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
SUMITOMO RUBBER USA, LLC PENSION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 04/01/1950

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)
SUMITOMO RUBBER USA, LLC

PO BOX 1109
BUFFALO, NY 14240-1109

2b Employer Identification Number (EIN) 34-1899137

2c Plan Sponsor's telephone number 716-879-8200

2d Business code (see instructions) 326200

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	KRISTEN C BLUHM
	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:

a Sponsor's name SUMITOMO RUBBER USA, LLC

c Plan Name SUMITOMO RUBBER USA, LLC 1950 PENSION PLAN

4b EIN 34-1899137

4d PN 002

5	Total number of participants at the beginning of the plan year	**5**	2882
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)**	378
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	0
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	0
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	0
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	0
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1B

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

- (1) [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 _____
- (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
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	328911799
b Actuarial value	**2b**	333080214

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	2226	234426722	234426722
b For terminated vested participants	306	15311495	15311495
c For active participants	378	50236302	50236302
d Total	2910	299974519	299974519

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**	5.32 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	2525656
c Target normal cost	**6c**	2525656

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

10/08/2026
Date

KEITH OKRESS
Type or print name of actuary

26-06965
Most recent enrollment number

WILLIS TOWERS WATSON US LLC
Firm name

216-937-4000
Telephone number (including area code)

1001 LAKESIDE AVENUE, SUITE 1500
CLEVELAND, OH 44114-1172
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	124658845
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	5984976
9	Amount remaining (line 7 minus line 8)	0	118673869
10	Interest on line 9 using prior year's actual return of 2.30 %	0	2729499
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.07 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections		121403368
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	111.03 %
15	Adjusted funding target attainment percentage	15	111.03 %
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	80.89 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

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

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

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

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

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	57

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**	2525656
b Excess assets, if applicable, but not greater than line 31a	**31b**	2525656

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

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

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

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

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

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

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

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

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

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

A Name of plan
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

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)

(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 ☐

(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
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

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: SUMITOMO MASTER TRUST

b Name of sponsor of entity listed in (a): SUMITOMO RUBBER USA, LLC

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
34-1899137-020	M	31669296

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	329100560	31669296
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	329100560	31669296
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	329100560	31669296

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		5031326
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		5031326
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	59764636	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)	242697954	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		302462590
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		0
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		302462590
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-297431264
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: BOBER MARKEY FEDOROVICH & COMPANY **(2)** EIN: 34-1523030

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		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? [X] Yes [ ] No

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 591987.

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
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

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 |

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

EIN(s): 36-1561860

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

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | 3 | 424

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: 100.00 % 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_____.

BOBER MARKEY FEDOROVICH
CERTIFIED PUBLIC ACCOUNTANTS/BUSINESS ADVISORS
A PROFESSIONAL CORPORATION

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AKRON, OH 44333-3119
330.762.9785

600 SUPERIOR AVENUE EAST, SUITE 925
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INDEPENDENT AUDITORS' REPORT

Plan Administrator and Participants of
Sumitomo Rubber USA, LLC Pension Plan f/k/a
Sumitomo Rubber USA, LLC 1950 Pension Plan
Buffalo, New York

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

We have performed audits of the accompanying financial statements of Sumitomo Rubber USA, LLC Pension Plan f/k/a Sumitomo Rubber USA, LLC 1950 Pension Plan ("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). The financial statements comprise the statements of net assets available for benefits and of accumulated plan benefits as of December 31, 2025 (in liquidation) and 2024 (ongoing), and the related statement of changes in net assets available for benefits and of changes in accumulated plan benefits for the year ended December 31, 2025 (in liquidation), and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 4 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 Auditors' Responsibilities for the Audits of the Financial Statements section—

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information

prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audits 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.

Emphasis of Matter – Plan Termination and Liquidation Basis of Accounting

As discussed in Note 2 to the financial statements, the governing body of Sumitomo Rubber USA, LLC Pension Plan f/k/a Sumitomo Rubber USA, LLC 1950 Pension Plan approved a plan of liquidation as of March 31, 2025, and management determined liquidation is imminent. As a result, the Plan has changed its basis of accounting from the going concern basis used in presenting the 2024 financial statements to the liquidation basis used in presenting the 2025 financial statements. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

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

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

Auditors' Responsibilities for the Audits of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audits section of our report, our objectives are to obtain reasonable assurance about whether the 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 generally accepted auditing standards 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 generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audits.
- 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 audits in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

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 accounting principles generally accepted in the United States of America.

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



BOBER, MARKEY, FEDOROVICH & COMPANY
Akron, Ohio

October 15, 2026

SCHEDULE SB ATTACHMENTS

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

	Attained Years of Credited Service[1]										
Attained Age	Under 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40 & Over	Total
Under 25	0	0	0	0	0	0	0	0	0	0	0
25-29	0	0	0	0	0	0	0	0	0	0	0
30-34	0	0	0	0	0	0	0	0	0	0	0
35-39	0	0	3	0	0	0	0	0	0	0	3
40-44	0	1	13	4	0	0	0	0	0	0	18
45-49	0	1	18	24	8	0	0	0	0	0	51
50-54	0	1	13	46	35	16	0	0	0	0	111
55-59	0	0	12	39	28	34	2	0	0	0	115
60-64	0	0	8	26	11	17	6	0	0	0	68
65-69	0	0	1	4	4	2	0	0	0	0	11
70 & over	0	0	0	0	0	1	0	0	0	0	1
Total	0	3	68	143	86	70	8	0	0	0	378

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

Plan Name: Sumitomo Rubber USA Pension Plan
EIN / PN: 34-1899137/002
Plan Sponsor: Sumitomo Rubber USA, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

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

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	25,994,717	488,561	25,534,332	52,017,610
2026	2,192,235	490,432	24,146,403	26,829,070
2027	2,147,476	583,696	23,343,591	26,074,763
2028	2,075,541	690,397	22,503,924	25,269,862
2029	1,997,193	784,409	21,628,479	24,410,081
2030	1,891,942	840,810	20,737,150	23,469,902
2031	1,789,406	928,262	19,815,577	22,533,245
2032	1,726,528	1,025,640	18,863,509	21,615,677
2033	1,638,195	1,077,899	17,886,554	20,602,648
2034	1,577,133	1,133,838	16,884,421	19,595,392
2035	1,571,177	1,181,812	15,861,218	18,614,207
2036	1,564,280	1,206,287	14,823,139	17,593,706
2037	1,555,960	1,226,816	13,778,227	16,561,003
2038	1,545,995	1,237,493	12,732,860	15,516,348
2039	1,536,626	1,253,150	11,695,510	14,485,286
2040	1,523,562	1,279,124	10,675,214	13,477,900
2041	1,502,643	1,278,319	9,680,913	12,461,875
2042	1,476,397	1,254,134	8,712,811	11,443,342
2043	1,446,646	1,226,701	7,786,585	10,459,932
2044	1,414,938	1,197,016	6,914,146	9,526,100
2045	1,381,372	1,161,324	6,095,432	8,638,128
2046	1,346,224	1,123,999	5,337,949	7,808,172
2047	1,309,415	1,094,005	4,641,463	7,044,883
2048	1,270,939	1,057,665	4,007,241	6,335,845
2049	1,230,717	1,015,836	3,435,343	5,681,896
2050	1,188,583	975,469	2,924,717	5,088,769
2051	1,144,576	927,448	2,473,223	4,545,247
2052	1,098,439	870,394	2,077,770	4,046,603
2053	1,050,289	812,143	1,734,407	3,596,839
2054	1,000,007	753,192	1,438,807	3,192,006
2055	947,452	693,743	1,186,492	2,827,687
2056	893,029	634,889	972,855	2,500,773
2057	836,899	577,385	793,337	2,207,621
2058	779,463	521,523	643,606	1,944,592
2059	721,242	467,794	519,649	1,708,685
2060	662,723	416,587	417,708	1,497,018
2061	604,435	368,334	334,454	1,307,223
2062	546,715	323,267	266,898	1,136,880
2063	490,410	281,671	212,431	984,512
2064	436,082	243,667	168,783	848,532
2065	384,139	209,306	133,995	727,440
2066	335,064	178,571	106,411	620,046
2067	289,375	151,350	84,617	525,342
2068	247,432	127,483	67,478	442,393
2069	209,375	106,746	54,042	370,163
2070	175,324	88,877	43,530	307,731
2071	145,276	73,593	35,319	254,188
2072	119,126	60,605	28,904	208,635
2073	96,618	49,622	23,884	170,124
2074	77,503	40,376	19,944	137,823

Plan Name: Sumitomo Rubber USA Pension Plan
EIN / PN: 34-1899137/002
Plan Sponsor: Sumitomo Rubber USA, LLC
Valuation Date: January 1, 2025

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 24
Change in Actuarial Assumptions

The assumed plan-related expenses added to the target normal cost were changed from $118,560 for the prior valuation (pre-merger basis) to $2,525,656 (post-merger basis) for the current valuation to account for the expectation that plan termination expenses will be paid from the trust.

Additionally, retirement and termination rates were assumed to be 100% in relation to the plan termination.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Statement of Actuarial Assumptions/Methods

A.1 Former Sumitomo Rubber USA, LLC 1950 Pension Plan

Plan Sponsor	Sumitomo Rubber USA, LLC
EIN/PN	34-1899137/002
Discount Rate for Funding	Current plan year PPA effective interest rate: 5.32% Prior plan year PPA effective interest rate: 5.07%
Current Year Elections:	Rate Format: Three-Segment Rates Applicable month: September 2024
Interest Rates:	**Reflecting Stabilization**
• First segment rate	5.07%
• Second segment rate	5.31%
• Third segment rate	5.50%
Assumed cost of living adjustments	None.
Inclusion date	The valuation date coincident with or next following the enrolment date on which the employee becomes a participant. As of August 29, 2009, participation is frozen.
Plan-related Expenses	$2,525,656, equal to the current year PBGC premiums and expected actuarial, audit, and legal fees. This is the total for the merged plan.

