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
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 05/16/2016

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)
INGEVITY CORPORATION

5255 VIRGINIA AVENUE
NORTH CHARLESTON, SC 29406

2b Employer Identification Number (EIN) 47-4027764

2c Plan Sponsor's telephone number 800-458-4034

2d Business code (see instructions) 325100

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	TERRY DYER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	389
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)**	271
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	248
b	Retired or separated participants receiving benefits	**6b**	60
c	Other retired or separated participants entitled to future benefits	**6c**	71
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	379
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	8
f	Total. Add lines **6d** and **6e**.	**6f**	387
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**	2
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

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1) [ ]	Insurance	**(1)** [ ]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	**(2)** [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	**(3)** [X]	Trust
(4) [ ]	General assets of the sponsor	**(4)** [ ]	General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

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

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

A Name of plan
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
47-4027764

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	27270605
b Actuarial value	**2b**	27405795

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	58	11139491	11139491
b For terminated vested participants	60	2127110	2127110
c For active participants	271	16312264	17540797
d Total	389	29578865	30807398

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**	5.40 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	652193
b Expected plan-related expenses	**6b**	257296
c Target normal cost	**6c**	909489

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

10/15/2026
Date

DEBBIE P. SICHKO, E.A., F.S.A.
Type or print name of actuary

26-07411
Most recent enrollment number

USI CONSULTING GROUP
Firm name

216-343-0225
Telephone number (including area code)

1001 LAKESIDE AVENUE
SUITE 1200
CLEVELAND, OH 44114
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	921386
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	921386
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 2.17 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		862311
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 5.24 %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		18712
c	Total available at beginning of current plan year to add to prefunding balance		881023
d	Portion of (c) to be added to prefunding balance		880984
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	880984

Part III Funding Percentages

14	Funding target attainment percentage	14	86.09 %
15	Adjusted funding target attainment percentage	15	86.09 %
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	92.91 %
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
01/14/2026	299450	0			
09/14/2026	450000	0			
			Totals ► 18(b)	749450	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	695059

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:

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

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	62

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	909489
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	4282587	420485
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**	1329974

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	873316	873316

36 Additional cash requirement (line 34 minus line 35)	**36**	456658
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	695059
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	238401
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	238401
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

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

A Name of plan
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INGEVITY CORPORATION

D Employer Identification Number (EIN)
47-4027764

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

GOLDMAN SACHS ASSET MANAGEMENT

13-4019460

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 28 50	NONE	56250	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

USI CONSULTING GROUP

06-1053228

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	21000	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

90 NORTH CONSULTING

86-1619070

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17	NONE	17500	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

FORVIS MAZARS, LLP

44-0160260

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	14700	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PRINCIPAL FINANCIAL GROUP, INC.

42-1522034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 21 25 50 51 59 63 64	TRUSTEE	12703	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

STATE STREET GLOBAL ADVISORS

37-6650120

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51	NONE	5949	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

PRUDENTIAL

23-6994310

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 51	NONE	5256	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
47-4027764

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: 20 YR US TREAS. STRPS INDX NL(CMCA)

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-0337987-169	C	8475720

a Name of MTIA, CCT, PSA, or 103-12 IE: US LONG DURATION CORPORATE BOND FD

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
23-6994310-159	C	2843666

a Name of MTIA, CCT, PSA, or 103-12 IE: MSCI ACWI IMI INDEX NL FUND

b Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS

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)
90-0337987-161	C	12023448

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INGEVITY CORPORATION

D Employer Identification Number (EIN)
47-4027764

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1339348	749450
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	5389	4580
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	90604	104162
(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)	20562448	23342833
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	3296152	748435
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	2007818	4916706

		(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	27301759	29866166
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	5243	4264
1k Total liabilities (add all amounts in lines 1g through1j)	1k	5243	4264
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	27296516	29861902

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)	749450	
(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)		749450
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	6731	
(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)		6731
(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)	49917	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		49917
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	3676893	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	3678812	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-1919
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	475128	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		475128

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		2618589
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		11260
c Other income	2c		-48678
d Total income. Add all **income** amounts in column (b) and enter total	2d		3860478
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	982077	
(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)		982077
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)	14700	
(5) Investment advisory and investment management fees	2i(5)	71769	
(6) Bank or trust company trustee/custodial fees	2i(6)	12704	
(7) Actuarial fees	2i(7)	21000	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	192842	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		313015
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1295092
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		2565386
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: FORVIS MAZARS, LLP **(2)** EIN: 44-0160260

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		10000000
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**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**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 589120.

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
INGEVITY CORPORATION RETIREMENT PLAN FOR BARGAINED HOURLY EMPLOYEES

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
INGEVITY CORPORATION

D Employer Identification Number (EIN)
47-4027764

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): 56-1354495

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_____.

Ingevity Corporation Retirement Plan for Bargained Hourly Employees

EIN 47-4027764 PN 002

Independent Auditor's Report, Financial Statements, and Supplemental Schedules

December 31, 2025 and 2024

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
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December 31, 2025 and 2024

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Forvis Mazars, LLP
200 Meeting Street, Suite 207
Charleston, SC 29401
P 843.722.6443 | F 843.723.2647
forvismazars.us

Independent Auditor's Report

Administration Committee
Ingevity Corporation Retirement Plan for Bargained Hourly Employees
North Charleston, South Carolina

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

We have performed audits of the financial statements of Ingevity Corporation Retirement Plan for Bargained Hourly Employees (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024 and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal 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 accounting principles generally accepted in the United States of America.

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

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

Other Matter – Supplemental Schedules Required by ERISA

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

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

In our opinion:

- the form and content of the supplemental schedules, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule 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).

Forvis Mazars, LLP

Charleston, South Carolina
October 15, 2026

Federal Employer Identification Number: 44-0160260

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
ASSETS		
Investments at fair value	$ 29,107,872	$ 25,951,779
Receivables		
Contribution receivable	749,450	1,339,348
Accrued interest receivable	4,580	5,389
Total Receivables	754,030	1,344,737
Net Assets Available for Benefits	$ 29,861,902	$ 27,296,516

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2025

Additions		
Contributions		
Employer	$	749,450
Investment income		
Net appreciation in fair value of investments		3,053,572
Interest and dividends		57,456
Total Additions		3,860,478
Deductions		
Benefits paid to participants		982,077
Administrative expenses		313,015
Total Deductions		1,295,092
Net Increase		2,565,386
Net Assets Available for Benefits, Beginning of Year		27,296,516
Net Assets Available for Benefits, End of Year	$	29,861,902

Note 1. Description of Plan

The following description of the Ingevity Corporation Retirement Plan for Bargained Hourly Employees, (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit pension plan covering eligible union employees of Ingevity Corporation (the "Company"). The Company's Administration Committee controls and manages the operation and administration of the Plan. Principal Bank ("Trustee") serves as Trustee and recordkeeper of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Pension Benefits

Participants with five years of continuous service, as defined by the Plan, are entitled to pension benefits upon retirement. If employees terminate before rendering five years of continuous service, they forfeit the right to receive pension benefits upon retirement. Pension benefits are provided to participants under several types of retirement options based upon years of continuous service and age, as defined by the Plan. Retirement benefits are paid to pensioners or beneficiaries in various forms of joint and survivor annuities.

Death and Disability Benefits

In the event of a vested employee's death, his or her designated beneficiary will be entitled to receive a survivor benefit equal to the specified percentage of the participant's accrued benefit according to the Plan provisions. The survivor benefit commences on the earliest date that the deceased participant could have elected to receive retirement benefits. In the event of a vested employee becoming totally and permanently disabled, he or she will be entitled to receive a monthly disability retirement pension distribution without actuarial reduction on account of retirement prior to his or her normal retirement date.

