

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 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☒ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information —enter all requested information
1a Name of plan NEUBERGER BERMAN GROUP 401(K) PLAN	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 01/01/2010
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) NEUBERGER BERMAN GROUP LLC 1290 AVENUE OF THE AMERICAS NEW YORK, NY 10104	2b Employer Identification Number (EIN) 61-1591182 2c Plan Sponsor's telephone number 212-476-9881 2d Business code (see instructions) 523900

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.	09/20/2023	JESSICA COFRESI
	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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ 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 c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 2859
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) 1787
a(2) Total number of active participants at the end of the plan year		6a(2) 1939
b Retired or separated participants receiving benefits		6b 26
c Other retired or separated participants entitled to future benefits.....		6c 1101
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 3066
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 3
f Total. Add lines 6d and 6e		6f 3069
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 3024
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 Characteristics Codes in the instructions: 2E 2G 2J 2K 2R 2T		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ 0 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan NEUBERGER BERMAN GROUP 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 NEUBERGER BERMAN GROUP LLC	D Employer Identification Number (EIN) 61-1591182	

Part I	Service Provider Information (see instructions)
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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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
37 60 64 65 71	RECORDKEEPER	-49767	Yes ☒ No ☐	Yes ☒ No ☐	0	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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BKSTN ALT MULT-STR I - STATE STREE 04-0025081	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NB EQUITY INCOME IS - DST ASSET MA 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NB MULTICAP OPP INST - DST ASSET M 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
AMG RIVER ROAD FOC ABSOLUTE VALUE 600 STEAMBOAT RD STE 300 GREENWICH, CT 06830	0.07%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
AQR RISK BALANCED COMMOD STRATEGY 1 GREENWICH PLAZA GREENWICH, CT 06830	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
SCHARF FUND INVESTOR CLASS 5619 SCOTTS VALLEY DR STE 140 SCOTTS VALLEY, CA 95066	0.12%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
SEVEN CANYONS WORLD INNOVATORS INV 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMANA MUTUAL FUND TRUST GROWTH 1300 NORTH STATE ST BELLINGHAM, WA 98225	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ARTISAN THEMATIC FD INVESTOR CLASS 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.39%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ARTISAN DEVELOPING WORLD FD INVEST 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.39%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BNY MELLON DYNAMIC TOTAL RETURN A 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BARON SMALL CAP FD 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
BARON PARTNERS FUND INSTL CLASS 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
BARON REAL ESTATE FUND RETAIL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
BERKSHIRE FOCUS FUND 475 MILAN DR STE 103 SAN JOSE, CA 95134	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BLACKROCK TECHNOLOGY OPPORTUNITIES 40 EAST 52ND ST NEW YORK, NY 10022	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BROWN ADVISORY SUSTAIN GROWTH ADV 777 E. WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BROWN INTERNATIONAL SMALL COMPANY 1290 BROADWAY STE 1100 DENVER, CO 80203	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
COHEN & STEERS REALTY CLASS A 280 PARK AVE 10TH FL NEW YORK, NY 10017	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
CONESTOGA SMALL CAP INVESTOR CLASS 225 PICTORIA DR STE 450 CINCINNATI, OH 45246	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
DRIEHAUS MICRO CAP GROWTH FUND 25 EAST ERIE ST CHICAGO, IL 60611	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
EATON VANCE WLD WIDEHEALTH SCIENCE TWO INTERNATIONAL PLACE BOSTON, MA 02110	\$16.00	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PARAMETRIC COMMODITYSTRATEGIC CL I TWO INTERNATIONAL PLACE BOSTON, MA 02110	\$16.00	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
EATON VANCE FLOATINGRATE ADVANTAGE TWO INTERNATIONAL PLACE BOSTON, MA 02110	\$16.00	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
FEDERATED HERMES PRUDENT BEAR CL A 4000 ERICSSON DR WARRENDALE, PA 15086-7515	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
SEAFARER OVERSEAS GROWTH & INCOME 1290 BROADWAY STE 1100 DENVER, CO 80203	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
GRANDEUR PEAK GLOBALSTALWARTS INVE 1290 BROADWAY ST STE 1100 DENVER, CO 80203	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
GLENMEDE TOTAL MARKET PORTFOLIO 1650 MARKET ST. STE 1200 PHILADELPHIA, PA 19103	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
GOEHRING & ROZENCWAJG RES INSTL 1290 BROADWAY ST STE 1100 DENVER, CO 80203	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
HARBOR CAP APP INV 111 S. WACKER DR 34TH FL CHICAGO, IL 60606	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
OAKMARK INTL INVESTOR CL 111 SOUTH WACKER DR. CHICAGO, IL 60606	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
OAKMARK GLOBAL SELECT ADVISOR CL 111 SOUTH WACKER DR. CHICAGO, IL 60606	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
OAKMARK GLOBAL FUND INVESTOR CLASS 111 SOUTH WACKER DR. CHICAGO, IL 60606	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
HENNESSY JAPAN INVSTCLASS	7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
HOTCHKIS & WILEY HIGH YIELD FUND C	725 S FIGUEROA 39TH FL LOS ANGELES, CA 90017	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
WCM FOCUSED INTL GROWTH FUND INVES	2220 EAST ROUTE 66 STE 226 GLEN DORA, CA 91740	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
WCM FOCUSED INTL GROWTH FUND INSTL	2220 EAST ROUTE 66 STE 226 GLENDDORA, CA 91740	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
WCM INTL SMALL CAP GROWTH INSTL CL	2220 EAST ROUTE 66 STE 226 GLENDDORA, CA 91740	0.12%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
JANUS HENDERSON GROWTH & INCOME T	151 DETROIT ST. DENVER, CO 80206	0.35%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JANUS HENDERSON MID CAP VALUE T 151 DETROIT ST. DENVER, CO 80206	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JANUS HENDERSON GL LIFE SCIENCES T 151 DETROIT ST. DENVER, CO 80206	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JPMORGAN EMERGING MARKETS EQUITY C 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
MATTHEWS CHINA DIV FUND INVESTOR C 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
MATTHEWS PACIFIC TIGER FUND 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
MATTHEWS JAPAN FUND 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MATTHEWS ASIAN INNOVATORS FD INVST 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MORGAN STANLEY DISCOVERY PORT CL 522 FIFTH AVE 4TH FL A NEW YORK, NY 10036	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MSIF GLOBAL FRANCHISE CLASS A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MORGAN STANLEY GROWTH PORTFOLIO A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MORGAN STANLEY GLOBAL OPPORTUNITY 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MORGAN STANLEY INSTLINTERNTL OPP C 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MORGAN STANLEY MULTI ASSET REAL RT 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NATIONWIDE NYSE ARCA TECH 100 INDE 1000 CONTINENTAL DR STE 400 KING OF PRUSSIA, PA 19406-2850	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ALPHASIMPLEX MANAGEDFUTURE STRAT C 399 BOYLSTON ST 8TH FL BOSTON, MA 02116	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN GENESIS TRUST CLA	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN LARGE CP GRWTH IN	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN EMERG MRKTS EQ IN	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN EMERGING MKTS EQ 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN EQUITY INCOME INS 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN FOCUS INVESTOR CL 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	\$16.00	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
NEUBERGER BERMAN SMALL CAP GRWTH I 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
NEUBERGER BERMAN SUSTAINABLE EQUIT 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
NEUBERGER BERMAN MID CAP GROWTH IN 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN INTL SELECT INSTL 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN LARGE CAP VALUE I 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NB INTERNATIONAL EQUITY FUND INSTL 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN MULTI CAP OPPT CL 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN US EQUITY IMPACT 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN INT SMLL CAP INST 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN DIV GROWTH INSTIT 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN INTRINSIC VALUE C 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN INTRINSIC VALUE I 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN FOCUS INSTITUTION	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN FOCUS FUND CL A	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN GENESIS FUND INST	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.15%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN MUNI HIGH INCOME 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104		0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN EMG MARKETS DEBT 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104		0.10%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN SHT DURATION BOND 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104		0.10%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN FLOAT RATE INC IN 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN STRATEGIC INC INS 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN HIGH INC BOND INS 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN GL ALLOCATION INS 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN LONG SHORT FUND C 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	\$12.00	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEUBERGER BERMAN US EQ IDX PUTWRIT 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN LONG SHORT INSTL	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NEUBERGER BERMAN ABS RTRN MUTLI MG	1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.10%
(a) Enter service provider name as it appears on line 2		(b) Service Codes (see instructions)
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
NORTHERN SMALL CAP VALUE	801 SOUTH CANAL C5S CHICAGO, IL 60675	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
13D ACTIVIST FUND CL I 250 WEST 57TH ST STE 915 NEW YORK, NY 10107	0.08%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PFG EQUITY INDEX FOCUSED STRATEGY 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PFG SECTOR EQUITY BUS CYCLE STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
OBERWEIS INTL OPPORTUNITIES FUND 3333 WARRENVILLE RD STE. 500 LISLE, IL 60532	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PIMCO TRENDS MANAGEDFUTURES STRATE 1633 BROADWAY NEW YORK, NY 10019	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PIMCO COMMODITIES PLUS STRATEGY CL 1633 BROADWAY NEW YORK, NY 10019	0.15%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
T ROWE PRICE GROWTH STOCK 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
T ROWE PRICE HEALTH SCIENCES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
T ROWE PRICE RETIREMENT 2025 FD 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BOSTON PARTNERS ALL CAP VALUE INVS 223 WILMINGTON W CHESTER PIKE 216 CHADDS FORD, PA 19317	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
T ROWE PRICE BLUE CHIP GROWTH INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
T ROWE PRICE NEW ERA 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
T ROWE PRICE OVERSEAS STOCK FUND 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AVE MARIA GROWTH 801 W. ANN ARBOR TRAIL STE 244 PLYMOUTH, MI 48170	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
SHELTON NASDAQ 100 INDEX INVESTOR P.O. BOX 87 DENVER, CO 80201-0087	0.12%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
TIAA CREF HIGH YIELD FUND INSTL	730 THIRD AVE NEW YORK, NY 10017	0.06%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
TIMOTHY PLAN ISRAEL COMMON VALUES	80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.08%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.
TIMOTHY PLAN LRG/MID CAP VALUE CL	80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.08%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
TIMOTHY PLAN LARGE / MID CAP GROWT 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.08%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
VIRTUS ZEVENBERGEN INNOVATIVE GR S 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
VIRTUS DUFF & PHELPS WATER FUND A 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
WASATCH ULTRA GROWTH	505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
WASATCH EMERGING INDIA FUND	505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%
(a) Enter service provider name as it appears on line 2		
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		
WESTERN ASSET MACRO OPPORTUNITIES	100 FOUNTAIN PARKWAY ST. PETERSBURG, FL 33716	0.40%