SCHEDULE SB ATTACHMENTS

Non-disabled Mortality

Funding Liability: Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

Disabled mortality

Funding Liability: IRS Revenue Ruling 96-7 Mortality Tables for males and females

Retirement

The rates at which participants are assumed to retire are shown below:

	Years of Service	
Age	Less than 30 Years	30 Years or More
Less than 50	0%	0%
50	0	10
51	0	10
52	0	10
53	0	10
54	0	10
55	1	10
56	1	10
57	1	15
58	3	15
59	3	15
60	3	20
61	3	20
62	15	40
63	15	40
64	20	40
65	20	60
66	35	60
67	35	60
68	35	60
69	35	60
70 and above	100	100

Terminated participants are assumed to commence payment at age 65.

Due to cessation of operations, all active participants who are eligible for retirement are assumed to retire in 2025.

Representative Termination Rates not due to Disability, Retirement or Mortality

Termination rates are assumed to be 1% at all ages.

Due to cessation of operations, all active participants who are not eligible for retirement are assumed to terminate in 2025.

Disability Rates

Not applicable. No further disability decrements will occur due to the cessation of operations.

Lump Sum Payments

a) Participant Elections

It is assumed that 55% of retiring participants and 55% of terminating participants will elect the lump sum option. The 55% election assumption for retirement represents the cumulative percentage of full lump sums and half lump sums. The lump sum payable for the accrued benefit is determined as the largest of (i), (ii) and (iii) below:

(i) The present value at retirement / termination of the benefit payable at normal retirement date, calculated using IRC 417(e) assumptions.

(ii) The present value at retirement / termination of the benefit payable at normal retirement date, calculated using the 417(e) interest rates and UP84 mortality. This reflects SRUSA's implementation, effective January 1, 2021, of the PBGC lump sum regulations published in September 2020.

(iii) The present value at retirement of the immediately payable benefit, calculated using the Plan interest rate of 6.00% and UP84 mortality. If not eligible for retirement, the present value at termination of the benefit payable at normal retirement date.

b) IRC 417(e) Assumptions – Funding Liability

(i) Interest rate – Yield curve segment rates equal to the valuation discount rates, using the substitution of annuity form under Proposed IRC §1.430(d)-1(f)(4).

	(ii) Mortality – The "applicable mortality table" under IRC §417(e) for 2025 (no additional projection).
Compensation Increases	Not applicable.
Future increases in Social Security	Not applicable.
Future increases in Maximum Benefits and Plan Compensation Limits	Not applicable.
Annuity Form of Payment	For valuation purposes, participants electing an annuity are assumed to elect the normal form.
Marriage	For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible male participants are assumed to be married and 80% of eligible female participants are assumed to be married. Male participants are assumed to be three years older than their spouses and female participants are assumed to be three years younger than their spouses. For purposes of valuing the post-retirement death benefit, 50% of participants retiring prior to May 1, 2000 are assumed to be married on their date of death.
Employees	It was assumed that there will be no new or rehired employees.
At-risk Assumptions	For at-risk calculations (when applicable), all participants eligible to commence benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the annuity form of payment, which is typically the most valuable form of benefit under the plan.
Timing of Benefit Payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.
Funding Target	Present value of accrued benefits.

SCHEDULE SB ATTACHMENTS

Target Normal Cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Asset method	Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.) The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not included in valuation	No provision is made in the valuation for Special Distributions on Plant Closure, Service Award or Separation Payment.
Subsequent Events Reflected	None.

SCHEDULE SB ATTACHMENTS

Sources of Data and Other Information

Asset data were provided by Northern Trust on January 6, 2025. Sumitomo Rubber USA, LLC furnished participant data for purposes of the plan termination that was used to develop the population as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the company, assumptions or estimates were made when data were not available.

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

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Lump sum conversion rate	As prescribed by law and regulation, lump sums on a 417(e) basis are valued using “annuity substitution” and the interest rate basis selected by the plan sponsor. Future interest rates are determined from information inherent in current market rates.
Administrative and investment expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Retirement and Termination	Due to cessation of operations, all active participants are valued as retiring or terminating in 2025, based on their eligibility.
Lump Sum election rate	Lump sum election rates were based on an experience study conducted in 2023, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. We believe the assumptions selected do not significantly conflict with what would be reasonable.

SCHEDULE SB ATTACHMENTS

Source of Prescribed Methods

Funding methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed mortality table for 417(e) lump sum purposes was updated to the 2025 "applicable mortality table" under IRC §417(e).
- The assumed plan-related expenses added to the target normal cost were changed from $118,560 for the prior valuation (pre-merger basis) to $2,525,656 (post-merger basis) for the current valuation to account for the expectation that plan termination expenses will be paid from the trust..
- Retirement and termination rates were both assumed to be 100% beginning in 2025, and disability rates were assumed to be 0%.

SCHEDULE SB ATTACHMENTS

A.2 Former Sumitomo Rubber USA, LLC 1970 Pension Plan

Plan Sponsor	Sumitomo Rubber USA, LLC
EIN/PN	34-1899137/004
Discount Rate for Funding	Current plan year PPA effective interest rate: 5.32% Prior plan year PPA effective interest rate: 5.00%
Current Year Elections	Rate Format: Three-Segment Rates Applicable Month: September 2024
Interest Rates	**Reflecting Stabilization**
• First segment rate	5.07%
• Second segment rate	5.31%
• Third segment rate	5.50%
Assumed cost of living adjustments	None.
Inclusion date	The valuation date coincident with or next following the enrolment date on which the employee becomes a participant.
Plan-related Expenses	See Appendix A.1 for total plan expenses, equal to the current year PBGC premiums and expected actuarial, audit, and legal fees.
Non-disabled Mortality	Funding Liability: Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).
Disabled mortality	Funding Liability: IRS Revenue Ruling 96-7 Mortality Tables for males and females.

SCHEDULE SB ATTACHMENTS

Retirement	Not applicable because there are no active participants in the plan. Terminated participants affected by the plant closure with 10 or more years of service as of December 31, 2003 are assumed to commence payment with a subsidized early retirement benefit at age 55. For those terminated participants not affected by the plant closure or with less than 10 years of service as of December 31, 2003, it is assumed they will commence payment at age 65.
Representative Termination Rates not due to Disability Retirement or Mortality	Not applicable because there are no active participants in the plan.
Disability Incidence	Not applicable because there are no active participants in the plan.
Compensation Increases	Not applicable.
Future Increases in Social Security	Not applicable.
Future Increases in Maximum Benefits and Plan Compensation Limitations	Not applicable.
Form of Payment	For valuation purposes, participants are assumed to elect the normal form.
Marriage	For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible male participants are assumed to be married and 80% of eligible female participants are assumed to be married. Male participants are assumed to be three years older than their spouses and female participants are assumed to be three years younger than their spouses. For purposes of valuing the post-retirement death benefit, 50% of participants retiring prior to May 1, 2000 are assumed to be married on their date of death.
Employees	It is assumed that there will be no new or rehired employees.

SCHEDULE SB ATTACHMENTS

At-risk Assumptions	For at-risk calculations (when applicable), all participants eligible to elect benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the most valuable form of benefit under the plan. However, for the Huntsville Plan, all annuity forms are equivalent in value, so no specific at-risk assumption is needed. That is, the standard form, five-year certain and continuous, is also used for at-risk liability.
Timing of Benefit Payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on date of decrement.
Funding Target	Present value of accrued benefits.
Target Normal Cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.
Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.

SCHEDULE SB ATTACHMENTS

Asset Method	Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.) The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not Included in Valuation	No provision is made in the valuation for Special Distribution on Plant Closure, Service Award or Separation Payment (except to the extent already granted).
Subsequent Events Reflected	None.

Sources of Data and Other Information

Asset data were provided by Northern Trust on January 5, 2024. Sumitomo Rubber USA, LLC furnished participant data for purposes of the plan termination that was used to develop the population as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the company, assumptions or estimates were made when data were not available.

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

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Economic Assumptions

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

Assumptions Rationale - Significant Demographic Assumptions

Healthy Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Disabled Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).

Source of Prescribed Methods

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

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation	• The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.

SCHEDULE SB ATTACHMENTS

A.3 Former Sumitomo Rubber USA, LLC Salaried Employees Retirement Plan

Plan Sponsor	Sumitomo Rubber USA, LLC
EIN/PN	34-1899137/001
Discount Rate for Funding	Current plan year PPA effective interest rate: 5.32% Prior plan year PPA effective interest rate: 4.99%
Current Year Elections	Rate Format: Three-Segment Rates Applicable month: September 2024
Interest rates	**Reflecting Stabilization**
• First segment rate	5.07%
• Second segment rate	5.31%
• Third segment rate	5.50%
Assumed cost of living adjustments	None.
Inclusion Date	The valuation date coincident with or next following the date on which the employee becomes a participant.
Plan-Related Expenses	See Appendix A.1 for total plan expenses, equal to the current year PBGC premiums and expected actuarial, audit, and legal fees.
Mortality	Funding Liability: Separate rates for non-annuitants and annuitants based on Pri-2012 “Employees” and “Healthy Annuitants” (participants and beneficiaries combined) tables, respectively, without collar or amount adjustments and then projected forward with a generational projection as specified in the regulations under §1.430(h)(3)-1 using the IRS adjusted Scale MP-2021 (i.e., MP-2021 with no mortality improvement for 2020-2023 and future mortality improvement capped at 0.78% for years after 2024).

SCHEDULE SB ATTACHMENTS

Retirement

The rates at which participants are assumed to retire are shown below:

	Years of Service	
Age	Less than 30 Years	30 Years or More
50-54	0%	3%
55	5	10
56	2	4
57	2	4
58	2	4
59	3	6
60	4	8
61	5	10
62	50	50
63	40	40
64	30	30
65	50	50
66	60	60
67	70	70
68	80	80
69	90	90
70 and above	100	100

Terminated participants who have transferred to Sumitomo are assumed to retire at age 55, or their current age plus one if older. All other terminated participants are assumed to retire at age 65.

Due to the cessation of operations, all active and transferred participants who are eligible for retirement are assumed to retire in 2025.

SCHEDULE SB ATTACHMENTS

Representative Termination Rates not due to Retirement or Mortality

The rates at which participants are assumed to leave the company are shown below:

Years of Service	Rate of Withdrawal
0	30%
1	28
2	24
3	20
4	17
5	14
6	11
7	8
8	6
9	4
10 and above	3% to age 55 0% thereafter

Due to the cessation of operations, all participants who are not eligible for retirement are assumed to terminate in 2025.

Disability Rates

The incidence of disability has been accounted for in the termination rates.

Compensation Increases

Not applicable.

Future Increases in Social Security

Not applicable.