Note 2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("GAAP").

Estimates

The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect certain reported amounts of net assets available for benefits, and changes therein, disclosure of contingent assets and liabilities, and the actuarial present value of accumulated plan benefits at the date of the financial statements. Accordingly, actual results may differ from those estimates and assumptions.

Investment Valuation and Income Recognition

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.

Plan management determines the Plan's valuation policies utilizing information provided by the trustee. See Note 6 for discussion of fair value measurements.

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

Payment of Benefits

Benefits are recorded upon distribution.

Administrative Expenses

The Plan's administrative expenses are paid by either the Plan or the Company, as provided by the plan document. Certain administrative functions are performed by employees of the Company. No such employee receives compensation from the Plan.

Note 3. Funding Policy

Contributions to provide benefits under the Plan are made solely by the Company. The Company's funding policy is to make contributions to the Plan in an amount that will meet or exceed the annual ERISA minimum funding requirements, as determined by the Plan's independent actuary. The minimum funding requirement for the year ended December 31, 2025 was met. The Company made $749,450 in contributions for the year ended December 31, 2025.

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA.

Note 4. Plan Termination

In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder, and the Plan document.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC") if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid, and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty while other benefits may not be provided for at all.

Note 5. Certification of Plan Trustee

The Plan Administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Delaware Charter Guarantee and Trust Company, d/b/a Principal Trust Company, a qualified institution, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedules is complete and accurate. The certification excludes investments in limited partnership funds that are held outside of Principal Trust Company.

- Investments of $24,191,166 and $21,394,246 as of December 31, 2025 and 2024, respectively
- Investment income of $2,580,368 for the year ended December 31, 2025
- Investment information of $24,191,166 included in the accompanying schedule of assets held at end of year as of December 31, 2025 and the accompanying schedule of reportable transactions for the year ended December 31, 2025

The Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required supplemental schedules.

Note 6. Disclosures About Fair Value of Plan Assets and Liabilities

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. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. The hierarchy comprises three levels of inputs that may be used to measure fair value:

Level 1 Quoted prices in active markets for identical assets or liabilities

Level 2 Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities

Level 3 Unobservable inputs supported by little or no market activity and that are significant to the fair value of the assets or liabilities

Assets and liabilities are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment and may affect the valuation of fair value assets and liabilities and their placement within the fair value hierarchy levels.

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual Funds
Mutual funds are publicly traded investments and are valued daily at the closing price reported on the active market on which the funds are traded.

Common Collective Trust Funds

These funds are valued at the net asset value ("NAV") of units of the collective fund. 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 funds will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require daily notification in order to ensure that securities liquidations will be carried out in an orderly business manner.

Investment in Limited Partnerships

The Plan invests in limited partnerships for which quoted prices are not available in active markets for identical instruments. The Plan utilizes NAV, as determined by the general partners, as the estimated fair value. Because quoted prices in active markets for identical assets are not available, these prices are determined using observable market information such as quotes from less active markets and/or quoted prices in securities with similar characteristics. The following tables set forth by level within the fair value hierarchy the Plan's assets accounted for at fair value on a recurring basis.

	December 31, 2025			
		Fair Value Measurements Using		
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 748,435	$ 748,435	$ -	$ -
Interest bearing cash	99,897	99,897	-	-
Total assets in the fair value hierarchy	848,332	$ 848,332	$ -	$ -
Investment measured at NAV (A)	28,259,540			
Investments at fair value	$ 29,107,872			

	December 31, 2024			
		Fair Value Measurements Using		
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	$ 746,436	$ 746,436	$ -	$ -
Interest bearing cash	85,361	85,361	-	-
Total assets in the fair value hierarchy	831,797	$ 831,797	$ -	$ -
Investment measured at NAV (A)	25,119,982			
Investments at fair value	$ 25,951,779			

(A) In accordance with Subtopic 820-10, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

Investments Measured Using the Net Asset Value per Share Practical Expedient

The following table summarizes investments for which fair value is measured using the NAV per share practical expedient as of December 31, 2025 and 2024. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

	Fair Value at December 31, 2025	Fair Value at December 31, 2024	Unfunded Commitments	Other Redemption Restrictions	Redemption Notice Period
Common collective trusts	$ 23,342,834	$ 20,562,448	None	Monthly	Up to 1 Month
Limited partnerships (B)	$ 4,916,706	$ 4,557,534	None	(B)	(B)

(B) The Marathon Emerging Markets Bond Fund ("MEMBF") is an open-end fund that invests in sovereign debt, quasi sovereign debt and corporate debt of entities domiciled in emerging markets. The Company held $1,177,514 and $1,184,845 in MEMBF as of December 31, 2025 and 2024, respectively. The fund has monthly liquidity and requires a 5-day redemption restriction period.

The Pacific Asset Management Bank Loan Fund ("PAMBLF") invests in a selectively constructed portfolio of senior-secured loans. The PAMBLF focuses on floating rate bank loans. The Company held $879,044 and $822,973 in PAMBLF as of December 31, 2025 and 2024, respectively. The fund has monthly liquidity and requires a 10-day redemption restriction period.

The IR&M Long Credit Fund ("IRM") invests primarily in investment-grade fixed income securities. The Company held $2,860,148 and $2,549,716 in IRM as of December 31, 2025 and 2024, respectively. The fund has daily liquidity.

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

Note 7. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, which are attributable under the Plan's provisions to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to (1) retired or terminated employees or beneficiaries, (2) beneficiaries of employees who have died, and (3) present employees or their beneficiaries. Benefits under the Plan are based on employees' benefit rate based on union affiliation as well as years of service at benefit. Benefits payable under all circumstances – retirement, death, disability and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

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

The significant actuarial assumptions used in the valuations as of December 31, 2025 and 2024 were:

	2025	2024
Funding method	Unit credit	Unit credit
Discount rate	6.5%	6.5%
Assumed return on plan assets	6.5%	6.5%
Mortality rate	Pri-2012 Blue Collar Mortality Tables Projected with Scale MP-2021	Pri-2012 Blue Collar Mortality Tables Projected with Scale MP-2021
Retirement age	Weighted average retirement age is 62	Weighted average retirement age is 62

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.

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

	2025	2024
Vested benefits		
Participants currently receiving benefits	$ 13,495,590	$ 9,906,784
Other participants	12,932,319	15,050,166
Total vested benefits	26,427,909	24,956,950
Non-vested benefits	1,120,438	1,141,804
Total actuarial present value of accumulated plan benefits	$ 27,548,347	$ 26,098,754

The actuarial present value of accumulated plan benefits increased as follows:

Actuarial present value of accumulated plan benefits, as of December 31, 2024	$ 26,098,754
Increase (decrease) attributable to	
Benefits accumulated	570,919
Increase for interest due to decrease in discount period	1,665,004
Benefits paid	(982,077)
Plan amendment	195,747
	1,449,593
Actuarial present value of accumulated plan benefits, as of December 31, 2025	$ 27,548,347

Note 8. Related-Party and Party-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50% or more of such an employer or employee association or relatives of such persons.

The Plan has a number of service providers. Such providers are parties in interest under ERISA. The Plan paid $12,703 of administrative fees to the Trustee during the year ended December 31, 2025. Actuarial fees and other administrative fees paid by the Plan were $124,970 for the year ended December 31, 2025. PBGC premiums totaled $175,342 for the year ended December 31, 2025.

Note 9. Tax Status

The Internal Revenue Service (the “IRS”) has determined and informed the Company by a letter dated October 10, 2017, that the Plan and related trust were designed in accordance with the applicable regulations of the Internal Revenue Code (the “IRC”). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable provisions of the IRC. Therefore, the Plan administrator believes that the Plan was qualified and the related trust was tax-exempt as of the financial statement date.