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:	KPMG LLP	b EIN:	13-5565207
c Position:			
d Address:		e Telephone:	

Explanation: DUE TO RESOURCE CONSTRAINTS, KPMG ELECTED NOT TO CONTINUE AS AUDITORS OF THE PLAN

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 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan NEUBERGER BERMAN GROUP 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 NEUBERGER BERMAN GROUP LLC	D Employer Identification Number (EIN) 61-1591182	

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: NB STR MS FX INC E			
b Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST COMPANY N.A.			
c EIN-PN 20-4797982-008	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3930440	
a Name of MTIA, CCT, PSA, or 103-12 IE: MFS LARGE CAP VAL 3			
b Name of sponsor of entity listed in (a): MFS HERITAGE TRUST COMPANY			
c EIN-PN 57-1187281-003	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 42915237	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK MSCI ACWI US INDEX FUND			
b Name of sponsor of entity listed in (a): WILMINGTON TRUST			
c EIN-PN 81-1950980-013	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28637	
a Name of MTIA, CCT, PSA, or 103-12 IE: VANG INST 500 IDX TR			
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY			
c EIN-PN 81-6327546-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 297134973	
a Name of MTIA, CCT, PSA, or 103-12 IE: WB EM MKT LDRS 2			
b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY			
c EIN-PN 27-6331814-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: NB STR MS FX INC TR			
b Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST COMPANY N.A.			
c EIN-PN 20-4797982-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: NB SUSTAIN EQ TRUST			
b Name of sponsor of entity listed in (a): NEUBERGER BERMAN TRUST COMPANY N.A.			
c EIN-PN 20-4797982-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17936126	

a Name of MTIA, CCT, PSA, or 103-12 IE: BOSTON TR SM CAP RET		
b Name of sponsor of entity listed in (a): BOSTON TRUST WALDEN COMPANY		
c EIN-PN 83-6501761-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19369738
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2030 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2791033-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32529527
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2035 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2791065-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 46349568
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2025 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2790976-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29616817
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2045 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2795992-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27172768
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH RET L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2796126-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 31101650
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2065 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 84-1837050-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3322151
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2060 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 47-1967488-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9224819
a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPAATH 2040 L		
b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN 45-2795948-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32819440
a Name of MTIA, CCT, PSA, or 103-12 IE: WT CIF II GROWTH 2		
b Name of sponsor of entity listed in (a): WELLINGTON TRUST COMPANY, N.A.		
c EIN-PN 04-6913417-033	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 58219315

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2050 L

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 45-2796042-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24006220
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a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2055 L

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 45-2796084-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17758544
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a Name of MTIA, CCT, PSA, or 103-12 IE: WB EMERG MKTS LDR 3

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

c EIN-PN 27-6331814-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16780999
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II **Information on Participating Plans (to be completed by DFEs)**

(Complete as many entries as needed to report all participating plans)

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
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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 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>NEUBERGER BERMAN GROUP 401(K) PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>NEUBERGER BERMAN GROUP LLC</u>	D Employer Identification Number (EIN) <u>61-1591182</u>	

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	100000	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	45665905	52197028
(2) Participant contributions.....	1b(2)	0	0
(3) Other.....	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	95425079	107800460
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common.....	1c(4)(B)	2036364	132916
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants).....	1c(7)	0	0
(8) Participant loans.....	1c(8)	4325149	4543334
(9) Value of interest in common/collective trusts.....	1c(9)	468021106	710216969
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	1088282407	596942100
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1703856010	1471832807

