asset value ("NAV") provided by the trustee, classified as "other" and are not assigned to a level in the fair value hierarchy. The NAV is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient would not be used if it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV.

U.S. government agency securities: Fair value is based on yields currently available for comparable securities.

Notes to Financial Statements

Corporate debt instruments: Fair value is based on yields currently available for comparable securities.

State and local bonds: Fair value is measured based on yields currently available for comparable securities.

Foreign government bonds: Fair value is measured based on yields currently available for comparable securities.

Core real estate investment funds: Fair value is based on the NAV's provided by the fund managers or determined by a third party and the unit price is based on the values of the underlying net assets of these funds. These funds are classified as "other" and are not assigned to a level in the fair value hierarchy. The NAV is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the Master Trust will sell the investment for an amount different than the reported NAV.

Collateralized mortgage obligations: Fair value is based on yields currently available for comparable securities.

Investment contract with an insurance company: This investment is reported at fair value as determined by Aetna Life Insurance Company utilizing the market approach of resetting interest rates periodically based on current yields of similar instruments with comparable durations considering the creditworthiness of the issuer.

Pooled separate accounts: Valued at the unit price reported by Aetna Life Insurance Company. The underlying investments owned can include registered investment companies, common stocks, corporate bonds, U.S. Government securities, other pooled separate accounts, or guaranteed insurance contracts priced by the sponsoring insurance company using applicable interest rates and contract provisions. The unit price is based on the fair value of the underlying investments owned, less any accrual of fees and expenses borne by the account, and divided by the number of units outstanding. The unit price is readily determinable and quoted on the active private market on which the Master Trust can transact daily with no significant redemption restrictions on this investment.

Interest-bearing cash: Fair value is determined based on exchange rates sourced by Reuters.

Swaps and swaptions: Fair value is determined based on quotes received by industry vendors.

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

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

The following tables set forth, by level within the fair value hierarchy, the Master Trust's investments measured at fair value at December 31:

	(in thousands of dollars)				
2025	**Level 1**	**Level 2**	**Level 3**	**Other (1)**	**Total**
Collective trust funds					
Equity securities	$ -	$ -	$ -	$ 80,175	$ 80,175
Bonds	-	-	-	136,677	136,677
U.S. government agency securities	-	39,237	-	-	39,237
Corporate debt instruments	-	143,656	-	-	143,656
State and local bonds	-	1,176	-	-	1,176
Foreign government bonds	-	1,961	-	-	1,961
Core real estate investment funds	-	-	-	10,302	10,302
Collateralized mortgage obligations	-	11,019	-	-	11,019
Investment contract with an insurance company	-	-	3,752	-	3,752
Pooled separate accounts	-	1,540	-	-	1,540
Interest bearing cash	-	64,454	-	-	64,454
Swaps and swaptions	-	2,713	-	-	2,713
Total investments at fair value	**$ -**	**$ 265,756**	**$ 3,752**	**$ 227,154**	**$ 496,662**

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

	(in thousands of dollars)				
2024	**Level 1**	**Level 2**	**Level 3**	**Other (1)**	**Total**
Equity securities	$ 24,732	$ -	$ -	$ -	$ 24,732
Collective trust funds					
Equity securities	-	-	-	47,335	47,335
Bonds	-	-	-	175,329	175,329
U.S. government agency securities	-	11,336	-	-	11,336
Corporate debt instruments	-	173,467	-	-	173,467
State and local bonds	-	1,169	-	-	1,169
Foreign government bonds	-	1,889	-	-	1,889
Core real estate investment funds	-	-	-	10,832	10,832
Collateralized mortgage obligations	-	9,165	-	-	9,165
Investment contract with an insurance company	-	-	3,672	-	3,672
Pooled separate accounts	-	1,203	-	-	1,203
Interest bearing cash	-	29,845	-	-	29,845
Swaps and swaptions	-	1,337	-	-	1,337
Total investments at fair value	**$ 24,732**	**$ 229,411**	**$ 3,672**	**$ 233,496**	**$ 491,311**

(1) Certain investments are measured at NAV per share (or its equivalent) on an inactive market and have not been classified in the fair value hierarchy and are presented in the column titled "Other" above. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the schedules of net assets available for benefits of plans participating in the Master Trust in Note 3.

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. The Investment Committee evaluates the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. There were no purchases or issuances of Level 3 assets in 2025 or 2024.

Notes to Financial Statements

The following tables set forth the Master Trust's Level 3 financial instruments, the valuation techniques used to measure the fair value of those financial instruments, the significant unobservable inputs and the ranges of values for those inputs at December 31:

2025 Instrument	Fair Value	Principal Valuation Technique	Significant Unobservable Inputs	Weighted Average
Investment contract with an insurance company	$ 3,751,750	Market approach	Interest rates	4.20%

2024 Instrument	Fair Value	Principal Valuation Technique	Significant Unobservable Inputs	Weighted Average
Investment contract with an insurance company	$ 3,672,132	Market approach	Interest rates	4.06%

In estimating fair value of the investments classified as Level 3, the Investment Committee utilizes third-party pricing sources.