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

Note 10. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities, in general, are exposed to various risks such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants’ account balances and the amounts reported in the statements of 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.

Note 11. Plan Amendments

Effective January 15, 2025, the Plan increased the monthly benefit rate for one of its unions. Effective December 1, 2025, the Plan increased the monthly benefit rate for one of its unions.

Note 12. Subsequent Events

Subsequent events have been evaluated through October 15, 2026, which is the date the financial statements were available to be issued.

Supplemental Schedules

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
EIN 47-4027764 PN 002
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	Identity of Issue	Description of Investment	Cost	Current Value
	Mutual Funds			
	PGIM	High Yield Fund	$ 792,403	$ 748,435
	Common Collective Trusts			
	Prudential Trust Company	US Long Duration Corporate Bond	3,044,245	2,843,666
	SSGA	MSCI ACWI IMI Index	9,149,973	12,023,448
	State Street	20+ Year U.S. Treasury Strips Index Non-Lending Fund	10,330,053	8,475,720
	Alternative Funds			
	Marathon	Emerging Markets Bond Fund	1,170,000	1,177,514
	Pacific Asset Management	Bank Loan Fund	650,000	879,044
	IR&M	Long Credit Fund	2,500,000	2,860,148
	Interest Bearing Cash	Institutional bank deposit account	99,896	99,897
			$ 27,736,570	$ 29,107,872

REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	GRAND TOTAL		2,500,000	2,500,000	2,500,000	0

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
	BROKER: MISCELLANEOUS					
	ISSUE: MS6912823 - CASH HELD AT SSGA					
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.					
01/31/25 S	859	2.197	0	1,888	2,215	-328
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
	ISSUE: MS6912823 - CASH HELD AT SSGA					
02/05/25 S	80,000	1.000	0	80,000	80,000	0
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	26	12.900	0	337	335	2
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	42	13.669	0	573	538	35
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	49	13.536	0	668	633	35
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	37	17.398	0	641	560	81
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	16	14.261	0	227	242	-15
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	38	17.398	0	653	570	83
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/27/25 S	22	12.262	0	266	336	-70
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/28/25 S	50	13.614	0	678	639	39
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
03/26/25 S	34	11.818	0	397	520	-123

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	32	11.818	0	382	500	-118
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	11	11.818	0	134	175	-42
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
04/02/25 S	800	2.273	0	1,819	2,087	-268
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
06/02/25 S	600,000	1.000	0	600,000	600,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/18/25 S	36	18.202	0	653	548	105
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/18/25 S	35	11.318	0	400	531	-131
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
06/30/25 S	51	13.252	0	682	660	22
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 S	341	2.288	0	781	900	-119
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 B	34,990	2.286	80,000	80,000-	80,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
ISSUE: HF0027572 - MARATHON EMERG MKTS BD FD II LP						
08/01/25 S	170,000	1.000	0	170,000	170,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/20/25 S	35	19.400	0	672	529	143
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/20/25 S	35	11.370	0	402	528	-126
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 S	49	13.724	0	673	629	44
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
09/30/25 S	373	107.109	0	40,000	43,975	-3,975
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/25 S	7	107.616	0	768	747	21
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/19/25 S	35	20.113	0	696	531	165
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/19/25 S	36	11.918	0	425	532	-107
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
11/30/25 S	50	14.062	0	705	644	60
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL			5,573,000	8,548,520	8,503,225	45,292
GRAND TOTAL			5,573,000	8,548,520	8,503,225	45,292

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
	SUB-TOTAL OF BUYS # 2		2,610,000	2,610,000	2,610,000	
02/12/25 S	26	12.900	0	337	335	2
02/12/25 S	42	13.669	0	573	538	35
02/12/25 S	49	13.536	0	668	633	35
02/28/25 S	50	13.614	0	678	639	39
06/30/25 S	51	13.252	0	682	660	22
08/29/25 S	49	13.724	0	673	629	44
11/30/25 S	50	14.062	0	705	644	60
	SUB-TOTAL OF SALES # 7		0	4,316	4,078	238
	SUB-TOTAL		2,610,000	2,614,316	2,614,078	238
ISSUE: MS6912823 - CASH HELD AT SSGA						
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
	SUB-TOTAL OF BUYS # 2		680,000	680,000	680,000	
02/05/25 S	80,000	1.000	0	80,000	80,000	0
06/02/25 S	600,000	1.000	0	600,000	600,000	0
	SUB-TOTAL OF SALES # 2		0	680,000	680,000	0
	SUB-TOTAL		680,000	1,360,000	1,360,000	0
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE		UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
01/03/25 B	8		1.000	0	8-	8	
01/15/25 B	228,000		1.000	0	228,000-	228,000	
02/03/25 B	40,068		1.000	0	40,068-	40,068	
02/05/25 B	5		1.000	0	5-	5	
02/14/25 B	5,685		1.000	0	5,685-	5,685	
03/03/25 B	56,431		1.000	0	56,431-	56,431	
03/04/25 B	1,895		1.000	0	1,895-	1,895	
03/05/25 B	17		1.000	0	17-	17	
04/01/25 B	51,834		1.000	0	51,834-	51,834	
04/14/25 B	517,684		1.000	0	517,684-	517,684	
05/02/25 B	8		1.000	0	8-	8	
05/02/25 B	200,000		1.000	0	200,000-	200,000	
05/06/25 B	20,000		1.000	0	20,000-	20,000	
05/14/25 B	180,000		1.000	0	180,000-	180,000	
06/02/25 B	60,000		1.000	0	60,000-	60,000	
06/04/25 B	36		1.000	0	36-	36	
06/30/25 B	110,000		1.000	0	110,000-	110,000	
07/03/25 B	12		1.000	0	12-	12	
07/15/25 B	293,664		1.000	0	293,664-	293,664	
08/04/25 B	84,817		1.000	0	84,817-	84,817	
08/05/25 B	104,817		1.000	0	104,817-	104,817	
08/07/25 B	170,000		1.000	0	170,000-	170,000	
09/02/25 B	70,000		1.000	0	70,000-	70,000	
09/03/25 B	26		1.000	0	26-	26	
09/05/25 B	300,000		1.000	0	300,000-	300,000	
09/11/25 B	130,000		1.000	0	130,000-	130,000	
09/19/25 B	110,000		1.000	0	110,000-	110,000	
10/02/25 B	25		1.000	0	25-	25	
11/04/25 B	40		1.000	0	40-	40	
11/20/25 B	698		1.000	0	698-	698	
12/02/25 B	18		1.000	0	18-	18	
12/02/25 B	100,349		1.000	0	100,349-	100,349	
SUB-TOTAL OF BUYS		# 32		0	2,836,137	2,836,137	
01/02/25 S	69,952		1.000	0	69,952	69,952	0
01/02/25 S	1,552		1.000	0	1,552	1,552	0
01/14/25 S	360		1.000	0	360	360	0
01/21/25 S	2,823		1.000	0	2,823	2,823	0
01/30/25 S	1,532		1.000	0	1,532	1,532	0
02/03/25 S	70,000		1.000	0	70,000	70,000	0
02/13/25 S	8,917		1.000	0	8,917	8,917	0
02/19/25 S	5,685		1.000	0	5,685	5,685	0
02/24/25 S	18,750		1.000	0	18,750	18,750	0