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	3
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	11	29
k Total liabilities (add all amounts in lines 1g through 1j)	1k	11	32

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1703855999	1471832775
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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 Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	52197412	
(B) Participants.....	2a(1)(B)	27328738	
(C) Others (including rollovers).....	2a(1)(C)	7659318	
(2) Noncash contributions.....	2a(2)	0	87185468
(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)	1528986	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	204188	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		1733174
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	51910756	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		51910756
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	9130	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	4840	
(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)	0	
(B) Other.....	2b(5)(B)	-107932	
(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)		-104378710
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-211427911
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		-175080865
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	56981825	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		56981825
f Corrective distributions (see instructions)	2f		11288
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	13	
(4) Other	2i(4)	-50767	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		-50754
j Total expenses. Add all expense amounts in column (b) and enter total	2j		56942359
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-232023224
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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: GRANT THORNTON LLP

(2) EIN: 36-6055558

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.

During the plan year:

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.)

	Yes	No	Amount
4a		X	

	Yes	No	Amount
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?	X		50000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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.)	X		
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		X	

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 _____.

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 2022 This Form is Open to Public Inspection.
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan NEUBERGER BERMAN GROUP 401(K) PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 NEUBERGER BERMAN GROUP LLC		D Employer Identification Number (EIN) 61-1591182
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): 04-6568107		
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
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		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

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
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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) through (c) a Enter the percentage of plan assets held as: Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____% b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more c What duration measure was used to calculate line 19(b)? ☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____
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 _____

NEUBERGER BERMAN GROUP 401(k) PLAN
Financial Statements and Supplemental Schedule
December 31, 2022 and 2021
(With Independent Auditors' Report Thereon)

GRANT THORNTON LLP

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Plan Administrator
Neuberger Berman Group 401(k) Plan

Scope and nature of the ERISA Section 103(a)(3)(C) audit

We have performed an audit of the financial statements of Neuberger Berman Group 401(k) 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2022, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit 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 audit 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 certification from a qualified institution as of December 31, 2022, and for the year then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for opinion

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

Responsibilities of management

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) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's responsibilities for the audit

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

In performing an audit in accordance with US GAAS, we:

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

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

Our audit 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 audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other matters

Supplemental schedule required by ERISA

The supplemental Schedule of Assets (held at end of year) as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

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

Auditor's Report on the 2021 Financial Statements

Predecessor auditors performed an audit of the 2021 financial statements of the Plan. 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, the prior year audit did not extend to any statements or information related to assets held for investment of the plan that were certified by a qualified institution. Their report dated July 22, 2022, indicated that (a) the amounts and disclosures in the 2021 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 2021 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C). Their report also indicated that the form and content of the 2021 supplemental schedule, other than the information in the 2021 supplemental schedule that agreed to or is derived from the certified investment information, was presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2021 supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determines meets the requirements of ERISA Section 103(a)(3)(C).

Grant Thornton LLP

Chicago, Illinois
August 2, 2023

NEUBERGER BERMAN GROUP 401(k) PLAN

Statements of Net Assets Available for Benefits

December 31, 2022 and 2021

	2022	2021
Assets:		
Cash	\$ -	\$ 100,000
Investments at fair value:		
Money market fund	102,555,389	91,472,043
BrokerageLink:		
Common stock	132,916	2,036,364
Money market fund	5,245,071	3,953,036
Exchange traded funds	16,384,360	16,434,811
Registered investment company funds	12,437,466	13,918,073
Total BrokerageLink	34,199,813	36,342,284
Collective investment trusts	710,216,969	468,021,106
Registered investment company funds	568,120,274	1,057,929,523
Total investments	1,415,092,445	1,653,764,956
Receivables:		
Company contributions receivable	52,197,028	45,665,905
Notes receivable from participants	4,543,334	4,325,149
Total receivables	56,740,362	49,991,054
Total assets	\$1,471,832,807	\$1,703,856,010
Liabilities:		
Other liabilities	32	11
Total liabilities	\$ 32	\$ 11
Net assets available for benefits	\$1,471,832,775	\$1,703,855,999

*See accompanying notes to the Financial Statements. .

NEUBERGER BERMAN GROUP 401(k) PLAN
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2022 and 2021

	2022	2021
Changes to net assets attributable to:		
Investment income (loss):		
Interest and dividends	\$ 53,439,742	\$ 84,806,578
Net appreciation (depreciation) in investments at fair value	(315,910,263)	178,284,647
Total investment income (loss)	(262,470,521)	263,091,225
Interest on notes receivable from participants	204,188	221,526
Contributions:		
Employee	27,328,738	23,830,166
Company	52,197,412	47,225,278
Rollovers	7,659,318	12,550,002
Total contributions	87,185,468	83,605,446
Total additions (reductions)	(175,080,865)	346,918,197
Deductions from net assets attributable to:		
Benefits paid to participants	56,911,652	79,665,204
Loan administrative expenses	19,419	91,478
Corrective distributions	11,288	5,485
Total deductions	56,942,359	79,762,167
Net increase (decrease) in net assets available for benefits	(232,023,224)	267,156,030
Net assets available for benefits at:		
Beginning of year	1,703,855,999	1,436,699,969
End of year	\$1,471,832,775	\$1,703,855,999

See accompanying notes to the Financial Statements.

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

(1) Description of the Plan

(a) Organization

The Neuberger Berman Group 401(k) Plan (the Plan) is a profit-sharing plan that provides for an Internal Revenue Code Section 401(k) feature. The Plan was established by Neuberger Berman Group LLC, a Delaware limited liability company (NBG), effective as of January 1, 2010 as an individually designed plan, and was subsequently amended and restated effective as of June 1, 2011 in the form of the Adoption Agreement No. 001 to the Fidelity Volume Submitter Defined Contribution Plan – Basic Plan Document Number 14 (the Volume Submitter Plan). The Plan was again amended and restated in the form of an individually designed plan effective as of December 31, 2014 with certain changes effective as of earlier dates. The Plan had multiple amendments with the last amendment effective as of October 26, 2022. The Plan and its related trust are intended to qualify under Section 401(a) of the Internal Revenue Code of 1986, as amended (IRC), and to be exempt from federal income taxation under IRC Section 501(a).

All capitalized terms not otherwise described herein shall have the meanings ascribed to them in the Plan document.

(b) General

The following description of the Plan provides only general information regarding the Plan's terms as of December 31, 2022. Members (as hereinafter defined) in the Plan should refer to the Plan document for a more complete description of the Plan's provisions.