Future Increases in Maximum Benefits and Plan Compensation Limitations

Accrued benefits projected to be paid in future years are limited to the maximum presently allowed under IRC §415. Plan compensation is limited to the maximum presently allowed under IRC §401(a)(17). No provision is made for future increases in the maximum annual benefit or compensation limit.

SCHEDULE SB ATTACHMENTS

Lump Sum Payments	(a.) Participant Elections 75% of all employees are assumed to select the lump sum form of benefit, upon separation from the Company. The annuity is valued using the discount rate and valuation mortality. The lump sum for the benefit accrued as of December 31, 2003 is the value of the accrued benefit, payable at normal retirement age, under IRC 417(e) assumptions. The lump sum for the benefit accrued from January 1, 2004 is the larger of the pension balance or the value of the accrued benefit, payable at normal retirement age, under IRC 417(e) assumptions.
Annuity Form of Payment	For valuation purposes, participants electing an annuity are assumed to elect the normal form.
Marriage	For purposes of valuing the pre-retirement surviving spouse's benefit, 80% of eligible participants are assumed to be married. Female spouses are assumed to be three years younger than their spouses and male participants are assumed to be 3 years older than their spouses.
Employees	It was assumed there will be no new or rehired employees.
At-risk Assumptions	For at-risk calculations (when applicable), all participants eligible to commence benefits during the current and subsequent ten plan years are assumed to commence benefits at the earliest possible date under the plan, but not before the end of the current plan year, except in accordance with the regular valuation assumptions. In addition, all participants (not just those eligible to begin benefits within the next 11 years) are assumed to elect the annuity form of payment, which is typically the most valuable form of benefit under the plan.
Timing of Benefit Payments	Annuity payments are payable monthly at the beginning of the month and lump sum payments are payable on the date of decrement.
Funding Target	Present value of accrued benefits.
Target Normal Cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year as required by regulations under IRC §430.

SCHEDULE SB ATTACHMENTS

Decrement timing	The approach used is called rounded middle of year (rounded MOY) decrement timing. Most events are assumed to occur at the middle of year during which the eligibility condition will be met or the start/end date will occur. For death and disability decrements, the rate applied is based on the participant's rounded age (nearest integer age) at the beginning of the year, to align with the methodology generally used to create those rate tables. For retirement and withdrawal decrements: the age is generally the participant's rounded age at the middle of the year.
Asset Method	Average of the fair market value of assets on the valuation date and 12 and 24 months preceding the valuation date, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22). The average asset value must be within 10% of market value, including discounted contributions receivable (discounted using the effective interest rate for the prior plan year.) The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.
Benefits not Included in Valuation	None.
Subsequent Events Reflected	None.

Sources of Data and Other Information

Asset data were provided by Northern Trust on January 5, 2024. Sumitomo Rubber USA, LLC furnished participant data for purposes of the plan termination that was used to develop the population as of the valuation date. Data were reviewed for reasonableness and consistency, but no audit was performed. Based on discussions with the company, assumptions or estimates were made when data were not available.

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

SCHEDULE SB ATTACHMENTS

Assumptions Rationale - Significant Economic Assumptions

Discount rate	The basis chosen was selected by the plan sponsor from among choices prescribed by law, all of which are based on observed market data over certain periods of time.
Lump sum conversion rate	As prescribed by law and regulation, lump sums on a 417(e) basis are valued using “annuity substitution” and the interest rate basis selected by the plan sponsor. Future interest rates are determined from information inherent in current market rates.
Administrative and investment expenses	As required by regulations, plan-related expenses are calculated by estimating the expenses to be paid from the trust during the coming year (including, for example, expected PBGC premiums and actuarial, accounting, legal, administration and trustee fees to be paid from the trust).

Assumptions Rationale - Significant Demographic Assumptions

Mortality	Assumptions used for funding purposes are as prescribed by IRC §430(h).
Retirement and Termination	Due to cessation of operations, all active participants are valued as retiring or terminating in 2025, based on their eligibility.
Lump Sum election rate	Lump sum election rates were based on an experience study conducted in 2023, with annual consideration of whether any conditions have changed that would be expected to produce different results in the future. We believe the assumptions selected do not significantly conflict with what would be reasonable.

Source of Prescribed Methods

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

SCHEDULE SB ATTACHMENTS

Changes in Assumptions and Methods

Change in assumptions and methods since prior valuation

- The segment interest rates used to calculate the funding target and target normal cost were updated to the current valuation date as required by IRC §430.
- The assumed mortality table for 417(e) lump sum purposes was updated to the 2025 “applicable mortality table” under IRC §417(e).
- Retirement and termination rates were both assumed to be 100% in 2025.

SCHEDULE SB ATTACHMENTS

Schedule SB, Part V
Summary of Plan Provisions

B.1 Former Sumitomo Rubber USA, LLC 1950 Pension Plan

Plan Sponsor	Sumitomo Rubber USA, LLC
Plan	Sumitomo Rubber USA, LLC 1950 Pension Plan
Effective Date and Most Recent Amendment	April 1, 1950 as most recently amended and restated, effective January 1, 2025.
Merger	Plan was merged with the SRUSA 1970 Pension Plan and the SRUSA Salaried Pension Plan effective December 31, 2024.
Plan Year	The twelve-month period ending December 31.
Coverage and Participation	All hourly employees hired prior to December 22, 2006 who are covered under the bargaining unit of Local #135, United Steel Workers of America, AFL-CIO-CLC. Employees in certain technical jobs, hired between December 22, 2006 and August 29, 2009 may enter the plan. The Plan is closed to new entrants effective August 29, 2009.
Credited Service	All service from date of hire to the earlier of date of termination, death or retirement and April 30, 2014 computed to the nearest one-twelfth of a year.
Vesting Service	All service from date of hire to date of termination, death or retirement computed to the nearest one-twelfth of a year. For participants impacted by the plant closure, an additional two months of service is counted.
Final Average Compensation/Salary	N/A

SCHEDULE SB ATTACHMENTS

Normal Retirement Benefit

Eligibility: Age 65 with 5 or more years of continuous service.

Benefit:

Retirement Date	Monthly Benefit per Year of Continuous Service
10/01/1991-11/03/1994	$30.00
11/04/1994-11/09/1997	37.00
11/10/1997-04/30/2000	41.00
05/01/2000-01/01/2006	50.00
01/02/2006-08/01/2009	55.00
08/01/2009-01/01/2010	58.00
After 01/01/2010	58.00/63.00

The $58 benefit unit applies to all service accrued prior to January 1, 2010 for participants that terminate, retire, decease, or become disabled from active service on or after January 1, 2010.

The $63 benefit unit applies to all service accrued after January 1, 2010 for participants that terminate, retire, decease, or become disabled from active service on or after January 1, 2010.

Benefit accruals are frozen from 11/01/2003 through 10/31/2005. For those retiring and terminating on or after August 1, 2006, this service accrual is restored.

Normal Form Benefit: 5-year certain life annuity subject to Qualified Joint and Survivor Annuity requirements applicable to married members.

A married member's benefit at retirement will be paid in the form of a reduced Joint and 50% Survivor optional benefit unless elected otherwise.

Late Retirement

Eligibility: Members can postpone retirement beyond age 65.

Benefit: Calculated as for normal retirement based on continuous service and the benefit rate in effect at actual retirement date but held to a minimum of the actuarially increased benefit as of the Normal Retirement Date.

SCHEDULE SB ATTACHMENTS

Early Retirement Benefit

(1) Eligibility: Age 62 with 10 or more years of continuous service, or below age 55 with 30 or more years of continuous service.

Benefit: Full accrued normal retirement benefit.

(2) Eligibility: Age 55 with 30 or more years of continuous service.

Benefit: A supplemental benefit payable to 3 years prior to the participant's Social Security Normal Retirement Age. If retirement occurs on or after August 1, 1997, but before August 1, 2009, the supplement ceases at age 62, but a separate supplemental benefit is paid until 3 years prior to Social Security Normal Retirement Age. If retirement occurred before August 1, 1997, all supplemental payments cease at age 62. The full accrued benefit is payable after the supplement ends.

The current supplement is expressed strictly as an add-on equal to $340 plus $9 per year of service over 30 plus $10 per year of age over 55.

Effective April 30, 2014, the supplement is frozen at an amount equal to $250 plus $3 per year of service plus $6 per year of service over 30 plus $10 per year of age over 55. Age and service are as of April 30, 2014. The frozen supplement is held to no smaller than $400.

Prior supplement amounts, expressed as the total temporary payment are as follows:

Retirement Date	Monthly Supplement Benefit		
	Fixed Benefit	For Each Year of Service > 30	For Each Year of Age > 55
10/01/1991-11/03/1994	$950	$35.50	$10.00
11/04/1994-11/09/1997	1,160	42.50	10.00
11/10/1997-04/30/2000	1,570	46.50	10.00
05/01/2000-12/31/2002	1,890	55.50	10.00
After 12/31/2002	1,840	59.00	10.00

(3) Eligibility: Age 55 with 10 or more years of continuous service.

Benefit: Accrued benefit reduced by 0.4% for each month benefit commencement precedes age 62.

(4) As part of the plant shutdown, participants are eligible for an unreduced retirement benefit at age 55 or with 23 years of service.

SCHEDULE SB ATTACHMENTS

Disability Benefit

Eligibility: Effective January 1, 2010, total disability after 10 years of continuous service and receiving a Social Security disability benefit.

Benefit: Accrued benefit, unreduced, payable for life, with 60 payments guaranteed.

Prior to January 1, 2010, receipt of a Social Security disability benefit was not required. Disability retirees not receiving a Social Security disability benefit received a temporary supplement equal to the accrued benefit, payable to three years before Social Security Normal Retirement Age.

Extended Disability Benefit

Effective January 1, 2010, disability retirees are eligible to receive an additional temporary benefit payable from retirement date to the earliest of age 62, recovery from disability, or death. The monthly benefit equals 60% of the participant's hourly wage rate multiplied by 173.33 hours, less Worker's Compensation payments, and less Social Security benefit payments.

Vested Benefits Upon Termination of Service

Eligibility: If employed on September 1, 1999, termination before retirement eligibility. Otherwise, termination after 5 or more years of continuous service, but prior to retirement eligibility.

Benefit: Accrued benefit payable for life, with five years certain, commencing at normal retirement date. If 10 or more years of continuous service, a reduced amount at an early retirement date is available.