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
02/28/25 S	1,532	1.000	0	1,532	1,532	0
03/03/25 S	96,837	1.000	0	96,837	96,837	0
03/03/25 S	86,431	1.000	0	86,431	86,431	0
03/06/25 S	1,895	1.000	0	1,895	1,895	0
04/01/25 S	56,448	1.000	0	56,448	56,448	0
04/02/25 S	980	1.000	0	980	980	0
04/03/25 S	849	1.000	0	849	849	0
04/03/25 S	1,524	1.000	0	1,524	1,524	0
04/17/25 S	3,942	1.000	0	3,942	3,942	0
04/21/25 S	3,251	1.000	0	3,251	3,251	0
04/29/25 S	400,000	1.000	0	400,000	400,000	0
05/01/25 S	76,841	1.000	0	76,841	76,841	0
05/02/25 S	200,000	1.000	0	200,000	200,000	0
05/14/25 S	180,000	1.000	0	180,000	180,000	0
05/30/25 S	18,750	1.000	0	18,750	18,750	0
05/30/25 S	1,544	1.000	0	1,544	1,544	0
06/02/25 S	77,572	1.000	0	77,572	77,572	0
06/02/25 S	17,500	1.000	0	17,500	17,500	0
06/10/25 S	5,704	1.000	0	5,704	5,704	0
06/25/25 S	3,856	1.000	0	3,856	3,856	0
07/01/25 S	80,974	1.000	0	80,974	80,974	0
07/01/25 S	1,520	1.000	0	1,520	1,520	0
07/21/25 S	3,256	1.000	0	3,256	3,256	0
07/31/25 S	110,000	1.000	0	110,000	110,000	0
07/31/25 S	80,000	1.000	0	80,000	80,000	0
08/01/25 S	80,361	1.000	0	80,361	80,361	0
08/01/25 S	84,812	1.000	0	84,812	84,812	0
08/05/25 S	84,817	1.000	0	84,817	84,817	0
08/11/25 S	18,750	1.000	0	18,750	18,750	0
08/26/25 S	1,916	1.000	0	1,916	1,916	0
08/29/25 S	80,000	1.000	0	80,000	80,000	0
09/02/25 S	82,171	1.000	0	82,171	82,171	0
09/02/25 S	69,177	1.000	0	69,177	69,177	0
09/04/25 S	1,524	1.000	0	1,524	1,524	0
09/11/25 S	135,342	1.000	0	135,342	135,342	0
09/19/25 S	110,000	1.000	0	110,000	110,000	0
09/25/25 S	14,700	1.000	0	14,700	14,700	0
10/01/25 S	80,920	1.000	0	80,920	80,920	0
10/02/25 S	1,524	1.000	0	1,524	1,524	0
10/02/25 S	143,000	1.000	0	143,000	143,000	0
10/20/25 S	3,373	1.000	0	3,373	3,373	0
11/03/25 S	81,585	1.000	0	81,585	81,585	0
11/06/25 S	1,524	1.000	0	1,524	1,524	0
11/19/25 S	698	1.000	0	698	698	0

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/24/25 S	698	1.000	0	698	698	0
12/01/25 S	52,236	1.000	0	52,236	52,236	0
12/02/25 S	1,520	1.000	0	1,520	1,520	0
12/04/25 S	1,154	1.000	0	1,154	1,154	0
SUB-TOTAL OF SALES # 57			0	2,822,579	2,822,579	0
SUB-TOTAL			0	5,658,716	5,658,716	0
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
SUB-TOTAL OF BUYS # 6			1,340,000	1,340,000	1,340,000	
02/27/25 S	22	12.262	0	266	336	-70
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
03/26/25 S	34	11.818	0	397	520	-123
03/26/25 S	32	11.818	0	382	500	-118
03/26/25 S	11	11.818	0	134	175	-42
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
06/18/25 S	35	11.318	0	400	531	-131
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
08/20/25 S	35	11.370	0	402	528	-126
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
11/19/25 S	36	11.918	0	425	532	-107
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL OF SALES # 13			0	662,406	837,949	-175,545
SUB-TOTAL			1,340,000	2,002,406	2,177,949	-175,545
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
SUB-TOTAL OF BUYS # 4			863,000	863,000	863,000	
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
02/27/25 S	37	17.398	0	641	560	81
02/27/25 S	16	14.261	0	227	242	-15
02/27/25 S	38	17.398	0	653	570	83
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
06/18/25 S	36	18.202	0	653	548	105
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538
08/20/25 S	35	19.400	0	672	529	143
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
11/19/25 S	35	20.113	0	696	531	165
SUB-TOTAL OF SALES # 14			0	1,413,542	1,188,274	225,269
SUB-TOTAL			863,000	2,276,542	2,051,274	225,269
GRAND TOTAL			5,493,000	13,911,980	13,862,017	49,961

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
	BROKER: MISCELLANEOUS					
	ISSUE: MS6912823 - CASH HELD AT SSGA					
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.					
01/31/25 S	859	2.197	0	1,888	2,215	-328
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
	ISSUE: MS6912823 - CASH HELD AT SSGA					
02/05/25 S	80,000	1.000	0	80,000	80,000	0
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	26	12.900	0	337	335	2
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	42	13.669	0	573	538	35
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	49	13.536	0	668	633	35
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	37	17.398	0	641	560	81
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	16	14.261	0	227	242	-15
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	38	17.398	0	653	570	83
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/27/25 S	22	12.262	0	266	336	-70
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/28/25 S	50	13.614	0	678	639	39
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
03/26/25 S	34	11.818	0	397	520	-123

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	32	11.818	0	382	500	-118
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	11	11.818	0	134	175	-42
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
04/02/25 S	800	2.273	0	1,819	2,087	-268
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
06/02/25 S	600,000	1.000	0	600,000	600,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/18/25 S	36	18.202	0	653	548	105
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/18/25 S	35	11.318	0	400	531	-131
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
06/30/25 S	51	13.252	0	682	660	22
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 S	341	2.288	0	781	900	-119
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 B	34,990	2.286	80,000	80,000-	80,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
ISSUE: HF0027572 - MARATHON EMERG MKTS BD FD II LP						
08/01/25 S	170,000	1.000	0	170,000	170,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/20/25 S	35	19.400	0	672	529	143
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/20/25 S	35	11.370	0	402	528	-126
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 S	49	13.724	0	673	629	44
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
09/30/25 S	373	107.109	0	40,000	43,975	-3,975
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/25 S	7	107.616	0	768	747	21
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/19/25 S	35	20.113	0	696	531	165
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/19/25 S	36	11.918	0	425	532	-107
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
11/30/25 S	50	14.062	0	705	644	60
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL			5,573,000	8,548,520	8,503,225	45,292
GRAND TOTAL			5,573,000	8,548,520	8,503,225	45,292

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025

INGEVITY CORP RETIREMENT PLAN
ACCOUNT NUMBER 26020300

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

Schedule SB, Line 26 - Schedule of Active Participant Data

January 1, 2025 Valuation
Ingevity Corporation Retirement Plan for Bargained Hourly Employees
(EIN: 47-4027764; PN: 002)

Attained Age	Years of Credited Service									
	Under 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up
Under 25	-	1 (*)	-	-	-	-	-	-	-	-
25 to 29	-	8 (*)	4 (*)	-	-	-	-	-	-	-
30 to 34	2 (*)	19 (*)	19 (*)	5 (*)		-	-	-	-	-
35 to 39	1 (*)	7 (*)	12 (*)	8 (*)	2 (*)	-	-	-	-	-
40 to 44	-	9 (*)	9 (*)	9 (*)	2 (*)	-	-	-	-	-
45 to 49	-	6 (*)	9 (*)	9 (*)	5 (*)	5 (*)	-	-	-	-
50 to 54	-	5 (*)	8 (*)	7 (*)	8 (*)	8 (*)	2 (*)	4 (*)	-	-
55 to 59	-	2 (*)	5 (*)	9 (*)	4 (*)	7 (*)	14 (*)	7 (*)	2 (*)	-
60 to 64	-	-	-	2 (*)	2 (*)	4 (*)	5 (*)	7 (*)	2 (*)	1 (*)
65 to 69	-	-	1 (*)	1 (*)	1 (*)	-	1 (*)	-	-	-
70 & up	-	-	-	-	-	-	-	-	-	1 (*)