The Plan provides for employee compensation deferral contributions, as well as a discretionary matching and/or a profit sharing contribution by NBG (any such matching or profit sharing contribution, a Profit Sharing Contribution). The Plan covers all employees of NBG and its U.S. subsidiaries (NBG and such subsidiaries, collectively the Company) who meet the applicable eligibility requirements described in the Plan (Eligible Employees). Leased employees, nonresident aliens with no U.S. source income, and employees who are covered by a collective bargaining agreement (unless the agreement expressly provides for the inclusion of an employee) are not Eligible Employees and are not eligible to participate in the Plan. Temporary employees hired on or after January 1, 2015 while not treated as Eligible Employees under the Plan for their first 90 days of employment will be treated as Eligible Employees on their 91st day of employment. For the 2022 and 2021 Plan Years, Eligible Employees were able to participate in the Plan, for all purposes other than eligibility for Profit Sharing Contributions, if any, as of the first day of the commencement of their employment. For the 2022 and 2021 Plan Years, Eligible Employees were eligible to be credited with Profit Sharing Contributions, if any, after completion of one Hour of Service, provided that the Eligible Employee was employed by the Company as of the last day of the Plan Year, and as otherwise provided in the Plan. Commencing with the 2016 Plan Year, employees who are classified as Program Analysts and Program Associates are not eligible to receive Profit Sharing Contributions.

Eligible Employees who are eligible to participate in the 401(k) component and/or the Profit Sharing Contribution component of the Plan are hereafter referred to collectively as "Participants", and individually as a "Participant." Participants, retired Participants, terminated Participants and transferred Participants are hereafter referred to as "Members." An Eligible Employee is not required to contribute to the 401(k) component of the Plan in order to be eligible to participate in the Profit Sharing Contribution component of the Plan, if any, provided that such Eligible Employee meets the applicable eligibility requirements with

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

respect to the Plan's Profit Sharing Contribution component. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA), as well as the IRC.

The Plan accepts eligible rollover contributions from Eligible Employees. If an Eligible Employee has been a participant in another qualified plan, such Eligible Employee may transfer his or her eligible account balance into the Plan.

(c) Plan Administration

The plan administrator is NBG (the Plan Administrator). The Plan Administrator has delegated its power and authority with respect to the general administration of the Plan to the Administrative Committee under the Plan, which is comprised of certain members of management of the Company. Fidelity Management Trust Company (FMTTC) serves as the record keeper and trustee to the Plan (the Trustee).

(d) Eligible Employees' Contributions - 401(k) Account

The Eligible Employees may begin contributing to the 401(k) component of the Plan immediately upon commencement of employment with the Company. Contributions are made through payroll deductions which, in the employees' discretion, may range from 1% to 100% (subject to IRC limitations) of such employee's compensation (as defined in the Plan) on a before-tax basis, an after-tax basis, or a combination thereof (Salary Reduction Contributions). Participants who are at least age 50 or older during a Plan Year are automatically enrolled to make an additional "catch-up contribution" equal to a specified dollar amount on a before-tax basis, an after-tax basis, or a combination thereof (subject to IRC limitations) unless the Participant stops contributing.

Unless and until otherwise elected by an Eligible Employee, an Eligible Employee hired on or after January 1, 2014 who fails to make an affirmative election with regard to participation in the Plan will be automatically enrolled and deemed to have made an election to make Salary Reduction Contributions equal to three percent (3%) of compensation (the Initial Automatic Enrollment Percentage), which will commence as soon as administratively feasible on or after 45 days following an Eligible Employee's first day of employment as an Eligible Employee. The Initial Automatic Enrollment Percentage is increased by one percent (1%) each January 1 following the date of automatic enrollment to a maximum of six percent (6%) of compensation. Any Salary Reduction Contributions or any Profit Sharing Contributions will be invested in the default investment fund designated by the Investment Committee unless and until such time as the Eligible Employee otherwise makes an investment election in accordance with the Plan's provisions.

(e) Company Contributions

In accordance with the terms of the Plan, an Eligible Employee is eligible for a year-end discretionary Profit Sharing Contribution, if any, provided the following applicable criteria are met.

For Plan Years 2022 and 2021, the Eligible Employee was required to: (i) have completed one Hour of Service, and either (ii) have been employed by the Company on the last day of the applicable Plan Year, or (iii) have died or become disabled during the applicable Plan Year.

An Eligible Employee who meets the applicable eligibility requirements to receive a profit sharing contribution is a "Profit Sharing Participant."

For the 2022 and 2021 Plan Year, the Company made a Profit Sharing Contribution to the Plan of \$52.2 million and \$45.7 million, respectively, which included \$1,990 and \$398 of forfeitures that resulted from a

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

Participant's termination of employment, respectively. Each Profit Sharing Participant was credited with a Profit Sharing Contribution based on the applicable formula set forth below:

- All Profit Sharing Participants – 15% of compensation (subject to IRC limitations);

The Profit Sharing Contribution amounts for each Plan Year were credited to the Profit Sharing Participant's profit sharing account under the Plan, regardless of such employee's participation in, or contributions to the 401(k) component of the Plan. Profit Sharing Contributions were immediately fully vested.

(f) Excess Contributions

Excess contributions, if any, represent net amounts in excess of the IRC limitations and in accordance with the provisions of the Plan that were withheld from Eligible Employees' accounts and refunded subsequent to year end. These amounts are recorded as a liability in the Plan's Statements of Net Assets Available for Benefits.

(g) Vesting

Participants who complete one Hour of Service are always fully vested in the 401(k) contributions they make to the Plan and the earnings thereon. Each Participant who is entitled to receive Profit Sharing Contributions, if any, is fully vested in all such contributions, if any, made to the Plan on the Participant's behalf (plus actual earnings thereon).

(h) Member Accounts

A Member's account under the Plan is valued on a daily basis based on quoted or calculated prices. Each account is credited with the Member's respective compensation deferral contributions, net investment earnings (losses), administrative expenses and previously made Profit Sharing Contributions and rollover contributions, if any. The benefit to which a Member is entitled is the benefit that can be provided from the Member's vested account.

(i) In-Service Distribution and Hardship Withdrawals

Participants have the right to receive in-service distributions from the vested portion of their account on or after attainment of age fifty-nine and one-half. A Participant has the right at any time to withdraw any or all after-tax amounts or any or all amounts that were rolled over into the Plan.

A Participant has the right to make hardship withdrawals, as defined in the Plan document, by applying vested assets held in any of his or her Plan accounts to pay for certain medical expenses, purchase of a principal residence, tuition payment for post-secondary education, payments to prevent eviction from a primary residence, burial or funeral expenses and casualty losses to a principal residence.

(j) Benefit Payments

Generally, a Member's account balance under the Plan may be distributed upon termination of employment in one of two ways: lump-sum distribution, or, if the Participant has reached 72 years of age, in periodic installments over the Participant's life expectancy, as elected (subject to limits imposed by the IRC), subject in certain cases to spousal consent. Solely with respect to Participants who transferred amounts to the Plan from the Neuberger Berman, LLC Pension Plan, a Participant may elect to receive his or her

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

account balance under the Plan in form of a qualified joint and 50% survivor annuity or joint and 75% survivor annuity.

Participants are required to take minimum distributions by April 1 of the calendar year following the later of:

- The calendar year in which the Participant attains 72 years of age; or
- The calendar year in which the Participant terminates employment from the Company.