The following tables set forth additional disclosures for the fair value measurement of investments in certain entities that calculate NAV per share (or its equivalent) as of December 31:

	2025			
Investment Type	Fair Value (in thousands)	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective trust funds	$ 216,852	$ -	Daily/Monthly	Daily/Monthly
Core real estate investment funds	10,302	-	Quarterly	Quarterly

	2024			
Investment Type	Fair Value (in thousands)	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective trust funds	$ 222,664	$ -	Daily/Monthly	Daily/Monthly
Core real estate investment funds	10,832	-	Quarterly	Quarterly

Notes to Financial Statements

The following is a description of the investment strategies for investments in certain entities that calculate NAV per share (or its equivalent) at December 31, 2025 and 2024.

Collective trust funds: These funds invest in a wide variety of investment categories including equities and fixed income securities with the goal of providing growth and offsetting changes in the value of the Plans' benefit obligations due to changes in interest rates.

Core real estate investment funds: These funds invest in stabilized, income-flowing properties using primarily commingled fund vehicles. These investments are part of the return-seeking diversified pool of assets for the purpose of generating an incremental return with an acceptable level of risk.

5. RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain Master Trust investments are in funds that are managed by Northern Trust or their subsidiaries and affiliates. The Master Trust paid for administrative service provider, investment advisor and manager, actuarial, record keeping services and plan audit fees which qualify as party-in-interest transactions. Certain management fees in the form of an expense ratio charged to each investment option are paid by the Master Trust and deducted from earnings on investments. These transactions are party-in-interest transactions, which are exempt from prohibited transaction rules.

6. TAX STATUS

The Plan has received a favorable determination letter dated August 24, 2017 from the Internal Revenue Service ("IRS"), that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, Plan management and the Plan's legal counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, that the Plan is qualified and the related Master Trust is tax exempt.

Plan management has evaluated the tax positions taken by the Plan to determine if the Plan has taken any uncertain tax positions that more likely than not would not be sustained upon examination by the IRS, and has concluded that, as of December 31, 2025, there are no uncertain positions taken or expected to be taken. While the Plan may be subject to routine audits by the IRS, there are currently no audits for any tax periods in progress.

Notes to Financial Statements

7. PLAN TERMINATION

The Company expects to continue the Plan as long as necessary to pay accumulated plan benefits. However, the Company reserves the right to terminate the Plan, in whole or in part, at any time as prescribed by the Board of Directors of Dana Incorporated, the Company's parent, subject to the provisions of ERISA.

Upon the complete termination of the Plan, the assets then remaining in the Plan, after providing for the expenses of the Plan, would be allocated (to the extent that they are sufficient) for the purpose of providing benefits that have accrued to participants or their beneficiaries as of the date of such termination, in a manner that is consistent with the order of precedence prescribed by Section 4044 of ERISA.

Any assets remaining in the fund because of variations in actual experience from actuarial estimates, after the complete satisfaction of all liabilities under the Plan in accordance with the preceding paragraph, would revert to the Company.

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 benefits. However, the PBGC does not guarantee all types of benefits under the Plan and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit. Should the Plan terminate, the payment of certain benefits not covered by the PBGC would depend on the sufficiency of the Plan's assets.

8. RISKS AND ECONOMIC UNCERTAINTIES

The Master Trust invests in various investment securities with the underlying assets consisting of any combination of stocks, bonds, fixed income securities, and other investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of interest rate, market, and credit risks inherent with certain of the Master Trust's investment securities, it is at least reasonably possible that changes in the fair 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 and changes in net assets available for benefits. Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

DANA VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

Notes to Financial Statements

9. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of Plan's interest in the Dana Master Pension Trust net investment income reported in these financial statements to the amounts reported on Schedule H of Forms 5500 for the years ended December 31:

	2025	2024
Plan interest in Dana Master Pension Trust net appreciation in fair value of investments reported in these financial statements	$ 819,667	$ 141,338
Plan interest in Dana Master Pension Trust net investment income reported in these financial statements	215,876	231,232
Administrative expenses netted against net investment income	(90,555)	(111,512)
Net investment income from Dana Master Pension Trust investment accounts reported on Schedule H of Form 5500	**$ 944,988**	**$ 261,058**

The following is a reconciliation of administrative expenses reported in these financial statements to the amounts reported on Schedule H of Forms 5500 for the years ended December 31:

	2025	2024
Administrative expenses reported in these financial statements	$ 90,555	$ 111,512
Administrative expenses netted against net investment income	(90,555)	(111,512)
Administrative expenses reported on Schedule H of Form 5500	**$ -**	**$ -**

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SCHEDULE SB ATTACHMENTS

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

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

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

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN: 26-1318190/015
Plan Sponsor: Dana Limited
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Former Plan Assignments

The following former plans compose the Dana Combined Hourly Employees' Pension Plan (Plan 003): 003 (only select locations), 026, 028, 029, 034, 048, 054, 055, 069, 078, 115, 126, 127, 130, and 131.