* Average frozen benefits are not shown since there are fewer than 1,000 active participants in this plan

Appendix B

Statement of Actuarial Assumptions and Methods

Minimum Funding Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 (as prescribed by IRC 430) and adjusted to reflect ARPA:

- Segment 1 (0 – 5 years) 5.07%
- Segment 2 (5 to 20 years) 5.31%
- Segment 3 (more than 20 years) 5.50%
- Effective Interest Rate 5.40%

Maximum Deductible Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 (as prescribed by IRC 430) as follows:

- Segment 1 (0 – 5 years) 5.07%
- Segment 2 (5 to 20 years) 5.33%
- Segment 3 (more than 20 years) 5.36%
- Effective Interest Rate 5.34%

Annual Expected Return on Assets

Interest Rate for developing Actuarial Value of Assets; limited to third segment rate 6.50%

Rationale: as selected by the Plan Sponsor

PBGC Annual Interest Rates

24-month segment rates averaged through the end of August 2024 and published in September 2024 using the Alternative Method (as prescribed by IRC 430) as follows:

- Segment 1 (0 – 5 years) 5.07%
- Segment 2 (5 to 20 years) 5.33%
- Segment 3 (more than 20 years) 5.36%
- Effective Interest Rate 5.34%

Salary Scale

Not applicable

Mortality

Funding: IRS Mortality Tables for 2025 based on Pri-2012 Tables and projected generationally with adjusted Scale MP-2021, with different rates for annuitants and nonannuitants (as prescribed by IRC 430).

Appendix B (Continued)

Rates of Retirement

Age	Rate
55-60	6%
61	15
62	35
63-64	25
65	40
66-69	30
70+	100

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Rates of Turnover

Service	Turnover
0	.2500
3	.1300
6	.0700
9	.0400
12+	.0250

Rates of Disability

Age	Male	Female
20	.00040	.00040
25	.00040	.00050
30	.00040	.00060
35	.00050	.00100
40	.00110	.00180
45	.00220	.00340
50	.00460	.00560
55	.00960	.00890
60	.01610	.01270
65	.00000	.00000

Assumptions Made In Valuing Spouse's Benefit

Eighty percent of employees included in the valuation are assumed to be married. The wife is assumed to be three years younger than the husband.

Optional Form Selection

All employees are assumed to elect the life annuity form of benefit.

Annual Increases to Benefit Multiplier

The benefit multiplier in effect as of the valuation date is valued.

Standing Elections

The client has not signed an election that provides for the automatic use of the Carryover Balance and/or Prefunding Balance if necessary to meet the minimum funding requirement.

Appendix B (Continued)

Asset Method

Funding: Market Value of Assets plus interest adjusted accrued but unpaid contributions as of the valuation date plus an adjustment to defer full recognition of investment losses and gains over a two-year period. The investment (gain)/loss for every year equals the market value at the beginning of the year projected to the end of the year using the interest rate above, but no greater than the third segment rate for the plan year, minus the end of the year actual market value. The actuarial value of assets will be no less than 90% and no more than 110% of the market value (including interest-adjusted accrued but unpaid contributions). Note that due to the regulatory constraint on the interest rate, a characteristic of this asset valuation method is that, over time, it may be more likely to produce an actuarial value of assets that is less than the market value of assets.

Funding Method

Pure Unit Credit

The actuarial liabilities shown in this report are determined using software purchased from an outside vendor which was developed for this purpose. Certain information is entered into this model in order to generate the liabilities. These inputs include economic and non-economic assumptions, plan provisions, and census information. We rely on the coding within the software to value the liabilities using the actuarial methods and assumptions selected. Both the input to and the output from the model are checked for accuracy and reviewed for reasonableness.

Employees Valued

Only participants as of the valuation date were valued.

Changes in Assumptions and Methods since the Last Actuarial Valuation

The interest rates used for determining the funding target were 4.75%, 4.87% and 5.59%. These rates were updated to the rates required for the current plan year.

The mortality table for the funding target was changed as required under PPA ’06.

Justification for Changes in Actuarial Assumptions

The only assumption changes were to prescribed actuarial assumptions or as a result of At-Risk status. Therefore, the plan did not need IRS approval to change assumptions and there is no need to disclose any “Change in Actuarial Assumptions.”

REPORTABLE TRANSACTIONS - SINGLE / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	GRAND TOTAL		2,500,000	2,500,000	2,500,000	0

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

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	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
	BROKER: MISCELLANEOUS					
	ISSUE: MS6912823 - CASH HELD AT SSGA					
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.					
01/31/25 S	859	2.197	0	1,888	2,215	-328
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
	ISSUE: MS6912823 - CASH HELD AT SSGA					
02/05/25 S	80,000	1.000	0	80,000	80,000	0
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	26	12.900	0	337	335	2
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	42	13.669	0	573	538	35
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	49	13.536	0	668	633	35
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	37	17.398	0	641	560	81
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	16	14.261	0	227	242	-15
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	38	17.398	0	653	570	83
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/27/25 S	22	12.262	0	266	336	-70
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/28/25 S	50	13.614	0	678	639	39
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
03/26/25 S	34	11.818	0	397	520	-123

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	32	11.818	0	382	500	-118
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	11	11.818	0	134	175	-42
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
04/02/25 S	800	2.273	0	1,819	2,087	-268
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
06/02/25 S	600,000	1.000	0	600,000	600,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/18/25 S	36	18.202	0	653	548	105
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/18/25 S	35	11.318	0	400	531	-131
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
06/30/25 S	51	13.252	0	682	660	22
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 S	341	2.288	0	781	900	-119
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 B	34,990	2.286	80,000	80,000-	80,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
ISSUE: HF0027572 - MARATHON EMERG MKTS BD FD II LP						
08/01/25 S	170,000	1.000	0	170,000	170,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/20/25 S	35	19.400	0	672	529	143
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/20/25 S	35	11.370	0	402	528	-126
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 S	49	13.724	0	673	629	44
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
09/30/25 S	373	107.109	0	40,000	43,975	-3,975
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/25 S	7	107.616	0	768	747	21
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/19/25 S	35	20.113	0	696	531	165
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/19/25 S	36	11.918	0	425	532	-107
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
11/30/25 S	50	14.062	0	705	644	60
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL			5,573,000	8,548,520	8,503,225	45,292
GRAND TOTAL			5,573,000	8,548,520	8,503,225	45,292

REPORTABLE TRANSACTIONS - SERIES / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
	SUB-TOTAL OF BUYS # 2		2,610,000	2,610,000	2,610,000	
02/12/25 S	26	12.900	0	337	335	2
02/12/25 S	42	13.669	0	573	538	35
02/12/25 S	49	13.536	0	668	633	35
02/28/25 S	50	13.614	0	678	639	39
06/30/25 S	51	13.252	0	682	660	22
08/29/25 S	49	13.724	0	673	629	44
11/30/25 S	50	14.062	0	705	644	60
	SUB-TOTAL OF SALES # 7		0	4,316	4,078	238
	SUB-TOTAL		2,610,000	2,614,316	2,614,078	238
ISSUE: MS6912823 - CASH HELD AT SSGA						
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
	SUB-TOTAL OF BUYS # 2		680,000	680,000	680,000	
02/05/25 S	80,000	1.000	0	80,000	80,000	0
06/02/25 S	600,000	1.000	0	600,000	600,000	0
	SUB-TOTAL OF SALES # 2		0	680,000	680,000	0
	SUB-TOTAL		680,000	1,360,000	1,360,000	0
ISSUE: VP4560000 - ALLSPRING GOVT MM FD-INSTL #1751						