Required minimum distributions were suspended for the 2022 Plan Year pursuant to the Coronavirus Aid, Relief, and Economic Security Act (the CARES Act).

Upon death, disability, or termination of employment, a Participant (or the Participant's beneficiary) with \$1,000 or less in vested benefits will receive a lump-sum distribution from the Plan equal to the Participant's vested account balance.

(k) Notes Receivable from Participants

A Participant may borrow from the vested portion of his or her account under the Plan a minimum of \$1,000 up to a maximum amount equal to the lesser of (i) \$50,000 reduced by the Participant's highest outstanding loan balance under the Plan (or any other plan maintained by the Company) during the prior twelve months, or (ii) 50% of the Participant's vested account balance at the time any such loan is made. Loans for the purchase of a principal residence must be repaid in one to ten years, at the Participant's option. Loans for all other purposes must be repaid in one to five years, at the Participant's option. Loans are collateralized by the balance in the Participant's account and bear interest at the prime rate plus 1% at the time of loan origination. In 2022 and 2021, the applicable loan rate was 4.25% to 9.25%. No more than two loans from the Plan to a Participant are permitted at any time. All principal and interest payments made by the Participant are credited back to the Participant's account. As of December 31, 2022 notes receivable from Participants had loan maturity dates ranging from January 2023 to December 2030.

(l) Investment Management Fees and Administrative Expenses

Certain investment management fees are netted with investment income. As discussed in footnote (2) (c), the Company can use forfeitures to pay for administrative expenses or reduce the Company's contributions to the Plan. Administrative expenses not covered by forfeitures are paid by the Company. Participants who take a loan from the Plan incur a one-time fee for establishing the loan. A quarterly loan administration fee is also charged by the Trustee for each outstanding loan. These costs, which are borne by the Participants, are reported on the Statements of Changes in Net Assets Available for Benefits as Loan administrative expenses and totaled \$19,419 and \$91,478 for 2022 and 2021, respectively.

(m) Investment Elections

Each Member may direct his or her account balance into one or more of the investment options offered by the Plan, or into the many other options available through BrokerageLink, a self-directed brokerage account offered through Fidelity Investments; provided, however, that the maximum amount that a Member may invest through BrokerageLink is 100% of his or her account balance. BrokerageLink provides Members access to Fidelity's Funds Network, including in excess of two thousand funds inside and outside the Fidelity Fund Family. Allocations among the Plan investment options and BrokerageLink must be in increments of 1% of each contribution. A Participant may change such allocation and may transfer all or a

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements

December 31, 2022 and 2021

portion of the value of his or her account in increments of 1% among the fund options (and BrokerageLink, up to maximum of 100%) at any time.

(2) Summary of Significant Accounting Policies

(a) Basis of Presentation and Use of Estimates

The accompanying financial statements have been prepared on the accrual basis in conformity with U.S. generally accepted accounting principles (GAAP). 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 at the date of the financial statements. Although these estimates and assumptions are based on the best available information, actual results could differ from those estimates.

(b) Investment Valuation

Investments are reported at fair value and include registered investment companies based on various equity and fixed income strategies, money market funds and exchange traded funds, as well as collective investment trusts. See footnote 4.

(c) Forfeitures

Terminated Participants may forfeit any unvested Profit Sharing Contributions. Forfeiture will occur in the Plan Year that the terminated Participant received a distribution of his or her entire vested account or, in the event no distribution is taken, after five consecutive one-year breaks in service. Such forfeitures are used to pay for Plan expenses or reduce the Company's subsequent contributions to the Plan, as directed by the Plan Administrator. As of December 31, 2022 and 2021, there were \$1,990 and \$398, respectively, of forfeitures available to reduce Plan expenses and/or Company contributions. Participants who did not take a distribution and are reemployed by the Company before five consecutive one-year breaks in service are eligible to have forfeited amounts restored to their accounts. Participants who did receive a distribution upon termination of employment and are reemployed by the Company before five consecutive one-year breaks in service and repay the full distribution before the end of the five-year period that begins on the date they are reemployed are eligible to have forfeited amounts restored to their accounts.

(d) Notes Receivable from Participants

Notes receivable from Participants are reported at their unpaid principal balance plus any accrued but unpaid interest. Delinquent Participant loans are reported as taxable distributions based upon the terms of the Plan document.

(e) Income Recognition

The net appreciation (depreciation) resulting from changes in market value (or fair value) of the investments consists of the net realized gains (losses) from the sale of investments and the unrealized appreciation (depreciation) of the market value for the investments remaining in the Plan. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Purchases and sales of securities are recorded on a trade date basis.

(f) Payment of Benefits

Benefits are recorded when paid.

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

(g) Risks and Uncertainties

The Plan provides for various investment options in a combination of different investment instruments (as described in footnote 1(m) above). The Plan's investment options, and other options available through BrokerageLink are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks could materially affect Members' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

(3) Financial Information Certified by Trustee

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

The following information, which is included in the financial statements and supplemental schedule, was provided and certified by the Trustee as complete and accurate and was not subject to auditing procedures by the Plan's independent auditor:

- Investments at fair value (excluding level designation in footnote 4)
- Notes receivable from participants
- Interest and dividend income
- Net appreciation (depreciation) in fair value of investments
- Interest on notes receivable from participants
- Schedule of assets (held at end of year) – December 31, 2022

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

(4) Fair Value Measurements

GAAP provides a framework for measuring fair value that prioritizes the inputs to valuation techniques used in connection with determining such valuation. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1 – Inputs to the valuation methodology are unadjusted quoted prices that the Plan has the ability to access for identical assets or liabilities in active markets.
- Level 2 – Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices which are observable for the specified asset or liability;
 - Inputs derived principally from or corroborated by observable market data by correlation or other means.
- Level 3 – Inputs to the valuation methodology are unobservable, but are significant to the fair value measurement.

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

The following is a description of the valuation methodologies used for assets measured at fair value at December 31, 2022 and 2021.

Money market funds – the money market funds are valued based on published net asset values (“NAV”) and are included in Level 1 of the valuation hierarchy.

Exchange-traded funds and common stock – the exchange-traded funds and common stock are generally valued using unadjusted quoted market prices and are included in Level 1 of the valuation hierarchy.

Registered investment company funds – the Plan utilizes the daily NAV value reported by the registered investment funds. The NAV value is an unadjusted quoted price on an active market and classified within Level 1 of the fair value hierarchy.

Collective investment trusts – the collective investment trusts are valued based on the NAV, calculated daily and reported by each fund and are included in Level 1 of the valuation hierarchy.