The following former plans compose the Dana U.S.W. Hourly Employees' Pension Plan (Plan 148): 004, 005, 008, 118, and 129.

The assumptions detailed herein are as of January 1, 2025.

Economic Assumptions

Funding Interest Rate Basis

- Yield Curve Basis — IRS-prescribed one-month average yield curve based on bond yields in the month preceding the valuation date
- Effective Interest Rate — Plan 003: 5.24%

  Plan 015: 5.23%

  Plan 148: 5.25%

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Mortality

For Plans 003, 015, and 148, a custom mortality table was developed during 2018 using Dana's historical mortality experience. A sample of annual rates per 1000 participants are provided below for each gender:

Age	Males	Females
20	0.5	0.2
25	0.6	0.2
30	0.6	0.3
35	0.7	0.4
40	0.8	0.5
45	1.2	0.8
50	2.3	1.5
55	4.3	2.7
60	8.3	5.1
65	13.9	9.7
70	21.6	16.4
75	35.0	27.1
80	59.1	46.3
85	103.1	82.2
90	180.4	145.9
95	281.0	237.8
100	374.1	330.8
105	453.8	415.9
110	498.6	470.8
115	500.0	500.0
120+	1000.0	1000.0

These custom mortality tables are projected generationally from 2015 using the SOA projection scale, MP-2021.

Termination

Annual rates per 1000 participants

Service	High Subsidy (Plans 003, 004, 005, 034)	Moderate Subsidy (Plans 015, 118)
2	70.2	135.2
7	32.5	55.8
12	20.7	37.4
17	15.5	33.9
22	10.5	25.2
27	10.2	13.6

Disability

No incidence of disability assumed

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN: 26-1318190/015
Plan Sponsor: Dana Limited
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Retirement Age

Active Participant Retirement Assumptions
Annual Rate per 1,000 Employees

	High Subsidy Plans (Plans 003, 004, 005, 034)			Moderate Subsidy (Plans 015, 118)
Age	**<30 YOS**	**30-31 YOS**	**32+ YOS**	
50-54	N/A	150	75	20
55-56	50	275	150	50
57-59	75	275	150	75
60-61	150	275	150	150
62	300	300	300	300
63-64	150	150	150	150
65	750	750	750	750
66-69	500	500	500	500
70	1000	1000	1000	1000

In general, deferred vesteds are assumed to retire at normal retirement age of 65.

Form of Payment

Plan	Form of Payment
Berwick (029), Ecorse (028), Fort Wayne (004), Marion (005), Spicer (003), Syracuse (034)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Combined Hourly (003)	For those single, a life annuity. For those married, 100% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Hillsdale (026), Rochester (115)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 55% of such reduced amount payable to his surviving spouse after his death.

SCHEDULE SB ATTACHMENTS

	Robinson (015), Everflex (078), Hohenwald (048), Pueblo (008), Henderson Plant (118), Brake Systems Inc. (127), PTG (129)	For those single, a life annuity. For those married, an actuarially reduced amount of the retirement income payable to the employee during his lifetime with 50% of such reduced amount payable to his surviving spouse after his death.
	Terminated vested, deferred disabled	Single life annuity with REA benefits

Expenses

Expenses included in the Funding Target Normal Cost include: benefit administration fees, audit fees, and trust eligible actuarial fees.

Special At-Risk Assumptions

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

SCHEDULE SB ATTACHMENTS

Shutdown	Provisions for Future Shutdowns Should a plant shutdown occur and a plant's shutdown benefits become payable and/or a significant number of early retirements occur, there would be significant changes in the plan's financial conditions, affecting cash flow as well as present values. Actuarial techniques which are practical for establishing the cost of other types of pension benefits are not applicable to group termination benefits, because a practical provision for the occurrence cannot be determined. Therefore, this actuarial valuation contains no numeric measurement of the potential costs of such shutdown benefits. Locations Currently Shutdown For plans with shutdown locations, eligible plan participants will receive special early retirement benefits attributable to the shutdown. If the participant is subsequently re-employed by Dana Corporation, the special early retirement benefits are forfeited. If applicable, this actuarial valuation assumes that participants eligible to receive special early retirement benefits do so unless data supplied by Dana indicates they have been transferred to another position within Dana. They are treated as terminated vested participants and are assumed to commence benefits at the earliest, most valuable age.
Marriage	Assumes that 80% of all employees are married and that the male spouse is three years older than the female spouse.

Actuarial Methods

Actuarial Cost Method	Present value of Accrued Benefits
Asset Valuation Method Description	Fair market value as of the valuation date including discounted contributions receivable for the prior plan year.
Benefits Not Valued	All benefits described in the Plan Provisions section of the supplemental report were valued and special benefits granted under plant closings or work-force reductions at certain on-going locations. WTW is unaware of any event which has occurred that would trigger these special benefits for plant closings or work-force reductions, except where noted. The cost for these benefits will be recognized in the valuation after the triggering event occurs.