Effective January 1, 2014, a lump sum option is available, as described below under Optional Forms. A vested terminated participant may elect only a full lump sum, not half lump sum and half annuity. The lump sum is payable only at termination – no deferred lump sum is available. Because a lump sum is offered, the vested benefit is also payable immediately in a reduced amount.

SCHEDULE SB ATTACHMENTS

Death Benefits

(1) Pre-Retirement – Surviving Spouse Benefit

A life annuity is payable to the surviving spouse of an active or terminated participant whose death occurs after becoming vested, but prior to retirement. The amount payable to the surviving spouse is 50% of the participant's vested benefit reduced for early retirement and joint and survivor option election. Benefits commence at the earliest date the participant could have retired, had he survived, under the Plan.

Effective January 1, 2014, the surviving spouse of a vested participant whose death occurs prior to termination may elect a lump sum in lieu of the survivor annuity. The lump sum may not be deferred. The spouse may elect only a full lump sum, not half lump sum and half annuity. Because a lump sum is available, the survivor annuity is also payable immediately in a reduced amount.

(2) Post-Retirement – Lump Sum to Spouse or Estate

Retirement Date	Lump Sum
Prior to 10/01/1991	$2,750
10/01/1991-11/09/1997	3,500
11/10/1997-04/30/2000	4,000
05/01/2000-07/31/2013	4,500
After 07/31/2013	5,000

For participants retiring prior to May 1, 2000, a lump sum benefit is payable only to a surviving spouse. For participants retiring on or after May 1, 2000, a lump sum benefit is payable to the participant's estate if there is no surviving spouse..

Optional Forms of Retirement Income in Lieu of Normal Form

Optional forms available at retirement are:

50% and 100% Joint and Survivor contingent annuity; 10, 15 and 20-year certain and continuous options. These forms do not reduce the amount payable in the normal form until after 60 monthly payments.

50% Qualified Joint and Survivor Annuity and 75% Qualified Optional Survivor Annuity. These forms immediately reduce the amount payable. These are the only optional annuity forms available to a deferred vested participant.

Pop-up 50% and 100% Joint and Survivor contingent annuity with 60 payments guaranteed. These forms immediately reduce the amount payable in the normal forms.

A lump sum option has been added to the plan for retirements and vested terminations on or after January 1, 2014. The payable lump sum is the largest of 1) the lump sum calculated using 417(e)

	assumptions, 2) the lump sum calculated using the 417(e) interest rates andUP84 mortality, and 3) the lump sum using the Plan interest rate of 6.00% and UP84 mortality. Each of the lump sum calculations is the present value at retirement/termination of the benefit payable at normal retirement age. However, if the participant is retirement eligible, the lump sum under the Plan interest rate of 6.00% is calculated as the present value of the immediate annuity. For the PBGC lump sum, 120% of the rate structure is used if the lump sum exceeds $25,000. A participant may elect to receive the full benefit in lump sum form or half as lump sum and half as annuity. The annuity half is payable under any optional form.
Actuarial Increase for Late Retirement	The normal retirement pension payable with respect to a participant who continues in employment after attaining his normal retirement age and after April 30, 2014 shall be actuarially adjusted for each month during such a period of continuing employment in which the participant does not receive his normal retirement pension.
Pension Increases	Not applicable.
Plan Participants' Contributions	Not applicable.

Future Plan Changes

WTW is not aware of any future plan changes that are required to be reflected.

Changes in Benefits Valued Since Prior Year

As part of the plant shutdown, participants are eligible for an unreduced retirement benefit at age 55 or with 23 years of service.

In conjunction with the plan termination, the plan was amended to eliminate the charge to the participant for preretirement death benefit coverage. Also, the disability supplements and postretirement lump sum death benefits that were previously paid by the Company are now paid from the trust.

SCHEDULE SB ATTACHMENTS

B.2 Former Sumitomo Rubber USA, LLC 1970 Pension Plan

Plan Sponsor

Sumitomo Rubber USA, LLC

Plan

Sumitomo Rubber USA, LLC 1970 Pension Plan

Effective Date and Most Recent Amendment

October 1, 1970 as most recently amended and restated, effective January 1, 2025.

Merger

Plan was merged with the SRUSA 1950 Pension Plan and the SRUSA Salaried Pension Plan effective December 31, 2024

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

All hourly employees who are covered under the bargaining unit of Local #915, United Steel Workers of America, AFL-CIO-CLC. Participation begins immediately upon employment.

Credited Service

All service from date of hire to date of termination or retirement computed to the nearest 1/12 of a year.

Vesting Service

All service from date of hire to date of termination or retirement computed to the nearest 1/12 of a year.

Final Average Compensation/Salary

N/A

Normal Retirement Benefit

Eligibility: Age 65 with 5 or more years of continuous service.

SCHEDULE SB ATTACHMENTS

Benefit:

Retirement Date	Monthly Benefit per Year of Continuous Service
07/01/1991-09/30/1994	$30.00
10/01/1994-07/31/1997	37.00
08/01/1997-04/30/2000	41.00
05/01/2000-01/01/2006	50.00
01/02/2006-	55.00

The $55 benefit unit applies prospectively after January 1, 2006 for participants that retire, decease, or become disabled from active service on or after May 1, 2003.

Benefit accruals are frozen from 11/01/2003 through 10/31/2005.

Late Retirement

Eligibility: Members can postpone retirement beyond age 65.

Benefit: Calculated as for normal retirement based on continuous service and the benefit rate in effect at actual retirement date.

Early Retirement Benefit

(1) Eligibility: Age 62 with 10 or more years of continuous service, or below age 55 with 30 or more years of continuous service.

Benefit: Full accrued normal retirement benefit.

(2) Eligibility: Age 55 with 30 or more years of continuous service.

Benefit: A supplemental benefit payable to age 62. If retirement occurs on or after August 1, 1997, a continuation of the supplemental benefit is payable from age 62 until eligibility for 80% of the full Social Security Benefit. The full accrued benefit is payable after the supplement ends. The 11/01/2003-10/31/2005 accrual freeze does not impact the amount of the supplement.

		Monthly Supplemental Benefit	
Retirement Date	Fixed Benefit	For Each Year of Service > 30	For Each Year of Age > 55
07/01/1991-09/30/1994	$950	$35.50	$10.00
10/01/1994-07/31/1997	1,160	42.50	10.00
08/01/1997-04/30/2000	1,570	46.50	10.00
05/01/2000-12/31/2002	1,890	55.50	10.00
01/01/2003-	1,840	59.00	10.00

(3) Eligibility: Age 55 with 10 or more years of continuous service.

Benefit: Accrued benefit reduced by 0.4% for each month benefit commencement precedes age 62.

SCHEDULE SB ATTACHMENTS

Disability Benefit

Eligibility: Total disability after 10 years of continuous service.

Benefit: Accrued benefit, unreduced, payable for life, with 60 payments guaranteed.

An equal amount, reduced by the Social Security Benefit, is also payable until eligible for Social Security old age benefits (or, if retired prior to November 1, 1994, age 65).

Vested Benefits Upon Termination of Service

Eligibility: If employed on September 1, 1999, termination before retirement eligibility. Otherwise, termination after 5 or more years of continuous service, but prior to retirement eligibility.

Benefit: Accrued benefit payable for life, with five years certain, commencing at normal retirement date. If 10 or more years of continuous service, reduced amount at an early retirement date is available.

Death Benefits

(1) Pre-Retirement - Surviving Spouse Benefit

A life annuity is payable to the surviving spouse of an active or terminated participant whose death occurs after becoming vested, but prior to retirement. The amount payable to the surviving spouse is 50% of the participant's vested benefit reduced for early retirement and joint and survivor option election. Benefits commence at the earliest date the participant could have retired, had he survived, under the Plan.

(2) Post-Retirement - Lump Sum to Spouse or Estate

Retirement Date	Lump Sum
Prior to 07/01/1991	$2,750
07/01/1991-07/31/1997	3,500
08/01/1997-04/30/2000	4,000
05/01/2000 -	4,500

For participants retiring prior to May 1, 2000, a lump sum benefit is payable only to a surviving spouse. For those retiring on or after May 1, 2000, a lump sum benefit is payable to the participant's estate if there is no surviving spouse.

Normal Form of Payment

5-year certain life annuity subject to Qualified Joint and Survivor Annuity requirements applicable to married members.

A married member's benefit at retirement will be paid in the form of a reduced Joint and 50% Survivor optional benefit unless elected otherwise.

SCHEDULE SB ATTACHMENTS

Optional Forms of Retirement Income in Lieu of Normal Form

Optional forms available at retirement are:

50% and 100% Joint and Survivor contingent annuity; 10, 15 and 20-year certain and continuous options These forms do not reduce the amount payable in the normal form until after 60 monthly payments.

50% Qualified Joint and Survivor Annuity and 75% Qualified Optional Survivor Annuity. These forms immediately reduce the amount payable.

Pop-up 50% and 100% Joint and Survivor contingent annuity with 60 payments guaranteed. These forms immediately reduce the amount payable in the normal form.

Plant Closure Benefits

(1) Enhanced Early Retirement Benefit

The full accrued normal retirement benefit is immediately payable to participants with 25 or more years of service or participants age 55 with 5 or more years of service.

(2) Early Retirement Grow-in

Participants with 10 or more years of service, but not eligible for an immediate annuity, can grow into early retirement eligibility at age 55. Upon benefit commencement at age 55 or later the benefit is reduced from age 62 by 0.4% per month, rather than an actuarial reduction from age 65.

(3) Lump Sum Benefit (Special Distribution)

Participants eligible for either an immediate or a deferred annuity may elect a lump sum payment in lieu of the annuity.

(4) $7,500 Lump Sum Payment

Participants with 25 or more years of service receive a one-time payment of $7,500, in addition to the regular pension. This payment can be converted into a lifetime annuity.

Pension Increases

N/A

Plan Participants' Contributions

N/A

Future Plan Changes

No future plan changes were recognized in this valuation. WTW is not aware of any future plan changes that are required to be reflected.

Changes in Benefits Valued Since Prior Year

In conjunction with the plan termination, the plan was amended to eliminate the charge to the participant for preretirement death benefit coverage. Also, the disability supplements that were previously paid by the Company are now paid from the trust.