The methods described above may produce a fair value calculation that is valid on the date of determination, but might not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate, in accordance with current guidance 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

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

measurement at the reporting date. There were no changes in valuation methodology used as at December 31, 2022 and 2021 and there were no transfers between any levels for the years ended December 31, 2022 and 2021.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022 and 2021:

December 31, 2022				
	Level 1	Level 2	Level 3	Total
Money market fund	\$ 102,555,389	\$ -	\$ -	\$ 102,555,389
Registered investment company funds	568,120,274	-	-	568,120,274
Collective investment trusts	710,216,969	-	-	710,216,969
	\$ 1,380,892,632	\$ -	\$ -	\$ 1,380,892,632

BrokerageLink:				
Money market fund	\$ 5,245,071	\$ -	\$ -	\$ 5,245,071
Common stock	132,916	-	-	132,916
Exchange traded funds	16,384,360	-	-	16,384,360
Registered investment funds	12,437,466	-	-	12,437,466
Total BrokerageLinks	34,199,813	-	-	34,199,813
Total investments	\$ 1,415,092,445	\$ -	\$ -	\$ 1,415,092,445

December 31, 2021				
	Level 1	Level 2	Level 3	Total
Money market fund	\$ 91,472,043	\$ -	\$ -	\$ 91,472,043
Registered investment company funds	1,057,929,523	-	-	1,057,929,523
Collective investment trusts	468,021,106	-	-	468,021,106
	\$ 1,617,422,672	\$ -	\$ -	\$ 1,617,422,672

BrokerageLink:				
Money market fund	\$ 3,953,036	\$ -	\$ -	\$ 3,953,036
Common stock	2,036,364	-	-	2,036,364
Exchange traded funds	16,434,811	-	-	16,434,811
Registered investment funds	13,918,073	-	-	13,918,073
Total BrokerageLinks	36,342,284	-	-	36,342,284
Total investments	\$ 1,653,764,956	\$ -	\$ -	\$ 1,653,764,956

(5) Related Party Transaction

The Plan provides Participants with the option to invest in certain registered investment companies managed by an affiliate of FMTC, the Trustee of the Plan. The Plan also provides Participants with the option to invest in certain registered investment companies and collective trusts managed by subsidiaries of NBG. The Trustee and NBG are parties in interest as defined in ERISA. Accordingly, the transactions in

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

which the Plan engages with the registered investment companies and collective investment trusts managed by affiliates of the Trustee and NBG are deemed party in interest transactions and generally would be prohibited under ERISA; however, due to certain class exemptions granted by the Department of Labor such transactions are deemed exempt.

(6) Tax Status

The initial Plan, which was effective as of January 1, 2010, was established as an individually designed plan and received a favorable determination letter from the IRS in November 2012.

As described in footnote 1, effective as of June 1, 2011, the Plan, was amended and restated pursuant to an Adoption Agreement with respect to the Fidelity Volume Submitter Defined Contribution Plan. The Fidelity Volume Submitter Defined Contribution Plan received an opinion letter from the Internal Revenue Service dated March 31, 2008 (the Opinion Letter) stating that such Plan qualifies under Section 401(a) of the IRC. Although the Volume Submitter Plan was amended to include an additional provisions addendum to the Adoption Agreement to the Fidelity Volume Submitter Defined Contribution Plan, the Company believes that the Plan continued to operate in compliance with the applicable requirements of the IRC and that it could continue to rely on the Opinion Letter through the date of the Plan's subsequent amendments and restatements.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2022 and 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(7) Plan Termination

The Plan has no termination date and it is NBG's current intention to continue the Plan indefinitely. However, NBG may terminate, amend, modify or suspend the Plan at any time subject to the applicable provisions of ERISA. In the event of a Plan termination, the rights of all Members to benefits accrued under the Plan as of the date of such termination, to the extent then funded, would be non-forfeitable and the Plan assets would be distributed in accordance with the terms of the Plan.

(8) Subsequent Events

In connection with the preparation of these financial statements, the Plan Administrator evaluated events occurring subsequent to the date of the financial statements through August 2, 2023, the date that the financial statements were available to be issued.

NEUBERGER BERMAN GROUP 401(k) PLAN
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

Investments at fair value	Description of investment	Shares/units par value	Current value
Fidelity Investments Money Market Treasury Fund	Money market fund	102,555,389	\$ 102,555,389
BrokerageLink	Money market fund	5,245,071	5,245,071
BrokerageLink	Common stock	4,106	132,916
BrokerageLink	Exchange-traded funds	661,963	16,384,360
BrokerageLink	Registered investment company funds	803,444	12,437,466
			<u>\$ 34,199,813</u>
BlackRock LifePath Retirement Fund	Collective investment trust	1,894,247	31,101,650
BlackRock LifePath 2025 Fund	Collective investment trust	1,547,158	29,616,817
BlackRock LifePath 2030 Fund	Collective investment trust	1,572,609	32,529,527
BlackRock LifePath 2035 Fund	Collective investment trust	2,086,316	46,349,568
BlackRock LifePath 2040 Fund	Collective investment trust	1,390,993	32,819,440
BlackRock LifePath 2045 Fund	Collective investment trust	1,096,635	27,172,768
BlackRock LifePath 2050 Fund	Collective investment trust	939,148	24,006,220
BlackRock LifePath 2055 Fund	Collective investment trust	681,948	17,758,544
BlackRock LifePath 2060 Fund	Collective investment trust	540,551	9,224,819
BlackRock LifePath 2065 Fund	Collective investment trust	283,603	3,322,151
BlackRock MSCI SCWI IMI Fund	Collective investment trust	29,238	28,640
* Neuberger Berman Strategic Income Fund	Collective investment trust	350,932	3,930,440
Boston Trust Small Cap Fund	Collective investment trust	1,606,114	19,369,738
* Neuberger Berman Sustainable Equity Fund	Collective investment trust	1,213,540	17,936,126
WT CIF II Growth	Collective investment trust	2,944,831	58,219,315
William Blair Emerging Markets Leaders Fund III	Collective investment trust	1,252,463	16,780,999
Vanguard 500 Index Fund	Collective investment trust	3,056,944	297,134,972
MFS Large Cap Value Fund	Collective investment trust	1,094,497	42,915,235
			<u>\$ 710,216,969</u>
* Neuberger Berman Large Cap Value Fund	Registered investment company funds	3,686,441	158,775,013
* Neuberger Berman Absolute Return Multi-Manager Fund	Registered investment company funds	204,734	2,333,970
* Neuberger Berman Real Estate Fund	Registered investment company funds	1,305,849	16,244,756
* Neuberger Berman Equity Income Fund	Registered investment company funds	2,538,006	32,816,422
* Neuberger Berman International Equity Fund	Registered investment company funds	2,610,493	29,185,306
Vanguard Total International Stock Index Fund	Registered investment company funds	159,158	17,733,389
Vanguard International Bond Index Fund	Registered investment company funds	3,613	68,424
* Neuberger Berman Multi Cap Opportunities Fund	Registered investment company funds	7,935,240	71,893,272
MetWest Total Return Bond Fund	Registered investment company funds	1,963,687	16,652,064
* Neuberger Berman Genesis Fund	Registered investment company funds	2,383,108	129,593,421
American Funds Capital World Fund	Registered investment company funds	409,302	21,103,594
PIMCO Foreign Bond (unhedged) Fund	Registered investment company funds	171,246	1,292,908
Blackstone Alternative Multi-Strategy Fund	Registered investment company funds	64,947	656,615
* Neuberger Berman High Income Bond Fund	Registered investment company funds	2,084,207	15,173,029
* Fidelity Spartan Extended Market Index Fund	Registered investment company funds	638,715	40,251,789
* Fidelity Spartan US Bond Index Fund	Registered investment company funds	1,409,263	14,346,302
			<u>\$ 568,120,274</u>
			<u>\$ 1,415,092,445</u>
	255 notes receivable from participants with interest rates ranging from 4.25% to 9.25% and maturity dates ranging from January 2023 to December 2030		
* Notes receivables from participants			<u>\$ 4,543,334</u>
			<u>\$ 1,419,635,779</u>

The information on this schedule was prepared from information provided and certified as complete and accurate by Fidelity Management Trust Company.