SCHEDULE SB ATTACHMENTS

Data Sources

Participant Data	Dana Limited, their administrator, and the plan's Trustee provided census and asset information. WTW is aware of no potential material biases due to imperfect data. WTW checked the data for reasonableness and consistency, but no audit was performed. While it is possible that future data corrections could have a material impact on results, we believe the data provided were sufficient for reasonable valuation results, and we are aware of no errors or omissions that would have a significant effect on the results of our calculations.

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
DANA CORPORATION VICTOR REINZ DIVISION PENSION PLAN FOR HOURLY PAID EMPLOYEES AT THE ROBINSON, ILLINOIS PLANT

B Three-digit plan number (PN) ▶ 015

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
DANA LIMITED

D Employer Identification Number (EIN)
26-1318190

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**	12,016,824
b Actuarial value	**2b**	12,016,824

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	197	8,370,928	8,370,928
b For terminated vested participants	48	628,520	628,520
c For active participants	29	868,570	868,570
d Total	274	9,868,018	9,868,018

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**	5.23%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	97,000
c Target normal cost	**6c**	97,000

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

CHRISTOPHER D RICHMOND CDR
Signature of actuary

09/18/2026
Date

CHRISTOPHER D RICHMOND
Type or print name of actuary

2608687
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

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

PO BOX 674401

HOUSTON TX 77267
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)	3,709,993	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	86,000	0
9	Amount remaining (line 7 minus line 8)	3,623,993	0
10	Interest on line 9 using prior year's actual return of 3.18%	115,243	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.11%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	3,739,236	0

Part III Funding Percentages

14	Funding target attainment percentage	14	83.88 %
15	Adjusted funding target attainment percentage	15	121.77 %
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	121.93 %
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 [X] 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: %	[X] N/A, full yield curve used

b Applicable month (enter code) — **21b**

22 Weighted average retirement age	**22**	67

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [ ] Prescribed - separate [X] 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 [X] No

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

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [ ] Yes [X] 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**	97,000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

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**	97,000

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	97,000	0	97,000

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 [X] 2021

SCHEDULE SB ATTACHMENTS

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

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

Plan Name:	Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN:	26-1318190/015
Plan Sponsor:	Dana Limited
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

Former Plan Assignments

The following former plans compose the Dana Combined Hourly Employees' Pension Plan (Plan 003): 003 (only select locations), 026, 028, 029, 034, 048, 054, 055, 069, 078, 115, 126, 127, 130, and 131.

The following former plans compose the Dana U.S.W. Hourly Employees' Pension Plan (Plan 148): 004, 005, 008, 118, and 129.

The assumptions detailed herein are as of January 1, 2025.

Economic Assumptions

Funding Interest Rate Basis

- Yield Curve Basis — IRS-prescribed one-month average yield curve based on bond yields in the month preceding the valuation date
- Effective Interest Rate — Plan 003: 5.24%

  Plan 015: 5.23%

  Plan 148: 5.25%

SCHEDULE SB ATTACHMENTS

Demographic Assumptions

Mortality

For Plans 003, 015, and 148, a custom mortality table was developed during 2018 using Dana's historical mortality experience. A sample of annual rates per 1000 participants are provided below for each gender:

Age	Males	Females
20	0.5	0.2
25	0.6	0.2
30	0.6	0.3
35	0.7	0.4
40	0.8	0.5
45	1.2	0.8
50	2.3	1.5
55	4.3	2.7
60	8.3	5.1
65	13.9	9.7
70	21.6	16.4
75	35.0	27.1
80	59.1	46.3
85	103.1	82.2
90	180.4	145.9
95	281.0	237.8
100	374.1	330.8
105	453.8	415.9
110	498.6	470.8
115	500.0	500.0
120+	1000.0	1000.0

These custom mortality tables are projected generationally from 2015 using the SOA projection scale, MP-2021.

Termination

Annual rates per 1000 participants

Service	High Subsidy (Plans 003, 004, 005, 034)	Moderate Subsidy (Plans 015, 118)
2	70.2	135.2
7	32.5	55.8
12	20.7	37.4
17	15.5	33.9
22	10.5	25.2
27	10.2	13.6

Disability

No incidence of disability assumed

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN: 26-1318190/015
Plan Sponsor: Dana Limited
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Retirement Age

Active Participant Retirement Assumptions
Annual Rate per 1,000 Employees

	High Subsidy Plans (Plans 003, 004, 005, 034)			Moderate Subsidy (Plans 015, 118)
Age	**<30 YOS**	**30-31 YOS**	**32+ YOS**	
50-54	N/A	150	75	20
55-56	50	275	150	50
57-59	75	275	150	75
60-61	150	275	150	150
62	300	300	300	300
63-64	150	150	150	150
65	750	750	750	750
66-69	500	500	500	500
70	1000	1000	1000	1000

In general, deferred vesteds are assumed to retire at normal retirement age of 65.