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD		SHARES/ PAR VALUE		UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
01/03/25	B	8		1.000	0	8-	8	
01/15/25	B	228,000		1.000	0	228,000-	228,000	
02/03/25	B	40,068		1.000	0	40,068-	40,068	
02/05/25	B	5		1.000	0	5-	5	
02/14/25	B	5,685		1.000	0	5,685-	5,685	
03/03/25	B	56,431		1.000	0	56,431-	56,431	
03/04/25	B	1,895		1.000	0	1,895-	1,895	
03/05/25	B	17		1.000	0	17-	17	
04/01/25	B	51,834		1.000	0	51,834-	51,834	
04/14/25	B	517,684		1.000	0	517,684-	517,684	
05/02/25	B	8		1.000	0	8-	8	
05/02/25	B	200,000		1.000	0	200,000-	200,000	
05/06/25	B	20,000		1.000	0	20,000-	20,000	
05/14/25	B	180,000		1.000	0	180,000-	180,000	
06/02/25	B	60,000		1.000	0	60,000-	60,000	
06/04/25	B	36		1.000	0	36-	36	
06/30/25	B	110,000		1.000	0	110,000-	110,000	
07/03/25	B	12		1.000	0	12-	12	
07/15/25	B	293,664		1.000	0	293,664-	293,664	
08/04/25	B	84,817		1.000	0	84,817-	84,817	
08/05/25	B	104,817		1.000	0	104,817-	104,817	
08/07/25	B	170,000		1.000	0	170,000-	170,000	
09/02/25	B	70,000		1.000	0	70,000-	70,000	
09/03/25	B	26		1.000	0	26-	26	
09/05/25	B	300,000		1.000	0	300,000-	300,000	
09/11/25	B	130,000		1.000	0	130,000-	130,000	
09/19/25	B	110,000		1.000	0	110,000-	110,000	
10/02/25	B	25		1.000	0	25-	25	
11/04/25	B	40		1.000	0	40-	40	
11/20/25	B	698		1.000	0	698-	698	
12/02/25	B	18		1.000	0	18-	18	
12/02/25	B	100,349		1.000	0	100,349-	100,349	
SUB-TOTAL OF BUYS			# 32		0	2,836,137	2,836,137	
01/02/25	S	69,952		1.000	0	69,952	69,952	0
01/02/25	S	1,552		1.000	0	1,552	1,552	0
01/14/25	S	360		1.000	0	360	360	0
01/21/25	S	2,823		1.000	0	2,823	2,823	0
01/30/25	S	1,532		1.000	0	1,532	1,532	0
02/03/25	S	70,000		1.000	0	70,000	70,000	0
02/13/25	S	8,917		1.000	0	8,917	8,917	0
02/19/25	S	5,685		1.000	0	5,685	5,685	0
02/24/25	S	18,750		1.000	0	18,750	18,750	0

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
02/28/25 S	1,532	1.000	0	1,532	1,532	0
03/03/25 S	96,837	1.000	0	96,837	96,837	0
03/03/25 S	86,431	1.000	0	86,431	86,431	0
03/06/25 S	1,895	1.000	0	1,895	1,895	0
04/01/25 S	56,448	1.000	0	56,448	56,448	0
04/02/25 S	980	1.000	0	980	980	0
04/03/25 S	849	1.000	0	849	849	0
04/03/25 S	1,524	1.000	0	1,524	1,524	0
04/17/25 S	3,942	1.000	0	3,942	3,942	0
04/21/25 S	3,251	1.000	0	3,251	3,251	0
04/29/25 S	400,000	1.000	0	400,000	400,000	0
05/01/25 S	76,841	1.000	0	76,841	76,841	0
05/02/25 S	200,000	1.000	0	200,000	200,000	0
05/14/25 S	180,000	1.000	0	180,000	180,000	0
05/30/25 S	18,750	1.000	0	18,750	18,750	0
05/30/25 S	1,544	1.000	0	1,544	1,544	0
06/02/25 S	77,572	1.000	0	77,572	77,572	0
06/02/25 S	17,500	1.000	0	17,500	17,500	0
06/10/25 S	5,704	1.000	0	5,704	5,704	0
06/25/25 S	3,856	1.000	0	3,856	3,856	0
07/01/25 S	80,974	1.000	0	80,974	80,974	0
07/01/25 S	1,520	1.000	0	1,520	1,520	0
07/21/25 S	3,256	1.000	0	3,256	3,256	0
07/31/25 S	110,000	1.000	0	110,000	110,000	0
07/31/25 S	80,000	1.000	0	80,000	80,000	0
08/01/25 S	80,361	1.000	0	80,361	80,361	0
08/01/25 S	84,812	1.000	0	84,812	84,812	0
08/05/25 S	84,817	1.000	0	84,817	84,817	0
08/11/25 S	18,750	1.000	0	18,750	18,750	0
08/26/25 S	1,916	1.000	0	1,916	1,916	0
08/29/25 S	80,000	1.000	0	80,000	80,000	0
09/02/25 S	82,171	1.000	0	82,171	82,171	0
09/02/25 S	69,177	1.000	0	69,177	69,177	0
09/04/25 S	1,524	1.000	0	1,524	1,524	0
09/11/25 S	135,342	1.000	0	135,342	135,342	0
09/19/25 S	110,000	1.000	0	110,000	110,000	0
09/25/25 S	14,700	1.000	0	14,700	14,700	0
10/01/25 S	80,920	1.000	0	80,920	80,920	0
10/02/25 S	1,524	1.000	0	1,524	1,524	0
10/02/25 S	143,000	1.000	0	143,000	143,000	0
10/20/25 S	3,373	1.000	0	3,373	3,373	0
11/03/25 S	81,585	1.000	0	81,585	81,585	0
11/06/25 S	1,524	1.000	0	1,524	1,524	0
11/19/25 S	698	1.000	0	698	698	0

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE | **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 | **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/24/25 S	698	1.000	0	698	698	0
12/01/25 S	52,236	1.000	0	52,236	52,236	0
12/02/25 S	1,520	1.000	0	1,520	1,520	0
12/04/25 S	1,154	1.000	0	1,154	1,154	0
SUB-TOTAL OF SALES # 57			0	2,822,579	2,822,579	0
SUB-TOTAL			0	5,658,716	5,658,716	0
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
SUB-TOTAL OF BUYS # 6			1,340,000	1,340,000	1,340,000	
02/27/25 S	22	12.262	0	266	336	-70
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
03/26/25 S	34	11.818	0	397	520	-123
03/26/25 S	32	11.818	0	382	500	-118
03/26/25 S	11	11.818	0	134	175	-42
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
06/18/25 S	35	11.318	0	400	531	-131
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
08/20/25 S	35	11.370	0	402	528	-126
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
11/19/25 S	36	11.918	0	425	532	-107
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL OF SALES # 13			0	662,406	837,949	-175,545
SUB-TOTAL			1,340,000	2,002,406	2,177,949	-175,545
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	

REPORTABLE TRANSACTIONS - SERIES / BY ISSUE **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SERIES / BY ISSUE

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
SUB-TOTAL OF BUYS # 4			863,000	863,000	863,000	
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
02/27/25 S	37	17.398	0	641	560	81
02/27/25 S	16	14.261	0	227	242	-15
02/27/25 S	38	17.398	0	653	570	83
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
06/18/25 S	36	18.202	0	653	548	105
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538
08/20/25 S	35	19.400	0	672	529	143
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
11/19/25 S	35	20.113	0	696	531	165
SUB-TOTAL OF SALES # 14			0	1,413,542	1,188,274	225,269
SUB-TOTAL			863,000	2,276,542	2,051,274	225,269
GRAND TOTAL			5,493,000	13,911,980	13,862,017	49,961