SCHEDULE SB ATTACHMENTS

B.3 Former Sumitomo Rubber USA, LLC Salaried Employees Retirement Plan

Plan Sponsor

Sumitomo Rubber USA, LLC

Plan

Sumitomo Rubber USA, LLC Salaried Employees Retirement Plan

Merger

Plan was merged with the SRUSA 1950 Pension Plan and the SRUSA 1970 Pension Plan effective December 31, 2024.

Effective Date and Most Recent Amendment

January 1, 1947 as most recently amended to and restated effective January 1, 2025

Plan Year

The twelve-month period ending December 31.

Coverage and Participation

All salaried employees hired prior to January 1, 2005 are covered.

For employees hired prior to January 1, 1993, participation begins on the first day of the month following date of hire. For employees hired on or after January 1, 1993, participation begins the first day worked as a salaried employee.

Effective January 1, 2005, plan participation is restricted to employees hired prior to January 1, 2005.

A participant may elect, prior to the beginning of a Plan year, to make contributions to the Plan, as described below.

Effective January 1, 2008, three years of service are required in order to be vested in the accrued benefit. Effective January 1, 2009, all participants were automatically vested in their accrued benefit. Previously, five years were required.

Credited Service

For service through December 31, 2003:

1,000 Hours of Service in a Plan Year equals one year of credited service. For years with less than 1,000 hours, a proportionate part of a year, determined to the nearest 1/12th, will be credited in the year of retirement or transfer to non-salaried employment.

SCHEDULE SB ATTACHMENTS

Continuous Service

For service from January 1, 2004:

For the purpose of determining an amount of pension, all periods of service as an Employee rounded to the next highest 1/12th of a year (after December 31, 2003). No service will be earned after December 31, 2008 for purposes of benefit accruals. Service will continue to be earned for purposes of benefit eligibility.

Break Point

50% of the Social Security Wage Base in effect at the beginning of a Plan year.

Pension Point

	A percentage applied to a portion of Average Earnings.
Base Point:	A Pension Point applied to Average Earnings up to the Break Point.
Additional Point Below Break Point:	A Pension Point applied to Average Earnings up to the Break Point and credited when contributions on Earnings up to the Break Point are made.
Additional Point Above Break Point:	A Pension Point applied to Average Earnings above the Break Point and credited when contributions on Earnings in excess of the Break Point are made.

Earnings

Total compensation paid to an Employee for a period of Continuous Service, excluding payment under certain incentive plans, and limited in accordance with IRC Section 401(a)(17).

Average Earnings

The average of an Employee's Earnings for the 5 calendar years out of the 10 years preceding the date of calculation for which the Earnings are the highest. A partial year's Earnings are annualized for Employees with fewer than 5 calendar years of Earnings.

SCHEDULE SB ATTACHMENTS

Crediting of Pension Points

Pension Points are credited on a Plan Year basis according to the following table:

Attained Age During the Year	Base Points	Additional Points Below Break Point	Additional Points Above Break Point
Less than 30	2.0	1.5	3.5
30 – 34	3.0	1.5	4.5
35 – 39	4.0	1.5	5.5
40 – 44	5.0	1.5	6.5
45 – 49	7.0	1.5	9.0
50 – 54	10.0	1.5	13.0
55 and over	12.0	1.5	15.0

Credited points are prorated for partial years of Continuous Service (for benefit amount purposes) and partial years of contributions.

Normal Retirement Benefit

For service through December 31, 2003

Eligibility: Later of attainment of age 65 and 5th anniversary of plan participation.

Benefit: The annual benefit is the maximum of the benefits determined by the three formulas:

(a) Career Earnings Formula

For credited service prior to 1/1/1979: 1% of 1978 earnings for all service prior to 1/1/1979
Plus
For credited service after 1/1/1979: ¾ of 1% of earnings in each year through 12/31/1982
Plus
For credited service after 1/1/1983: 1¾% of earnings plus an extra 1% of earnings in excess of the F.I.C.A. wage base in each year through 12/31/1988
Plus
For credited service after 1/1/1989 through December 31, 2003: 2½% of earnings in each year.

(b) Final Pay Formula

1.1% of average earnings during the last three full calendar years multiplied by credited service frozen as of December 31, 2003.

(c) Flat Dollar (Minimum Benefit) Formula

$408 multiplied by credited service frozen as of December 31, 2003.

For service after December 31, 2003

(a) In general, a participant's accrued normal retirement benefit payable as a 5-year certain and continuous annuity, equals:

(i) total Base Points times Average Earnings below the Break Point plus

(ii) total Additional Points Below Break Point times Average Earnings below the Break Point plus

(iii) total Additional Points Above Break Point times Average Earnings in excess of the Break Point

(iv) with the resulting sum multiplied by a deferred annuity factor based on the participant's age as of the date of calculation.

Projected Maximums: In addition, the product of (i) and (iv) is held to a maximum of projected Base Points at normal retirement age times Average Earnings below the Break Point and an annuity factor at normal retirement age. A similar maximum applies to the product of (iii) and (iv).

Annuity factors are based on the UP-1984 mortality table with a 3-year age setback and an interest rate of 4.75%.

(b) $50 Minimum

Participants who have 27 years of service or are age 52 with 7 years of service as of January 1, 2004, are eligible for the $50 minimum benefit. This benefit consists of $44 per year of continuous service plus $6 per year of contributory service from January 1, 2004. The result is multiplied by 12 to obtain the annual benefit.

As of December 31, 2008, accruals under the plan were frozen.

Late Retirement

Eligibility: Members can postpone retirement beyond normal retirement age.

Benefit: Calculated as for normal retirement based on credited service and earnings through actual retirement date. An actuarial increase is applied for periods that are both after normal retirement age and after December 31, 2008.

Vested Termination Prior to January 1, 2004

Eligibility: 100% vesting upon completion of 5 years of service. Effective September 1, 1999, all employees who had met the plan's eligibility were 100% vested.

Benefit: Accrued benefit payable for life, with 5 years certain, commencing at normal retirement date. A reduced amount is available at an early retirement date if termination occurs after completion of 10 years of service. The accrued benefit is reduced by 1/15 for each of the first 5 years benefit commencement precedes age 65 and 1/30 for any years in excess of 5.

SCHEDULE SB ATTACHMENTS

Benefits Upon Termination of Employment after December 31, 2003

Effective December 31, 2008 all participants are fully vested. Prior to that date, 5 or more years of Continuous Service were required for vesting. A vested participant is entitled to elect, upon termination of employment, a lump sum, an immediate annuity, or a deferred annuity, determined as follows:

(a) Deferred Annuity – equals the accrued normal retirement benefit payable at age 65 or as early as age 55 in a reduced amount.

(i) Accruals from January 1, 2004:

The reduced annuity equals the accrued benefit without the Projected Maximum, reduced by 3.9% for each year that commencement precedes age 65, with the result limited by the Projected Maximum.

(ii) Accruals through December 31, 2003:

The reduced annuity equals the accrued benefit reduced by 4.8% for each year retirement precedes age 62. If 30 or more years of continuous service and a greater benefit results, the flat dollar (minimum benefit) is payable on an unreduced basis.

(iii) The $50 minimum benefit is reduced by 4.8% per year for commencement prior to age 62. It is unreduced if the participant has 30 years of service. It is actuarially reduced from age 65 if the participant has attained neither 30 years of service nor age 55 with 10 years of service.

(b) Immediate Annuity – determined in the same manner as the Deferred Annuity in (a) with the following reduction scales applying for commencement prior to age 55:

(i) Portion based on Pension Points - 3.9% per year from age 55 to age 52 and actuarial for lower ages.

(ii) Portion based on accrued benefits as of December 31, 2003 – 4.8% per year from age 55 to age 50 and actuarial for lower ages; the flat dollar benefit is unreduced if the participant has 30 years of service.

(iii) The $50 minimum benefit is payable unreduced if the participant has 30 years of service. It is actuarially reduced from age 55 if the participant has not attained 30 years of service.

(c) Lump Sum

(i) Accruals from January 1, 2004:

In general, the lump sum equals the sum of products of Pension Points times Average Earnings, either up to or in excess of the Break point, as appropriate.

(ii) The portion of (i) associated with Additional Points Above Break Point is held to a minimum of corresponding accumulated employee contributions with plan interest. A similar minimum applies to the lump sum associated with Additional Points Below Break Point.

(ii) Accruals through December 31, 2003:

The lump sum equals the actuarial present value of the accrued normal retirement benefit determined under the assumptions specified in Section 417(e) of the Internal Revenue Code as in effect on the first day of the Plan Year during which the benefit commencement date occurs.

SCHEDULE SB ATTACHMENTS

Deferred Disability

Eligibility: Termination of employment before age 65 and after 5 years of Continuous Service and while receiving benefits under the Long Term Disability Income Plan.

Termination of Employment: Occurs two years after last day worked. Employee is credited with Base and Additional Points Above Break Point during these two years, at the same rate as at the date on which the Employee's disability occurred, but does not make any employee contributions.

Benefit: Payable when disability ceases, or if earlier, the later of age 65 or 2 years after the occurrence of disability.

(a) Lump Sum – calculated as of the date of termination of employment as if the Employee had then elected such a payment and actuarially increased to date of payment using 417(e) assumptions in effect at date of termination of employment.

(b) Annuity – the Accrued Normal Retirement Benefit calculated at the date of termination of employment and reduced for commencement prior to age 65 as described above.

Pre-Retirement Death Benefits

Eligibility: 5 years of Continuous Service.

Benefit:

(a) Annuity – an eligible surviving spouse may elect to receive an immediate annuity, or an annuity deferred to any date between the participant's 55th and 65th birthdays. The annuity is based on the participant's Accrued Normal Retirement Benefit as of the date of his termination of employment and the 100% Joint and Survivor annuity form and is reduced for commencement before the participant's 65th birthday as described above.

(b) Lump Sum – the amount that would have been paid to the employee as a lump sum had he terminated employment on the day before the day of his death or, if earlier, the day he terminated employment.

This benefit may be elected by a surviving spouse in lieu of the annuity benefit. If there is no eligible spouse, the lump sum is paid to the employee's estate.

Pre-Retirement Death Benefit for Terminations Prior to December 31, 2003

A life annuity is payable to the surviving spouse of a terminated vested member whose death occurs prior to retirement. The amount payable to the surviving spouse is 50% of the member's vested benefit reduced for early retirement and joint and survivor option election. Benefits commence at the earliest date the member could have retired, had he survived, under the Plan.