* Party in interest as defined by ERISA
See accompanying independent auditors' report.

NEUBERGER BERMAN GROUP 401(k) PLAN
Financial Statements and Supplemental Schedule
December 31, 2022 and 2021
(With Independent Auditors' Report Theron)

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Plan Administrator
Neuberger Berman Group 401(k) Plan

Scope and nature of the ERISA Section 103(a)(3)(C) audit

We have performed an audit of the financial statements of Neuberger Berman Group 401(k) 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) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2022, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit 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 audit 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 certification from a qualified institution as of December 31, 2022, and for the year then ended, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for opinion

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

Responsibilities of management

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) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's responsibilities for the audit

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

In performing an audit in accordance with US GAAS, we:

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

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

Our audit 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 audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other matters

Supplemental schedule required by ERISA

The supplemental Schedule of Assets (held at end of year) as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

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

Auditor's Report on the 2021 Financial Statements

Predecessor auditors performed an audit of the 2021 financial statements of the Plan. 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, the prior year audit did not extend to any statements or information related to assets held for investment of the plan that were certified by a qualified institution. Their report dated July 22, 2022, indicated that (a) the amounts and disclosures in the 2021 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 2021 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C). Their report also indicated that the form and content of the 2021 supplemental schedule, other than the information in the 2021 supplemental schedule that agreed to or is derived from the certified investment information, was presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2021 supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determines meets the requirements of ERISA Section 103(a)(3)(C).

Grant Thornton LLP

Chicago, Illinois
August 2, 2023

NEUBERGER BERMAN GROUP 401(k) PLAN

Statements of Net Assets Available for Benefits

December 31, 2022 and 2021

	2022	2021
Assets:		
Cash	\$ -	\$ 100,000
Investments at fair value:		
Money market fund	102,555,389	91,472,043
BrokerageLink:		
Common stock	132,916	2,036,364
Money market fund	5,245,071	3,953,036
Exchange traded funds	16,384,360	16,434,811
Registered investment company funds	12,437,466	13,918,073
Total BrokerageLink	34,199,813	36,342,284
Collective investment trusts	710,216,969	468,021,106
Registered investment company funds	568,120,274	1,057,929,523
Total investments	1,415,092,445	1,653,764,956
Receivables:		
Company contributions receivable	52,197,028	45,665,905
Notes receivable from participants	4,543,334	4,325,149
Total receivables	56,740,362	49,991,054
Total assets	\$1,471,832,807	\$1,703,856,010
Liabilities:		
Other liabilities	32	11
Total liabilities	\$ 32	\$ 11
Net assets available for benefits	\$1,471,832,775	\$1,703,855,999

*See accompanying notes to the Financial Statements. .

NEUBERGER BERMAN GROUP 401(k) PLAN
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2022 and 2021

	2022	2021
Changes to net assets attributable to:		
Investment income (loss):		
Interest and dividends	\$ 53,439,742	\$ 84,806,578
Net appreciation (depreciation) in investments at fair value	(315,910,263)	178,284,647
Total investment income (loss)	(262,470,521)	263,091,225
Interest on notes receivable from participants	204,188	221,526
Contributions:		
Employee	27,328,738	23,830,166
Company	52,197,412	47,225,278
Rollovers	7,659,318	12,550,002
Total contributions	87,185,468	83,605,446
Total additions (reductions)	(175,080,865)	346,918,197
Deductions from net assets attributable to:		
Benefits paid to participants	56,911,652	79,665,204
Loan administrative expenses	19,419	91,478
Corrective distributions	11,288	5,485
Total deductions	56,942,359	79,762,167
Net increase (decrease) in net assets available for benefits	(232,023,224)	267,156,030
Net assets available for benefits at:		
Beginning of year	1,703,855,999	1,436,699,969
End of year	\$1,471,832,775	\$1,703,855,999

See accompanying notes to the Financial Statements.

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

(1) Description of the Plan

(a) Organization

The Neuberger Berman Group 401(k) Plan (the Plan) is a profit-sharing plan that provides for an Internal Revenue Code Section 401(k) feature. The Plan was established by Neuberger Berman Group LLC, a Delaware limited liability company (NBG), effective as of January 1, 2010 as an individually designed plan, and was subsequently amended and restated effective as of June 1, 2011 in the form of the Adoption Agreement No. 001 to the Fidelity Volume Submitter Defined Contribution Plan – Basic Plan Document Number 14 (the Volume Submitter Plan). The Plan was again amended and restated in the form of an individually designed plan effective as of December 31, 2014 with certain changes effective as of earlier dates. The Plan had multiple amendments with the last amendment effective as of October 26, 2022. The Plan and its related trust are intended to qualify under Section 401(a) of the Internal Revenue Code of 1986, as amended (IRC), and to be exempt from federal income taxation under IRC Section 501(a).

All capitalized terms not otherwise described herein shall have the meanings ascribed to them in the Plan document.

(b) General

The following description of the Plan provides only general information regarding the Plan's terms as of December 31, 2022. Members (as hereinafter defined) in the Plan should refer to the Plan document for a more complete description of the Plan's provisions.

The Plan provides for employee compensation deferral contributions, as well as a discretionary matching and/or a profit sharing contribution by NBG (any such matching or profit sharing contribution, a Profit Sharing Contribution). The Plan covers all employees of NBG and its U.S. subsidiaries (NBG and such subsidiaries, collectively the Company) who meet the applicable eligibility requirements described in the Plan (Eligible Employees). Leased employees, nonresident aliens with no U.S. source income, and employees who are covered by a collective bargaining agreement (unless the agreement expressly provides for the inclusion of an employee) are not Eligible Employees and are not eligible to participate in the Plan. Temporary employees hired on or after January 1, 2015 while not treated as Eligible Employees under the Plan for their first 90 days of employment will be treated as Eligible Employees on their 91st day of employment. For the 2022 and 2021 Plan Years, Eligible Employees were able to participate in the Plan, for all purposes other than eligibility for Profit Sharing Contributions, if any, as of the first day of the commencement of their employment. For the 2022 and 2021 Plan Years, Eligible Employees were eligible to be credited with Profit Sharing Contributions, if any, after completion of one Hour of Service, provided that the Eligible Employee was employed by the Company as of the last day of the Plan Year, and as otherwise provided in the Plan. Commencing with the 2016 Plan Year, employees who are classified as Program Analysts and Program Associates are not eligible to receive Profit Sharing Contributions.