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
	BEGINNING MARKET VALUE		23,407,450.86			
	COMPARATIVE VALUE (5%)		1,170,372.54			
	BROKER: MISCELLANEOUS					
	ISSUE: MS6912823 - CASH HELD AT SSGA					
01/31/25 B	80,000	1.000	80,000	80,000-	80,000	
	ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.					
01/31/25 S	859	2.197	0	1,888	2,215	-328
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
01/31/25 S	4,543	17.609	0	80,000	69,003	10,997
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
01/31/25 B	12,978	11.558	150,000	150,000-	150,000	
	ISSUE: MS6912823 - CASH HELD AT SSGA					
02/05/25 S	80,000	1.000	0	80,000	80,000	0
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 B	194,899	12.827	2,500,000	2,500,000-*	2,500,000	
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	26	12.900	0	337	335	2
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	42	13.669	0	573	538	35
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/12/25 S	49	13.536	0	668	633	35
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	37	17.398	0	641	560	81
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	16	14.261	0	227	242	-15
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/27/25 S	38	17.398	0	653	570	83
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/27/25 S	22	12.262	0	266	336	-70
	ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)					
02/28/25 B	15,985	17.516	280,000	280,000-	280,000	
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
02/28/25 S	20,168	12.396	0	250,000	312,301	-62,301
	ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC					
02/28/25 S	50	13.614	0	678	639	39
	ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1					
03/26/25 S	34	11.818	0	397	520	-123

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	32	11.818	0	382	500	-118
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
03/26/25 S	11	11.818	0	134	175	-42
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
03/31/25 S	4,159	16.832	0	70,000	63,417	6,583
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
04/02/25 S	800	2.273	0	1,819	2,087	-268
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/08/25 S	17,515	11.990	0	210,000	271,213	-61,213
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/10/25 B	13,838	15.176	210,000	210,000-	210,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
04/28/25 B	11,861	16.862	200,000	200,000-	200,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
04/28/25 B	16,909	11.828	200,000	200,000-	200,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/05/25 S	11,588	17.259	0	200,000	177,040	22,960
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/05/25 B	15,766	11.417	180,000	180,000-	180,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
05/30/25 B	600,000	1.000	600,000	600,000-	600,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
05/30/25 S	33,376	17.977	0	600,000	509,901	90,099
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
05/30/25 B	48,263	11.189	540,000	540,000-	540,000	
ISSUE: MS6912823 - CASH HELD AT SSGA						
06/02/25 S	600,000	1.000	0	600,000	600,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/18/25 S	36	18.202	0	653	548	105
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/18/25 S	35	11.318	0	400	531	-131
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
06/27/25 S	4,273	18.722	0	80,000	65,282	14,718
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
06/27/25 S	2,622	11.442	0	30,000	39,388	-9,388
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
06/30/25 S	51	13.252	0	682	660	22
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 S	341	2.288	0	781	900	-119
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
07/31/25 B	34,990	2.286	80,000	80,000-	80,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
07/31/25 S	11,550	19.047	0	220,000	176,462	43,538

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
07/31/25 B	17,510	11.422	200,000	200,000-	200,000	
ISSUE: HF0027572 - MARATHON EMERG MKTS BD FD II LP						
08/01/25 S	170,000	1.000	0	170,000	170,000	0
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/20/25 S	35	19.400	0	672	529	143
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/20/25 S	35	11.370	0	402	528	-126
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
08/29/25 S	3,585	19.527	0	70,000	54,767	15,233
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
08/29/25 B	6,211	11.270	70,000	70,000-	70,000	
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 S	49	13.724	0	673	629	44
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
08/29/25 B	8,097	13.586	110,000	110,000-	110,000	
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
09/10/25 S	4,544	19.806	0	90,000	69,422	20,578
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
09/10/25 S	3,334	11.998	0	40,000	49,693	-9,693
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
09/30/25 S	373	107.109	0	40,000	43,975	-3,975
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
10/01/25 B	8,515	20.317	173,000	173,000-	173,000	
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
10/01/25 S	2,506	11.971	0	30,000	37,354	-7,354
ISSUE: 628999427 - PRUDENTIAL TRUST COMPANY U.S.						
10/31/25 S	7	107.616	0	768	747	21
ISSUE: 932991763 - SSGA MSCI ACWI IMI IX NL FD (ZVRH)						
11/19/25 S	35	20.113	0	696	531	165
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
11/19/25 S	36	11.918	0	425	532	-107
ISSUE: HN0029027 - IR&M LONG CREDIT FUND LLC						
11/30/25 S	50	14.062	0	705	644	60
ISSUE: 600990063 - SSGA 20+ YR US STRIPS IDX NL CMCA1						
12/01/25 S	8,378	11.936	0	100,000	124,878	-24,878
SUB-TOTAL			5,573,000	8,548,520	8,503,225	45,292
GRAND TOTAL			5,573,000	8,548,520	8,503,225	45,292

REPORTABLE TRANSACTIONS - SINGLE / BY BROKER **INGEVITY CORP RETIREMENT PLAN**
FOR THE PERIOD JANUARY 1, 2025 THROUGH DECEMBER 31, 2025 **ACCOUNT NUMBER 26020300**

SINGLE / BY BROKER

DATE BOUGHT/SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS

F O O T N O T E S

* = SINGLE TRANSACTION IS 5% REPORTABLE
B = BUY TRANSACTION
S = SELL TRANSACTION
R = REINVESTMENT TRANSACTION

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
Ingevity Corporation Retirement Plan for Bargained Hourly Employees

B Three-digit plan number (PN) ▶ 002

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

D Employer Identification Number (EIN)
47-4027764

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	27,270,605
b Actuarial value	**2b**	27,405,795

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	58	11,139,491	11,139,491
b For terminated vested participants	60	2,127,110	2,127,110
c For active participants	271	16,312,264	17,540,797
d Total	389	29,578,865	30,807,398

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**	5.40%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	652,193
b Expected plan-related expenses	**6b**	257,296
c Target normal cost	**6c**	909,489

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

Debbie Sichko DPS
Signature of actuary

10/15/2026 10/15/2026
Date

DEBBIE P. SICHKO, E.A., F.S.A.
Type or print name of actuary

2607411
Most recent enrollment number

USI Consulting Group
Firm name

216-343-0225
Telephone number (including area code)

1001 Lakeside Avenue
SUITE 1200
CLEVELAND OH 44114
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	921,386
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	921,386
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 2.17%	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		862,311
	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 5.24%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		18,712
	c Total available at beginning of current plan year to add to prefunding balance		881,023
	d Portion of (c) to be added to prefunding balance		880,984
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	880,984

Part III Funding Percentages

14	Funding target attainment percentage	14	86.09%
15	Adjusted funding target attainment percentage	15	86.09%
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	92.91%
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
01/14/2026	299,450	0			
09/14/2026	450,000	0			
			Totals ► 18(b)	749,450	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	695,059

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

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

21 Discount rate:

a Segment rates:

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

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	62

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	909,489
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	4,282,587	420,485
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**	1,329,974

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	873,316	873,316

36 Additional cash requirement (line 34 minus line 35)	**36**	456,658
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	695,059

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

a Total (excess, if any, of line 37 over line 36)	**38a**	238,401
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	238,401
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Ingevity Corporation – Retirement Plan for Bargained Hourly Employees
January 1, 2025 Valuation
EIN/PN: 47-4027764 / 002

Rates of Retirement

Age	Retirement Rate
55-60	.06
61	.15
62	.35
63-64	.25
65	.40
66-69	.30
70	1.00

Weighted Average Retirement Age is 62. This is the average retirement age for someone eligible to retire at all ages using the assumed retirement rates and no other decrements.