If the member was contributory, dies while employed, and death occurs between ages 55 and 60, 50% of the accrued benefit is payable to a surviving spouse. For each year of age over age 60 at death the percent payable is increased by 4%.

SCHEDULE SB ATTACHMENTS

Post-Retirement Death Benefit

None, other than the benefit available under a selected optional form.

Employee Contributions

Required Contributions:	Participants may elect to contribute 2% of Earnings in excess of the Break Point. Those who elect to contribute above the Break Point may also elect to contribute 1% of Earnings up to the Break Point. There are no employee contributions after December 31, 2008.
Withdrawal of Contributions:	Upon termination of employment prior to becoming eligible for a vested pension, employee contributions, together with appropriate accumulated interest (7% for all periods after January 1, 2004) are refunded. If greater, the refunded amount is contributions with statutory interest, currently credited at 120% of the Federal mid-term rate.
Return of Contributions in the Event of Death:	In the event of death prior to benefit commencement when no future benefits will be payable, employee contributions with appropriately accumulated interest to the date of death are refunded. In the event of cessation of benefits due to death after benefit commencement, the excess, if any, of employee contributions with appropriately accumulated interest to the date of benefit commencement over benefits paid are refunded.

Normal Form of Payment

5-year certain life annuity, subject to Qualified Joint and Survivor Annuity requirements applicable to married members.

Optional Forms of Retirement Income in Lieu of Normal Form

Optional forms available at retirement are:

5-year certain, 50%, 66&2/3%, and 100% Joint and Contingent Annuity; 10, 15 and 20 year certain and continuous options. For benefits accrued through December 31, 2003, these forms do not reduce the amount payable in the normal form until after 60 monthly payments. For benefits accrued after December 31, 2003, the reduction is immediate.

Pop-up 50% and 100% Joint and Contingent annuity with 60 payments guaranteed. These forms immediately reduce the amount payable in the normal forms.

50% Qualified Joint and Survivor Annuity and 75% Qualified Optional Survivor Annuity. These forms immediately reduce the amount payable.

Lump sum. Available only at termination, not on a deferred basis.

SCHEDULE SB ATTACHMENTS

Benefits for Members Prior to 1/1/1980

Normal Retirement Benefit: not less than $150 times total service.

Early Retirement Benefit: no less than the one which would have applied had the Plan not been amended.

Special Past Service Benefit: the $150 per year of service basic retirement benefit described above will be increased by $480 for members with 5 or more years of service at 1/1/1979, with a lesser amount for those with less than 5 years at 1/1/1979.

Change to Vesting Provisions

Effective January 1, 2008, three years of service are required in order to be vested in the accrued benefit. Effective January 1, 2009, all participants were automatically vested in their accrued benefit. Previously, five years were required.

Future Plan Changes

No future plan changes were recognized in this valuation. WTW is not aware of any future plan changes that are required to be reflected.

Changes in Benefits Valued Since Prior Year

There have been no changes in benefits valued since the prior year.

SCHEDULE SB ATTACHMENTS

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

See Schedule SB, Part V - Statement of Actuarial Assumptions/Methods for retirement rates. The average retirement age for Line 22 was calculated by determining the average age at retirement for those current active participants expected to reach retirement, based on all current decrements assumed. Due to cessation of Company operations and the associated plan termination, all active participants who are eligible for retirement are assumed to retire in 2025.

Sumitomo Rubber USA, LLC Pension Plan
34-1899137 / PN 002

Statement attached to and made part of 2025 Form 5500 Schedule R:

During the 2025 plan year, the plan completed settlements in connection with its termination effective March 31, 2025. Lump sum distributions were paid to 424 participants. In addition, annuities were purchased from MetLife for 2,869 participants. Eight participants were transferred to the PBGC Missing Participants Program.

SCHEDULE SB ATTACHMENTS

Schedule SB, Line 7
Explanation of Discrepancy in Prior Funding Standard Carryover Balance or Prefunding Balance

Due to the mergers of the the Sumitomo Rubber USA, LLC 1970 Pension Plan, Salaried Employees Retirement Plan, and the 1950 Pension Plan as of December 31, 2024, the Prefunding Balance as of January 1, 2025 is calculated as follows:

	A **1950 Pension**	B **1970 Pension**	C **Salaried**	D = A + B + C **Merged Plan**
Line 7 - Balance at beginning of prior year	46,376,641	47,945,779	30,336,425	**124,658,845**
Line 8 - Portion used to offset funding	2,515,240	2,003,251	1,466,485	**5,984,976**
Line 9 - Line 7 minus Line 8	43,861,401	45,942,528	28,869,940	**118,673,869**
Interest	2.30%	2.30%	2.32%	
Line 10 - Interest on Line 9	1,008,812	1,056,678	669,783	**2,735,273**
Line 11 - Prior year excess contributions	0	0	0	**0**
Line 12 - Reduction due to elections	44,870,213	46,999,206	29,539,723	**121,409,142**
Line 13 - Balance at beginning of current year	0	0	0	**0**

Note: Due to software limitations, Items 10 and 12 on the filed Schedule SB differ from the amounts shown above. The amounts reflected above represent the merger-adjusted calculations and are the intended amounts absent such software limitations. Item 13 correctly reflects a year-end balance of $0, consistent with the plan sponsor credit balance election to forfeit all credit balance.

Plan Name:	Sumitomo Rubber USA, LLC Pension Plan
EIN / PN:	34-1899137/002
Plan Sponsor:	Sumitomo Rubber USA, LLC
Valuation Date:	January 1, 2025

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
SUMITOMO RUBBER USA, LLC PENSION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
SUMITOMO RUBBER USA, LLC

D Employer Identification Number (EIN)
34-1899137

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	328,911,799
b Actuarial value	**2b**	333,080,214

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	2,226	234,426,722	234,426,722
b For terminated vested participants	306	15,311,495	15,311,495
c For active participants	378	50,236,302	50,236,302
d Total	2,910	299,974,519	299,974,519

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**	5.32 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	2,525,656
c Target normal cost	**6c**	2,525,656

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

Keith Okress KJO — Signature of actuary

October 8, 2026 — Date

KEITH OKRESS — Type or print name of actuary

26-06965 — Most recent enrollment number

WILLIS TOWERS WATSON US LLC — Firm name

(216) 937-4000 — Telephone number (including area code)

1001 LAKESIDE AVENUE, SUITE 1500
CLEVELAND OH 44114-1172 — 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	124,658,845
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	5,984,976
9	Amount remaining (line 7 minus line 8)	0	118,673,869
10	Interest on line 9 using prior year's actual return of 2.30%	0	2,729,499
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.07%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections		121,403,368
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	**14**	111.03%
15	Adjusted funding target attainment percentage	**15**	111.03%
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**	80.89%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	**17**	%

Part IV Contributions and Liquidity Shortfalls

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

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

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

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

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	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**	57

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**	2,525,656
b Excess assets, if applicable, but not greater than line 31a	**31b**	2,525,656

32 Amortization installments:

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

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

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

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

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

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

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

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

SUMITOMO RUBBER USA, LLC PENSION PLAN
f/k/a SUMITOMO RUBBER USA, LLC 1950 PENSION PLAN

FINANCIAL STATEMENTS

December 31, 2025 and 2024

SUMITOMO RUBBER USA, LLC
PENSION PLAN f/k/a
SUMITOMO RUBBER USA, LLC
1950 PENSION PLAN

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Note: Certain schedules normally required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because of the absence of the conditions under which they are required.

SUMITOMO RUBBER USA, LLC PENSION PLAN
f/k/a SUMITOMO RUBBER USA, LLC 1950 PENSION PLAN
December 31, 2025 and 2024

Statements of Net Assets Available for Benefits

(Dollars in Thousands)	December 31, 2025 (in liquidation)	December 31, 2024 (ongoing)
ASSETS		
INVESTMENTS		
Plan's Interest in Master Trust	$ 32,698	$ 329,101
RECEIVABLES		
Receivable from PBGC	145	-
Receivable from Annuity Purchase	3,877	-
Total Receivables	4,022	-
TOTAL ASSETS	36,720	329,101
LIABILITIES		
Accrued Expenses	854	-
Estimated Benefit Obligations	57	-
Asset Reversion to Participants	190	-
Transfer to Other Plan	8,910	-
Payable to Plan Sponsor	26,709	-
TOTAL LIABILITIES	36,720	-
NET ASSETS AVAILABLE FOR BENEFITS	$ -	$ 329,101

Statement of Changes in Net Assets Available for Benefits

(Dollars in Thousands)	Year Ended December 31, 2025 (in liquidation)
Net Investment Gain from Plan's Interest in Master Trust	$ 9,433
Administrative Expenses	(4,083)
Benefits Paid to Participants or Their Beneficiaries	(59,821)
Asset Reversion to Participants	(190)
Transfer to Other Plan	(8,910)
Transfer to Plan Sponsor	(26,709)
Transfer to Insurance Company	(238,821)
Net Decrease	(329,101)
Net Assets Available for Benefits, Beginning of Year	329,101
Net Assets Available for Benefits, End of Year	$ -

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

SUMITOMO RUBBER USA, LLC PENSION PLAN
f/k/a SUMITOMO RUBBER USA, LLC 1950 PENSION PLAN
December 31, 2025 and 2024

Statements of Accumulated Plan Benefits

(Dollars in Thousands)	December 31, 2025 (in liquidation)	December 31, 2024 (ongoing)
Actuarial Present Value of Accumulated Plan Benefits:		
Vested Benefits for:		
Current Employees	$ -	$ 48,751
Retirees	600	236,452
Former Employees	-	15,474
	600	300,677
Nonvested Benefits for Current Employees	-	-
	$ 600	$ 300,677

Statement of Changes in Accumulated Plan Benefits

(Dollars in Thousands)	Year Ended December 31, 2025 (in liquidation)
Actuarial Present Value of Accumulated Plan Benefits, December 31, 2024	$ 300,677
(Decrease) Increase During the Year Attributable to:	
Change in Actuarial Assumptions	-
Benefit Payments	(59,764)
Interest	6,338
Annuity Purchase	(242,501)
Other	(4,600)
Net Increase Prior to Transfer	(300,527)
Transfer from Other Plans	450
Actuarial Present Value of Accumulated Plan Benefits, December 31, 2025	$ 600

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

NOTE 1 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

As a result of the decision to terminate the Sumitomo Rubber USA, LLC Pension Plan f/k/a Sumitomo Rubber USA, LLC 1950 Pension Plan (the "Plan") effective March 31, 2025, and in accordance with U.S. generally accepted accounting principles ("U.S. GAAP"), the Plan's financial statements as of and for the year ended December 31, 2025 are presented using the liquidation basis of accounting. For periods prior to the decision to terminate the Plan, the financial statements were prepared using the ongoing basis of accounting.