Form of Payment

Plan	Form of Payment
Berwick (029), Ecorse (028), Fort Wayne (004), Marion (005), Spicer (003), Syracuse (034)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Combined Hourly (003)	For those single, a life annuity. For those married, 100% of the retirement income payable to the employee during his lifetime with 60% of such reduced amount payable to his surviving spouse after his death.
Hillsdale (026), Rochester (115)	For those single, a life annuity. For those married, 95% of the retirement income payable to the employee during his lifetime with 55% of such reduced amount payable to his surviving spouse after his death.

SCHEDULE SB ATTACHMENTS

	Robinson (015), Everflex (078), Hohenwald (048), Pueblo (008), Henderson Plant (118), Brake Systems Inc. (127), PTG (129)	For those single, a life annuity. For those married, an actuarially reduced amount of the retirement income payable to the employee during his lifetime with 50% of such reduced amount payable to his surviving spouse after his death.
	Terminated vested, deferred disabled	Single life annuity with REA benefits

Expenses

Expenses included in the Funding Target Normal Cost include: benefit administration fees, audit fees, and trust eligible actuarial fees.

Special At-Risk Assumptions

For at-risk calculations, all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan.

SCHEDULE SB ATTACHMENTS

Shutdown	Provisions for Future Shutdowns Should a plant shutdown occur and a plant's shutdown benefits become payable and/or a significant number of early retirements occur, there would be significant changes in the plan's financial conditions, affecting cash flow as well as present values. Actuarial techniques which are practical for establishing the cost of other types of pension benefits are not applicable to group termination benefits, because a practical provision for the occurrence cannot be determined. Therefore, this actuarial valuation contains no numeric measurement of the potential costs of such shutdown benefits. Locations Currently Shutdown For plans with shutdown locations, eligible plan participants will receive special early retirement benefits attributable to the shutdown. If the participant is subsequently re-employed by Dana Corporation, the special early retirement benefits are forfeited. If applicable, this actuarial valuation assumes that participants eligible to receive special early retirement benefits do so unless data supplied by Dana indicates they have been transferred to another position within Dana. They are treated as terminated vested participants and are assumed to commence benefits at the earliest, most valuable age.
Marriage	Assumes that 80% of all employees are married and that the male spouse is three years older than the female spouse.

Actuarial Methods

Actuarial Cost Method	Present value of Accrued Benefits
Asset Valuation Method Description	Fair market value as of the valuation date including discounted contributions receivable for the prior plan year.
Benefits Not Valued	All benefits described in the Plan Provisions section of the supplemental report were valued and special benefits granted under plant closings or work-force reductions at certain on-going locations. WTW is unaware of any event which has occurred that would trigger these special benefits for plant closings or work-force reductions, except where noted. The cost for these benefits will be recognized in the valuation after the triggering event occurs.

SCHEDULE SB ATTACHMENTS

Data Sources

Participant Data

Dana Limited, their administrator, and the plan's Trustee provided census and asset information. WTW is aware of no potential material biases due to imperfect data. WTW checked the data for reasonableness and consistency, but no audit was performed. While it is possible that future data corrections could have a material impact on results, we believe the data provided were sufficient for reasonable valuation results, and we are aware of no errors or omissions that would have a significant effect on the results of our calculations.

SCHEDULE SB ATTACHMENTS

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

Substitute mortality tables are used for the entire plan populations, including:

- Male participants (annuitants and non-annuitants), including disabled participants
- Female participants (annuitants and non-annuitants), including disabled participants

Prescribed tables are used for the following plan populations: None

Mortality ratio used to develop the table: 1.295454

Mortality table is constructed based on partial credibility

Partial credibility weighting factor: 0.819914

The last plan year for which the IRS approval for the substitute mortality tables applies is: 2028

Plan Name:	Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN:	26-1318190/015
Plan Sponsor:	Dana Limited
Valuation Date:	January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Dana Corporation Victor Reinz Division for Hourly Paid Employees – Robinson, Illinois Plan (Plan #015) – Summary of Plan Provisions