Appendix A
Summary of Principal Plan Provisions

Plan Sponsor	Ingevity Corporation
EIN/PN	47-4027764/002
Effective Date	May 16, 2016; Last amended effective January 1, 2023.
Plan Year	The 12-month period beginning each January 1.
Participation Service	All hourly employees of the Employer, subject to the appropriate collective bargaining agreements, are eligible to participate in the Plan upon their date of hire. Effective July 1, 2018 participation is closed to new entrants in Locals 508 and 183. Effective January 1, 2019 participation is closed to entrants in Local 1753. Effective July 1, 2020 participation is closed to entrants in Local 775. Effective April 15, 2021 participation is closed to entrants in Local 1362. Effective May 1, 2021 participation is closed to entrants in Local 464. Service is elapsed time from hire date where partial months count as whole months. Benefit service does not include service when not under a bargaining agreement.
Accrued Benefit	The Accrued Benefit at any time prior to a participant's Normal Retirement Date shall be determined by Union using Benefit Service and multiplier as of the date of determination:

Covington Mill-PACE, Local 675

If Termination Occurs	Multiplier
5/16/2016-9/13/2017	$59.00
9/14/2017-3/31/2018	$59.50
4/01/2018-3/31/2019	$60.00
4/01/2019-3/31/2020	$60.50
4/01/2020-3/31/2021	$61.00
4/01/2021-8/30/2022	$61.50
9/01/2022 onward	$63.50

Effective September 1, 2022, accrued benefits are frozen for participants of Local 675 who elected to 'opt-out' of the plan.

Appendix A (Continued)

Accrued Benefit (Continued)

Charleston Chemical Plant, Local 508

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	$51.00
1/01/2017-6/30/2018	$51.50
7/01/2018-12/31/2022 (assumed)	$53.50
1/01/2023 onward (assumed)	$55.50

Effective December 31, 2018, accrued benefits are frozen for participants of Local 508 who elected to 'opt-out' of the plan.

Charleston Chemical Plant, Local 183

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	$51.00
1/01/2017-6/30/2018	$51.50
7/01/2018-12/31/2022	$53.50
1/01/2023 onward	$55.50

Effective December 31, 2018, accrued benefits are frozen for participants of Local 183 who elected to 'opt-out' of the plan.

Charleston Chemical Plant, Local 1753

If Termination Occurs	Multiplier
5/16/2016-12/31/2016	$51.00
1/01/2017-1/02/2019	$51.50
1/03/2019-3/31/2023	$53.50
4/01/2023 onward	$55.50

Effective March 29, 2019, accrued benefits are frozen for participants of Local 1753 who elect to 'opt-out' of the plan.

Wickliffe Carbon Plant, Local 775

If Termination Occurs	Multiplier
5/16/2016-3/31/2017	$39.00
4/01/2017-3/31/2018	$40.00
4/01/2018-3/31/2019	$41.00
4/01/2019-6/30/2020	$42.00
7/01/2020-3/31/2023	$45.00
4/01/2023 onward	$49.00

Effective July 1, 2020, accrued benefits are frozen for participants of Local 775 who elect to 'opt-out' of the plan.

Appendix A (Continued)

Accrued Benefit (Continued)

Covington Mill-IBEW, Local 464	Multiplier
5/16/2016-4/30/2021	$59.00
5/01/2021 onward	$63.00

Effective June 30, 2021, accrued benefits are frozen for participants of Local 464 who elect to 'opt-out' of the plan.

Georgia-Pacific, Local 1362

If Termination Occurs	Multiplier
3/8/2018-12/31/2018	$39.00
1/1/2019-12/31/2019	$40.00
1/1/2020-2/28/2021	$41.00
3/01/2021 onward	$45.00

The Accrued Benefit for members of Local 1362 is offset by their accrued benefit as of March 8, 2018, the acquisition date.

Effective June 30, 2021 or August 31, 2021, accrued benefits are frozen for participants of Local 1362 who elect to 'opt-out' of the plan.

Normal Retirement Benefit

Eligibility:

Age 65.

Monthly Benefit:

The amount of the monthly benefit to be paid for life is the product of the benefit service and the applicable benefit multiplier.

Early Retirement Benefit

Eligibility:

Age 55 and 5 Years of Service.

Monthly Benefit:

If the participant has at least 20 years of Benefit Service then the Accrued Benefit is reduced 6% per year from Age 62. Otherwise, the Accrued Benefit is reduced 3% per year for the first three years and 6% for the next seven years from Normal Retirement Age.

Appendix A (Continued)

Termination Benefit	*Eligibility:* Upon termination of employment prior to retirement after completion of at least 5 Years of Service. *Monthly Benefit*: The Accrued Benefit payable at the Normal Retirement Date. Reduced benefits are available based on provisions for Early Retirement.
Disability Benefit	*Eligibility:* Must be totally and permanently disabled prior to retirement or separation from service and have at least 10 years of Service. *Monthly Benefit:* The unreduced Accrued Benefit as of the Disability Retirement Date.
Death Benefit	*Eligibility:* 100% vested and married for at the time of death. *Monthly Benefit*: The surviving spouse benefit is determined assuming the participant terminates at the earlier of his actual termination date and his date of death and survives to his earliest retirement age and elects a joint and survivor annuity and then dies. If death occurs prior to 55 the survivor percent is 50%, otherwise, it's 75%.
Benefits Available As Lump Sums	This plan pays only small benefit amounts as lump sums ($1,000 or less).
Maximum Benefit Limit	The Internal Revenue Code Section 415 Maximum Benefit payable as a life annuity at Social Security Normal Retirement Age.
Changes in Plan Provisions	None

Ingevity Corporation Retirement Plan for Bargained Hourly Employees
EIN 47-4027764 PN 002
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	Identity of Issue	Description of Investment	Cost	Current Value
	Mutual Funds			
	PGIM	High Yield Fund	$ 792,403	$ 748,435
	Common Collective Trusts			
	Prudential Trust Company	US Long Duration Corporate Bond	3,044,245	2,843,666
	SSGA	MSCI ACWI IMI Index	9,149,973	12,023,448
	State Street	20+ Year U.S. Treasury Strips Index Non-Lending Fund	10,330,053	8,475,720
	Alternative Funds			
	Marathon	Emerging Markets Bond Fund	1,170,000	1,177,514
	Pacific Asset Management	Bank Loan Fund	650,000	879,044
	IR&M	Long Credit Fund	2,500,000	2,860,148
	Interest Bearing Cash	Institutional bank deposit account	99,896	99,897
			$ 27,736,570	$ 29,107,872

Schedule SB, Line 32 – Schedule of Amortization Bases
Ingevity Corporation – Retirement Plan for Bargained Hourly Employees
January 1, 2025 Valuation
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Exhibit VIII
Schedule of Amortization Bases

Shortfall Amortization Bases[1]

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2025	$ 2,305,522	15	$ 214,968
1/1/2024	(453,472)	14	(44,283)
1/1/2023	2,430,537	13	249,800
Total	$ 4,282,587		$ 420,485

Waiver Amortization Bases

Date Established	Present Value of Payments	Remaining Years	Amortization Installment
1/1/2024	$ 0	N/A	$ 0
Total	$ 0		$ 0

[1] 15-year amortization was adopted effective with the 2022 plan year per the terms of ARPA.