Under the liquidation basis of accounting, assets are stated at their estimated net realizable cash value and liabilities are stated at their anticipated settlement amounts. There are no material changes to the 2024 financial statements as a result of the change under the liquidation basis of accounting.

Trust Assets

The Plan participates in the Sumitomo Rubber USA, LLC Master Retirement Trust (the "Master Trust") where The Northern Trust Company is the trustee and custodian. The Master Trust holds investments for pension plans sponsored by Sumitomo Rubber USA, LLC (the "Company" or "SRUSA"). See discussion of significant accounting policies related to the master trust in Note 6.

Remaining Benefit-Related Obligations Under Liquidation and Actuarial Present Value of Accumulated Plan Benefits

Accumulated Plan benefits at December 31, 2025, consists of approximately $200,000 for payment of the employee share of the asset reversion, $100,000 to be transferred to the PBGC for the lost participants, and $300,000 to be transferred to the PBGC for uncashed checks. Accumulated Plan benefits at December 31, 2024, include benefits expected to be paid to:

a) Retired or terminated employees or their beneficiaries.
b) Beneficiaries of employees who died while in active service.
c) Present employees and their beneficiaries.

The actuarial present value of accumulated plan benefits is determined by Willis Towers Watson, consulting actuaries, using actuarial assumptions to reflect the time value of money and the probability that a benefit payment will be made between the valuation date and the expected payment date.

There were no significant actuarial assumptions used in the valuation of the accumulated plan benefits at December 31, 2025. The significant actuarial assumptions used in the valuation of accumulated plan benefits as of December 31, 2024 were:

a) Life Expectancy – Mortality based on Pri-2012 Blue Collar Table projected from 2012 based on an adjusted MP-2019 scale.
b) Retirement Age - Scale ranging from 10% of all eligible employees at age 50 to 100% at age 70. Due to cessation of operations (see Note 2), all active participants who were eligible for retirement were assumed to have retired in 2025. All active participants who were not eligible

for retirement were assumed to have been terminated in 2025.

c) Discount Rate - Obligations of the Plan are assumed to be settled at a rate of 5.25%.

Contributions and Funding

In 2014, SRUSA made contributions to fully fund the former Sumitomo Rubber USA, LLC 1950 Pension Plan as determined by the accounting basis used for SRUSA's financial statements. The merged in former Sumitomo Rubber USA, LLC 1970 Pension Plan was fully funded in 2013. The merged in former Sumitomo Rubber USA, LLC Salaried Employees Retirement Plan was fully funded in 2013. Subsequent to the full funding, the Company agrees to make additional contributions, as needed, to maintain the merged Plan's funded status under the Employee Retirement Income Security Act of 1974 ("ERISA") equal to at least 97%.

During the 2025 Plan year, no Company contributions were required under the minimum funding requirements specified in ERISA or the merged Plan's obligation to maintain the ERISA funded status equal to at least 97%. SRUSA made no discretionary contributions to the merged Plan for the 2025 Plan year.

Expenses

All expenses incurred in the asset custody and management of the Plan are charged to and paid by the Master Trust. Other administrative expenses of the Plan are paid by SRUSA.

Use of Estimates

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

Benefit Payments

Benefit payments to participants are recorded upon distribution.

Subsequent Events

The Plan has evaluated subsequent events through October 15, 2026, the date the financial statements were available to be issued.

NOTE 2 - GENERAL DESCRIPTION OF THE PLAN

The following brief description of the Plan is provided for general information purposes only. Participants should refer to the Plan document maintained by SRUSA, who is the Plan administrator, for more complete information. The Plan is subject to the provisions of ERISA.

Merging of Plans and Termination of Plan

The board of directors of the Company adopted a resolution dated August 21, 2024 to merge the Sumitomo Rubber USA, LLC 1970 Pension Plan ("1970 Plan") and Sumitomo Rubber USA, LLC Salaried

Employees Retirement Plan ("Salaried Plan") into the Sumitomo Rubber USA, LLC 1950 Pension Plan ("1950 Plan") effective December 31, 2024. The Plan was formally amended effective December 31, 2024 to merge the Plans. The Plan was restated effective January 1, 2025 to rename the Plan the Sumitomo Rubber USA, LLC Pension Plan and incorporate the provisions of all three plans.

On November 7, 2024, the Company announced the cessation of the Company's manufacturing activities and the commencement of the windup of the Company's business. The board of directors of the Company adopted a resolution dated December 19, 2024 to terminate the Plan effective March 31, 2025. Subsequent to the termination, the Plan offered an option for participants to take a lump sum distribution or transfer their annuity to an insurance company. On June 3, 2025, the Plan entered into an agreement with an insurance company to purchase a group annuity contract. Effective June 12, 2025, the Plan transferred assets to the insurance company and the related pension benefit obligations were irrevocably settled through the purchase of the group annuity contract. As a result, responsibility for the payment of benefits covered by the annuity contract was transferred to the insurance company beginning with the September 2025 annuity payments. Participants covered by the annuity contract no longer have rights to benefits from the Plan with respect to those obligations.

Following the annuity purchase and subsequent true-ups with the insurance company, the Plan had a residual balance of $31,669,000 at December 31, 2025. On July 22, 2026, the Plan adopted an amendment effective January 1, 2026 that establishes the treatment of residual assets. Under the amendment, the residual assets attributable to employee contributions will be distributed to participants in accordance with regulatory requirements, a portion will be transferred to a related employer qualified retirement plan pursuant to a Qualified Replacement Plan ("QRP") transfer under Internal Revenue Code Section 4980(d)(2)(B), and any remaining assets will revert to the Plan Sponsor. On September 8, 2026, the Plan paid an asset reversion from the Plan's residual balance to participants in the Plan in the amount of $189,983. Additionally, on September 8, 2026, the Plan transferred a portion of the assets to a related employer plan in the amount of $8,910,000. After any final administrative and regulatory expenses are settled, the remaining balance will revert back to SRUSA in late 2026.

Participation and Benefits of 1950 Plan Participants

The 1950 Plan was a defined benefit plan covering hourly employees of the Buffalo Plant of SRUSA. Non-technical employees hired after December 22, 2006 and all employees hired after August 29, 2009 were not eligible to participate in the Plan. The Plan provides for pension, death, disability, service and separation benefits calculated under formulas principally based on length of service.

Effective April 30, 2014, the Plan was frozen and participants do not earn any additional service that counts towards their pension benefits following this date.

Participants could elect to receive their pension benefits in various forms of an immediate or deferred annuity. Effective January 1, 2014, active participants had the option to receive their plan benefit in either a 100% lump sum, or combination of 50% lump sum and annuity, in addition to the existing benefit payment options under the Plan.

Normal retirement age is 65; however, early retirement provisions are available to employees who have attained age 55 and have completed at least ten years of continuous service, or to employees who have completed at least 30 years of service. As a result of the plant closure and as part of amending the Plan, any employee who has completed 23 years of continuous service on or before January 11, 2025 is deemed to have met the requirements for an immediate monthly pension under the plant closure rule.

Participation and Benefits of 1970 Plan Participants

The 1970 Plan was a defined benefit plan covering hourly employees at the Huntsville Plant of SRUSA. The Plan provided for pension, death, disability, service and separation benefits calculated under formulas principally based on length of service. Participants could elect to receive their pension benefits in various forms of an immediate or deferred annuity. Effective December 4, 2003, a majority of the hourly employees covered by the Plan were terminated due to the closing of the Huntsville Plant. Based on agreements reached as part of the 2003 negotiations, the Plan Sponsor and the union agreed to continue the Plan. Normal retirement age is 65; however, early retirement provisions are available to employees who had attained age 55 and had completed at least ten years of continuous service, or to employees who had completed at least 30 years of service.

Participation and Benefits of Salaried Plan Participants

The Salaried Plan was a defined benefit plan covering salaried employees of SRUSA who were not covered by collective bargaining agreements. Effective December 31, 2008, the Plan was frozen and participants did not earn any additional service or compensation that counted towards their pension benefits after that date.

The Plan provided for pension, death, disability, service and separation benefits calculated under formulas principally based on age, service, and final five year average of annual earnings. From January 1, 2004, until December 31, 2008, employees were eligible for an additional benefit by contributing at a rate of 2.0% of earnings above the breakpoint and 1.0% of earnings below the breakpoint. The breakpoint was 50% of the annual Social Security Wage Base, which the Federal government adjusted annually.

Participants, who retired on or after January 1, 2004, could elect to receive their plan benefits in a single lump-sum if elected within 90 days of first receiving written communication explaining the optional forms of payment for the pension benefit, or in various forms of an immediate or deferred annuity, as permitted by government regulations.

Normal retirement age was 65; however, a retirement benefit was available to employees who have not attained age 65 but had completed at least five years of service.

Vesting of 1950 Plan Participants

Effective with the freeze date, normal retirement benefits are 100% vested in the Plan for active employees. Some early retirement subsidies are nonvested for employees who currently do not meet the age and service requirements of the early retirement provisions. As a result of the Plan termination effective March 31, 2025, all participants became fully vested in their accrued benefits effective March 31, 2025.

Vesting of 1970 Plan Participants

Lifetime annuity payments from the Plan vested upon the completion of five years of continuous service. For individuals accumulating continuous service on August 31, 1999 or on December 4, 2003, these benefits are vested.

Vesting of Salaried Plan Participants

Pension benefits were fully vested.

NOTE 3 - TAX STATUS

The Internal Revenue Service ("IRS") has determined and informed SRUSA by a letter dated July 9, 2013 that the 1950 Pension Plan and 1970 Pension Plan, and by letter dated April 5, 2013 that the Salaried Pension Plan are qualified and the trust established for the Plans are exempt from federal income tax under the appropriate sections of the Internal Revenue Code ("IRC"). The Plans have been amended since receiving the determination letter. However, SRUSA and Plan's tax counsel believe the Plans are currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by taxing authorities. Plan management has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. On July 16, 2026, the IRS issued a favorable determination letter for the termination of the Plan.