1.	Effective Date of Plan	Amended and restated effective April 21, 1994. Latest amendment effective March 28, 2005.
2.	Eligibility for Participation	All employees who are members of District 167, Local No. 2293, of the International Association of Machinists and Aerospace Workers, AFL-CIO.
3.	Definitions	
	a. Accrued Benefit	The Basic Pension Benefit times years of Credited Service payable monthly.
	b. Basic Benefit	$17.50 for terminations from May 1, 1995, to April 30, 1996. $18.25 for terminations from May 1, 1996 to April 20, 1997. $19.00 for terminations from May 1, 1997 to April 20, 2000. $21.00 for terminations on or after April 21, 2000.
	c. Credited Service	1. All full and fractional years of service from the seniority list; plus 2. All full and fractional years of past service from the seniority date to January 1, 1972; plus 3. Each period of absence after January 1, 1976 unless a 12 month period has passed during which the employee has not performed an hour of service. 4. Reinstatement of Credit Service available for loss of seniority after retirement; Credited Service is aggregated, but future benefit is offset by actuarial equivalent of benefits previously paid. 5. Employee retiring under the plan also receives Credited Service for all service with the Corporation. 6. Maximum Credited Service is 35 years; employee on seniority list as of June 1, 1970 who retires at age 65 will be credited with no less than 15 years of Credited Service. 7. Credited Service accruals ceased June 1, 2007.
	d. Surviving Spouse	One year marriage requirement imposed.
4.	Normal Retirement Benefit	a. Eligibility: Attainment of age 65. b. Benefit: The Accrued Benefit determined at Normal Retirement Date.

Plan Name:	Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
EIN / PN:	26-1318190/015
Plan Sponsor:	Dana Limited
Valuation Date:	January 1, 2024

SCHEDULE SB ATTACHMENTS

5. Early Retirement Benefit

   a. Eligibility: Completion of 10 years Credited Service and attainment of age 60.

   b. Benefit: The Accrued Benefit determined at early retirement date, reduced by one-fifteenth for each year by which the first benefit payment precedes Normal Retirement Date.

Age	% of Benefit
60	66.7%
61	73.4%
62	80.0%
63	86.7%
64	93.4%
65	100.0%

6. Postponed Retirement Benefit

   a. Eligibility: At the request of the employee

   b. Benefit: The Accrued Benefit determined at date of postponed retirement.

7. Vested Benefit

   a. Eligibility:

      1. Attain age 65.
      2. Qualify for disability retirement.
      3. Completes 5 years of service under this or another Plan.

   b. Benefit Payable at Normal Retirement Date: Accrued Benefit determined at date of termination.

   c. Early Commencement of Benefit: Eligible after completion of 10 or more years of Credited Service and attainment of age 60. The benefit payable at normal retirement date, actuarially reduced for early commencement.

8. Disability Benefit

   a. Eligibility: All employees who become disabled after attaining 15 or more years of Credited Service.

   b. Benefit: The Accrued Benefit determined at date of disability, payable immediately on approval of application but no sooner than the 7th month of disability.

9. Temporary Benefit — None.

10. Supplemental Benefits — None.

SCHEDULE SB ATTACHMENTS

11. Survivor's Benefit

a. Eligibility: Former and active vested employees and retirees who have elected the Normal Form of the Survivor Benefit and who have been married at least one year.

b. Amount of Benefit Payable to Surviving Spouse:

1. *Active Vested and Terminated Vested Employees Eligible for Early or Normal Retirement*: Monthly Survivor Benefit shall be equal to 50% of the Accrued Benefit the employee would have received had he retired the day before his death. Benefit payment begins on the first day of the month following the date of death.
2. *Retirement Employees*: Monthly Survivor Benefit shall be equal to 50% of benefit for which retiree was eligible if the retiree did not decline the Survivor's Benefit. Benefit payment begins on the first day of the month following the date of death.
3. *Active Vested and Terminated Vested Employees Not Eligible for Normal or Early Retirement*: Monthly Survivor Benefit shall be equal to 50% of the monthly benefit to which the Employee would have been entitled to had he terminated on the earlier of his termination date of date of death, survived to early retirement date and begun receiving that day, and died the next day.

c. Reduction: Pension Benefit of retiree is reduced actuarially for Survivor Benefit Option.

d. Duplication Clause: Survivor Benefit not payable concurrently with group insurance transition or Bridge Benefits.

e. Revocation of Election: Election of Survivor Benefit shall be voided if either employee Surviving Spouse dies before effective date of election.

12. Employee Contributions

None.

SCHEDULE SB ATTACHMENTS

13. Form of Benefit	a.	Normal Form: Life Annuity or Survivor's Benefit if married at least one year. Conversion factor is based on 417(e) applicable mortality, 7%
	b.	Optional Forms Straight Life Annuity. 50% (per 11. above) Joint and Survivor's Benefit Annuity. Conversion factor is based on 417(e) applicable mortality, 7%
Medicare Benefit	None.	

SCHEDULE SB ATTACHMENTS

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

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

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

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
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SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	18,302	14,859	926,181	959,342
2026	45,647	30,309	891,082	967,038
2027	58,450	33,133	855,305	946,888
2028	64,190	37,784	818,914	920,888
2029	67,886	39,971	781,978	889,835
2030	69,987	39,321	744,571	853,879
2031	70,654	38,754	706,767	816,175
2032	70,368	38,344	668,645	777,357
2033	70,223	40,661	630,279	741,163
2034	69,942	44,184	591,753	705,879
2035	68,556	45,382	553,178	667,116
2036	66,909	45,967	514,683	627,559
2037	65,064	47,078	476,419	588,561
2038	63,065	47,159	438,552	548,776
2039	60,919	45,874	401,277	508,070
2040	59,102	46,567	364,795	470,464
2041	57,212	48,735	329,309	435,256
2042	55,170	48,801	295,036	399,007
2043	53,310	47,812	262,198	363,320
2044	51,413	47,588	231,011	330,012
2045	49,608	47,229	201,671	298,508
2046	47,266	45,757	174,351	267,374
2047	44,416	43,568	149,191	237,175
2048	41,428	41,305	126,286	209,019
2049	38,257	39,361	105,689	183,307
2050	35,045	37,375	87,403	159,823
2051	31,835	34,995	71,390	138,220
2052	28,676	32,628	57,567	118,871
2053	25,618	30,299	45,816	101,733
2054	22,701	28,034	35,983	86,718
2055	19,965	25,855	27,892	73,712
2056	17,438	23,778	21,342	62,558
2057	15,144	21,812	16,121	53,077
2058	13,093	19,957	12,025	45,075
2059	11,285	18,210	8,860	38,355
2060	9,712	16,563	6,449	32,724
2061	8,360	15,010	4,639	28,009
2062	7,207	13,542	3,297	24,046
2063	6,231	12,153	2,315	20,699
2064	5,404	10,840	1,607	17,851
2065	4,702	9,601	1,102	15,405
2066	4,100	8,436	748	13,284
2067	3,577	7,346	501	11,424
2068	3,116	6,332	331	9,779
2069	2,704	5,398	216	8,318
2070	2,332	4,548	138	7,018
2071	1,993	3,784	87	5,864
2072	1,685	3,106	54	4,845
2073	1,405	2,516	33	3,954
2074	1,155	2,010	20	3,185

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
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Schedule SB, Line 22
Description of Weighted Average Retirement Age
as of January 1, 2025

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

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SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	18,302	14,859	926,181	959,342
2026	45,647	30,309	891,082	967,038
2027	58,450	33,133	855,305	946,888
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2030	69,987	39,321	744,571	853,879
2031	70,654	38,754	706,767	816,175
2032	70,368	38,344	668,645	777,357
2033	70,223	40,661	630,279	741,163
2034	69,942	44,184	591,753	705,879
2035	68,556	45,382	553,178	667,116
2036	66,909	45,967	514,683	627,559
2037	65,064	47,078	476,419	588,561
2038	63,065	47,159	438,552	548,776
2039	60,919	45,874	401,277	508,070
2040	59,102	46,567	364,795	470,464
2041	57,212	48,735	329,309	435,256
2042	55,170	48,801	295,036	399,007
2043	53,310	47,812	262,198	363,320
2044	51,413	47,588	231,011	330,012
2045	49,608	47,229	201,671	298,508
2046	47,266	45,757	174,351	267,374
2047	44,416	43,568	149,191	237,175
2048	41,428	41,305	126,286	209,019
2049	38,257	39,361	105,689	183,307
2050	35,045	37,375	87,403	159,823
2051	31,835	34,995	71,390	138,220
2052	28,676	32,628	57,567	118,871
2053	25,618	30,299	45,816	101,733
2054	22,701	28,034	35,983	86,718
2055	19,965	25,855	27,892	73,712
2056	17,438	23,778	21,342	62,558
2057	15,144	21,812	16,121	53,077
2058	13,093	19,957	12,025	45,075
2059	11,285	18,210	8,860	38,355
2060	9,712	16,563	6,449	32,724
2061	8,360	15,010	4,639	28,009
2062	7,207	13,542	3,297	24,046
2063	6,231	12,153	2,315	20,699
2064	5,404	10,840	1,607	17,851
2065	4,702	9,601	1,102	15,405
2066	4,100	8,436	748	13,284
2067	3,577	7,346	501	11,424
2068	3,116	6,332	331	9,779
2069	2,704	5,398	216	8,318
2070	2,332	4,548	138	7,018
2071	1,993	3,784	87	5,864
2072	1,685	3,106	54	4,845
2073	1,405	2,516	33	3,954
2074	1,155	2,010	20	3,185

Plan Name: Dana Corporation Victor Reinz Division Pension Plan For Hourly Paid Employees at the Robinson, Illinois Plant
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SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

Dana Corporation Victor Reinz Division for Hourly Paid Employees – Robinson, Illinois Plan (Plan #015) – Summary of Plan Provisions