NOTE 4 - FINANCIAL DATA CERTIFIED BY THE NORTHERN TRUST COMPANY

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, all investment information applicable to the Master Trust and at the plan level is certified complete and accurate or derived from information certified complete and accurate by the custodian and trustee as of December 31, 2025 and 2024 and for the year ended December 31, 2025.

NOTE 5 - PARTIES-IN-INTEREST

Certain Plan investments are managed by Northern Trust Investments, Inc., an affiliate of the custodian and trustee and, therefore, these transactions are party-in-interest transactions. Certain Plan investments were managed by investment entities of Willis Towers Watson, affiliates of the Plan's consulting actuary and, therefore, those transactions were party-in-interest transactions. Fees are paid by the Master Trust for asset custody and management to parties-in-interest. These fees are pursuant to arrangements exempted from the prohibited transactions rules.

NOTE 6 - MASTER TRUST

Investment Valuation and Income Recognition

For the year ended December 31, 2025, the Plan prepared its financial statements on the liquidation basis of accounting. Accordingly, assets are reported at estimated amounts expected to be realized upon settlement, and liabilities include estimated amounts expected to be incurred during the completion of the Plan's termination. Certain amounts represent receivables and payables resulting from the final settlement and reconciliation of annuity purchase transactions, administrative expenses, and amounts expected to be distributed or reverted upon completion of the liquidation process.

For the year ended December 31, 2024, the investments of the Plan were reported at fair value. The fair value of the Plan's interest in the Master Trust was based on the beginning of the year value in the Master Trust plus actual contributions and allocated investment income less actual distributions and allocated administrative expenses. The fair value of investments held by the Master Trust was the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. Investment income and administrative expenses relating to the Master Trust were allocated to the Plan based on the Plan's undivided interest in the master trust.

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 investment gain includes the Master Trust's gains and losses on investments bought and sold as well as held during the year.

Master Trust Net Assets

The following provides a summary of the net assets of the Master Trust at December 31, 2025 and 2024 and changes in net assets of the Master Trust for the year ended December 31, 2025:

Statements of Net Assets Available for Benefits
(Dollars in Thousands)

	December 31, 2025		December 31, 2024	
	Master Trust	Plan's Interest in Master Trust	Master Trust	Plan's Interest in Master Trust
Assets				
Investments:				
Common/Collective Trusts	$ 31,566	$ 31,566	$ 328,971	$ 328,971
	31,566	31,566	328,971	328,971
Receivables:				
Pending Trades	-	-	59,991	59,991
Accrued Income	1,132	1,132	107	107
	1,132	1,132	60,098	60,098
Total Assets	32,698	32,698	389,069	389,069
Liabilities:				
Pending Payables	-	-	(59,968)	(59,968)
Total Liabilities	-	-	(59,968)	(59,968)
Net Assets Available for Benefits	$ 32,698	$ 32,698	$ 329,101	$ 329,101

Statement of Changes in Net Assets Available for Benefits
(Dollars in Thousands)

	Year ended December 31, 2025 (In liquidation)
Contributions	$ -
Investment Income:	
Interest	4,080
Net Gain on Fair Value of Investments	5,353
Benefits Paid to Participants or Their Beneficiaries	(59,764)
Administrative Expenses	(3,374)
Transfer to Insurance Company	(242,698)
Net Decrease	(296,403)
Net Assets Available for Benefits at Beginning of Year	329,101
Net Assets Available for Benefits at End of Year	$ 32,698

Fair Value Measurements

Assets and liabilities measured at fair value are classified using the following hierarchy, which is based upon the transparency of inputs to the valuation as of the measurement date.

- Level 1 – Valuation is based upon quoted prices (unadjusted) for identical assets or liabilities in active markets.
- Level 2 – Valuation is based upon quoted prices for similar assets and liabilities in active markets, or other inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the financial instrument.
- Level 3 – Valuation is based upon other unobservable inputs that are significant to the fair value measurement.

The following table sets forth by level, within the fair value hierarchy, the Master Trust's investments at fair value as of December 31, 2024:

(Dollars in Thousands)

	December 31, 2024			
	Level 1	Level 2	Level 3	Total
Common/Collective Trusts				
Short Term Securities	$ -	$ 94,389	$ -	$ 94,389
Debt Securities	-	234,582	-	234,582
Total Investments at Fair Value	$ -	$ 328,971	$ -	$ 328,971

The classification of fair value measurements within the hierarchy is based upon the lowest level of input that is significant to the measurement. Valuation methodologies used for assets and liabilities measured at fair value are as follows:

Common/Collective Trusts: Valued at the NAV of units held at year end, as determined by a pricing vendor or the fund family. For the investments valued at NAV for the years ending December 31, 2025 and 2024, the NAV, as provided by the trustee of each common collective trust fund, is readily determinable fair value, and is therefore included in the leveling table. If the plan were to initiate a full redemption of any common collective trust, each investment manager reserves the right to temporarily delay withdrawal to ensure that securities liquidation will be carried out in an orderly business manner. The investments in common collective trust funds had a fair value of approximately $328,971,000 as of December 31, 2024, with no unfunded commitments, daily pricing frequency, and full redemption notice periods that extend no greater than 30 days. Common/collective trusts invested in equity securities are invested to earn returns that match or exceed U.S. equity indexes. Common/collective trusts invested in debt securities are invested to earn returns that match or exceed U.S. fixed income indexes. Common/collective trusts invested in short term securities are invested to provide an investment vehicle for cash reserves while offering a competitive rate of return.

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

NOTE 7 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2025 and 2024 to the Form 5500:

	2025	2024
Net Assets Available for Benefits per the Financial Statements	$ -	$ 329,101
Expenses not accrued per the Form 5500	854	-
Interest income not accrued per the Form 5500	(1,029)	-
Receivables not recorded per the Form 5500	(4,022)	-
Transfers and payables not recorded per the Form 5500	35,866	-
Net Assets Available for Benefits per the Form 5500	$ 31,669	$ 329,101

The following is a reconciliation of net decrease in net assets available for benefits per the financial statements for the year ended December 31, 2025 to the Form 5500:

(Dollars in Thousands)

Net decrease in net assets available for benefits per the financial statements	$ (329,101)
Expenses not accrued per the Form 5500	854
Interest income not accrued per the Form 5500	(1,029)
Receivables not recorded per the Form 5500	(4,022)
Transfers and payables not recorded per the Form 5500	35,866
Net loss per the Form 5500	$ (297,431)

SCHEDULE H (Form 5500)	Financial 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), and section 6058(a) of the Internal Revenue Code (the Code). ▶ **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 and ending

A Name of plan	**B** Three-digit plan number (PN) ▶
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

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

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	**2a(1)(A)**		
	(B) Participants	**2a(1)(B)**		
	(C) Others (including rollovers)	**2a(1)(C)**		
	(2) Noncash contributions	**2a(2)**		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	**2b(1)(A)**		
	(B) U.S. Government securities	**2b(1)(B)**		
	(C) Corporate debt instruments	**2b(1)(C)**		
	(D) Loans (other than to participants)	**2b(1)(D)**		
	(E) Participant loans	**2b(1)(E)**		
	(F) Other	**2b(1)(F)**		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		
	(2) Dividends: **(A)** Preferred stock	**2b(2)(A)**		
	(B) Common stock	**2b(2)(B)**		
	(C) Registered investment company shares (e.g. mutual funds)	**2b(2)(C)**		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		
	(3) Rents	**2b(3)**		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	**2b(4)(A)**		
	(B) Aggregate carrying amount (see instructions)	**2b(4)(B)**		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	**2b(4)(C)**		
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	**2b(5)(A)**		
	(B) Other	**2b(5)(B)**		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	**2b(5)(C)**		

		(a) Amount	**(b)** Total
(6) Net investment gain (loss) from common/collective trusts	**2b(6)**		
(7) Net investment gain (loss) from pooled separate accounts	**2b(7)**		
(8) Net investment gain (loss) from master trust investment accounts	**2b(8)**		
(9) Net investment gain (loss) from 103-12 investment entities	**2b(9)**		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	**2b(10)**		
c Other income	**2c**		
d Total income. Add all **income** amounts in column (b) and enter total	**2d**		

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	**2e(1)**		
(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)**		
f Corrective distributions (see instructions)	**2f**		
g Certain deemed distributions of participant loans (see instructions)	**2g**		
h Interest expense	**2h**		
i Administrative expenses: **(1)** Salaries and allowances	**2i(1)**		
(2) Contract administrator fees	**2i(2)**		
(3) Recordkeeping fees	**2i(3)**		
(4) IQPA audit fees	**2i(4)**		
(5) Investment advisory and investment management fees	**2i(5)**		
(6) Bank or trust company trustee/custodial fees	**2i(6)**		
(7) Actuarial fees	**2i(7)**		
(8) Legal fees	**2i(8)**		
(9) Valuation/appraisal fees	**2i(9)**		
(10) Other trustee fees and expenses	**2i(10)**		
(11) Other expenses	**2i(11)**		
(12) Total administrative expenses. Add lines 2i(1) athrough (11)	**2i(12)**		
j Total expenses. Add all **expense** amounts in column (b) and enter total	**2j**		

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	**2k**		
l Transfers of assets:			
(1) To this plan	**2l(1)**		
(2) From this plan	**2l(2)**		

Part III Accountant's Opinion

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

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

(1) ☐ Unmodified **(2)** ☐ Qualified **(3)** ☐ Disclaimer **(4)** ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☐ DOL Regulation 2520.103-8 **(2)** ☐ DOL Regulation 2520.103-12(d) **(3)** ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **(2)** EIN:

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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**			
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**			
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**			
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**			
e Was this plan covered by a fidelity bond?	**4e**			
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**			
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**			
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**			
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**			
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**			
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**			
l Has the plan failed to provide any benefit when due under the plan?	**4l**			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

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

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

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

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

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

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

Attachment to 2025 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name SUMITOMO RUBBER USA, LLC PENSION PLAN **EIN:** 34-1899137

Plan Sponsor's Name SUMITOMO RUBBER USA, LLC **PN:** 002

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value.	(d) Cost	(e) Current value
	GY DUN TIRES NA LTD MASTER TRUST	MASTER TRUST	31,669,296	31,669,296