1.	Effective Date of Plan	Amended and restated effective April 21, 1994. Latest amendment effective March 28, 2005.
2.	Eligibility for Participation	All employees who are members of District 167, Local No. 2293, of the International Association of Machinists and Aerospace Workers, AFL-CIO.
3.	Definitions	
	a. Accrued Benefit	The Basic Pension Benefit times years of Credited Service payable monthly.
	b. Basic Benefit	$17.50 for terminations from May 1, 1995, to April 30, 1996. $18.25 for terminations from May 1, 1996 to April 20, 1997. $19.00 for terminations from May 1, 1997 to April 20, 2000. $21.00 for terminations on or after April 21, 2000.
	c. Credited Service	1. All full and fractional years of service from the seniority list; plus 2. All full and fractional years of past service from the seniority date to January 1, 1972; plus 3. Each period of absence after January 1, 1976 unless a 12 month period has passed during which the employee has not performed an hour of service. 4. Reinstatement of Credit Service available for loss of seniority after retirement; Credited Service is aggregated, but future benefit is offset by actuarial equivalent of benefits previously paid. 5. Employee retiring under the plan also receives Credited Service for all service with the Corporation. 6. Maximum Credited Service is 35 years; employee on seniority list as of June 1, 1970 who retires at age 65 will be credited with no less than 15 years of Credited Service. 7. Credited Service accruals ceased June 1, 2007.
	d. Surviving Spouse	One year marriage requirement imposed.
4.	Normal Retirement Benefit	a. Eligibility: Attainment of age 65. b. Benefit: The Accrued Benefit determined at Normal Retirement Date.

Plan Name: Dana Corporation Victor Reinz Division Pension Plan for Hourly Paid Employees at the Robinson, Illinois Plant
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SCHEDULE SB ATTACHMENTS

5. Early Retirement Benefit

   a. Eligibility: Completion of 10 years Credited Service and attainment of age 60.

   b. Benefit: The Accrued Benefit determined at early retirement date, reduced by one-fifteenth for each year by which the first benefit payment precedes Normal Retirement Date.

Age	% of Benefit
60	66.7%
61	73.4%
62	80.0%
63	86.7%
64	93.4%
65	100.0%

6. Postponed Retirement Benefit

   a. Eligibility: At the request of the employee

   b. Benefit: The Accrued Benefit determined at date of postponed retirement.

7. Vested Benefit

   a. Eligibility:

      1. Attain age 65.
      2. Qualify for disability retirement.
      3. Completes 5 years of service under this or another Plan.

   b. Benefit Payable at Normal Retirement Date: Accrued Benefit determined at date of termination.

   c. Early Commencement of Benefit: Eligible after completion of 10 or more years of Credited Service and attainment of age 60. The benefit payable at normal retirement date, actuarially reduced for early commencement.

8. Disability Benefit

   a. Eligibility: All employees who become disabled after attaining 15 or more years of Credited Service.

   b. Benefit: The Accrued Benefit determined at date of disability, payable immediately on approval of application but no sooner than the 7th month of disability.

9. Temporary Benefit — None.

10. Supplemental Benefits — None.

SCHEDULE SB ATTACHMENTS

11. Survivor's Benefit

a. Eligibility: Former and active vested employees and retirees who have elected the Normal Form of the Survivor Benefit and who have been married at least one year.

b. Amount of Benefit Payable to Surviving Spouse:

1. *Active Vested and Terminated Vested Employees Eligible for Early or Normal Retirement*: Monthly Survivor Benefit shall be equal to 50% of the Accrued Benefit the employee would have received had he retired the day before his death. Benefit payment begins on the first day of the month following the date of death.
2. *Retirement Employees*: Monthly Survivor Benefit shall be equal to 50% of benefit for which retiree was eligible if the retiree did not decline the Survivor's Benefit. Benefit payment begins on the first day of the month following the date of death.
3. *Active Vested and Terminated Vested Employees Not Eligible for Normal or Early Retirement*: Monthly Survivor Benefit shall be equal to 50% of the monthly benefit to which the Employee would have been entitled to had he terminated on the earlier of his termination date of date of death, survived to early retirement date and begun receiving that day, and died the next day.

c. Reduction: Pension Benefit of retiree is reduced actuarially for Survivor Benefit Option.

d. Duplication Clause: Survivor Benefit not payable concurrently with group insurance transition or Bridge Benefits.

e. Revocation of Election: Election of Survivor Benefit shall be voided if either employee Surviving Spouse dies before effective date of election.

12. Employee Contributions

None.

SCHEDULE SB ATTACHMENTS

13. Form of Benefit	a.	Normal Form: Life Annuity or Survivor's Benefit if married at least one year. Conversion factor is based on 417(e) applicable mortality, 7%
	b.	Optional Forms Straight Life Annuity. 50% (per 11. above) Joint and Survivor's Benefit Annuity. Conversion factor is based on 417(e) applicable mortality, 7%
Medicare Benefit	None.	

SCHEDULE SB ATTACHMENTS

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

Substitute mortality tables are used for the entire plan populations, including:

- Male participants (annuitants and non-annuitants), including disabled participants
- Female participants (annuitants and non-annuitants), including disabled participants

Prescribed tables are used for the following plan populations: None

Mortality ratio used to develop the table: 1.295454

Mortality table is constructed based on partial credibility

Partial credibility weighting factor: 0.819914

The last plan year for which the IRS approval for the substitute mortality tables applies is: 2028

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Valuation Date:	January 1, 2025