Eligible Employees who are eligible to participate in the 401(k) component and/or the Profit Sharing Contribution component of the Plan are hereafter referred to collectively as "Participants", and individually as a "Participant." Participants, retired Participants, terminated Participants and transferred Participants are hereafter referred to as "Members." An Eligible Employee is not required to contribute to the 401(k) component of the Plan in order to be eligible to participate in the Profit Sharing Contribution component of the Plan, if any, provided that such Eligible Employee meets the applicable eligibility requirements with

NEUBERGER BERMAN GROUP 401(k) PLAN

Notes to the Financial Statements
December 31, 2022 and 2021

respect to the Plan's Profit Sharing Contribution component. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA), as well as the IRC.

The Plan accepts eligible rollover contributions from Eligible Employees. If an Eligible Employee has been a participant in another qualified plan, such Eligible Employee may transfer his or her eligible account balance into the Plan.

(c) Plan Administration

The plan administrator is NBG (the Plan Administrator). The Plan Administrator has delegated its power and authority with respect to the general administration of the Plan to the Administrative Committee under the Plan, which is comprised of certain members of management of the Company. Fidelity Management Trust Company (FMTTC) serves as the record keeper and trustee to the Plan (the Trustee).

(d) Eligible Employees' Contributions - 401(k) Account

The Eligible Employees may begin contributing to the 401(k) component of the Plan immediately upon commencement of employment with the Company. Contributions are made through payroll deductions which, in the employees' discretion, may range from 1% to 100% (subject to IRC limitations) of such employee's compensation (as defined in the Plan) on a before-tax basis, an after-tax basis, or a combination thereof (Salary Reduction Contributions). Participants who are at least age 50 or older during a Plan Year are automatically enrolled to make an additional "catch-up contribution" equal to a specified dollar amount on a before-tax basis, an after-tax basis, or a combination thereof (subject to IRC limitations) unless the Participant stops contributing.

Unless and until otherwise elected by an Eligible Employee, an Eligible Employee hired on or after January 1, 2014 who fails to make an affirmative election with regard to participation in the Plan will be automatically enrolled and deemed to have made an election to make Salary Reduction Contributions equal to three percent (3%) of compensation (the Initial Automatic Enrollment Percentage), which will commence as soon as administratively feasible on or after 45 days following an Eligible Employee's first day of employment as an Eligible Employee. The Initial Automatic Enrollment Percentage is increased by one percent (1%) each January 1 following the date of automatic enrollment to a maximum of six percent (6%) of compensation. Any Salary Reduction Contributions or any Profit Sharing Contributions will be invested in the default investment fund designated by the Investment Committee unless and until such time as the Eligible Employee otherwise makes an investment election in accordance with the Plan's provisions.

(e) Company Contributions

In accordance with the terms of the Plan, an Eligible Employee is eligible for a year-end discretionary Profit Sharing Contribution, if any, provided the following applicable criteria are met.

For Plan Years 2022 and 2021, the Eligible Employee was required to: (i) have completed one Hour of Service, and either (ii) have been employed by the Company on the last day of the applicable Plan Year, or (iii) have died or become disabled during the applicable Plan Year.

An Eligible Employee who meets the applicable eligibility requirements to receive a profit sharing contribution is a "Profit Sharing Participant."

For the 2022 and 2021 Plan Year, the Company made a Profit Sharing Contribution to the Plan of \$52.2 million and \$45.7 million, respectively, which included \$1,990 and \$398 of forfeitures that resulted from a

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Participant's termination of employment, respectively. Each Profit Sharing Participant was credited with a Profit Sharing Contribution based on the applicable formula set forth below:

- All Profit Sharing Participants – 15% of compensation (subject to IRC limitations);

The Profit Sharing Contribution amounts for each Plan Year were credited to the Profit Sharing Participant's profit sharing account under the Plan, regardless of such employee's participation in, or contributions to the 401(k) component of the Plan. Profit Sharing Contributions were immediately fully vested.

(f) Excess Contributions

Excess contributions, if any, represent net amounts in excess of the IRC limitations and in accordance with the provisions of the Plan that were withheld from Eligible Employees' accounts and refunded subsequent to year end. These amounts are recorded as a liability in the Plan's Statements of Net Assets Available for Benefits.

(g) Vesting

Participants who complete one Hour of Service are always fully vested in the 401(k) contributions they make to the Plan and the earnings thereon. Each Participant who is entitled to receive Profit Sharing Contributions, if any, is fully vested in all such contributions, if any, made to the Plan on the Participant's behalf (plus actual earnings thereon).

(h) Member Accounts

A Member's account under the Plan is valued on a daily basis based on quoted or calculated prices. Each account is credited with the Member's respective compensation deferral contributions, net investment earnings (losses), administrative expenses and previously made Profit Sharing Contributions and rollover contributions, if any. The benefit to which a Member is entitled is the benefit that can be provided from the Member's vested account.

(i) In-Service Distribution and Hardship Withdrawals

Participants have the right to receive in-service distributions from the vested portion of their account on or after attainment of age fifty-nine and one-half. A Participant has the right at any time to withdraw any or all after-tax amounts or any or all amounts that were rolled over into the Plan.

A Participant has the right to make hardship withdrawals, as defined in the Plan document, by applying vested assets held in any of his or her Plan accounts to pay for certain medical expenses, purchase of a principal residence, tuition payment for post-secondary education, payments to prevent eviction from a primary residence, burial or funeral expenses and casualty losses to a principal residence.

(j) Benefit Payments

Generally, a Member's account balance under the Plan may be distributed upon termination of employment in one of two ways: lump-sum distribution, or, if the Participant has reached 72 years of age, in periodic installments over the Participant's life expectancy, as elected (subject to limits imposed by the IRC), subject in certain cases to spousal consent. Solely with respect to Participants who transferred amounts to the Plan from the Neuberger Berman, LLC Pension Plan, a Participant may elect to receive his or her

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account balance under the Plan in form of a qualified joint and 50% survivor annuity or joint and 75% survivor annuity.

Participants are required to take minimum distributions by April 1 of the calendar year following the later of:

- The calendar year in which the Participant attains 72 years of age; or
- The calendar year in which the Participant terminates employment from the Company.

Required minimum distributions were suspended for the 2022 Plan Year pursuant to the Coronavirus Aid, Relief, and Economic Security Act (the CARES Act).

Upon death, disability, or termination of employment, a Participant (or the Participant's beneficiary) with \$1,000 or less in vested benefits will receive a lump-sum distribution from the Plan equal to the Participant's vested account balance.

(k) Notes Receivable from Participants

A Participant may borrow from the vested portion of his or her account under the Plan a minimum of \$1,000 up to a maximum amount equal to the lesser of (i) \$50,000 reduced by the Participant's highest outstanding loan balance under the Plan (or any other plan maintained by the Company) during the prior twelve months, or (ii) 50% of the Participant's vested account balance at the time any such loan is made. Loans for the purchase of a principal residence must be repaid in one to ten years, at the Participant's option. Loans for all other purposes must be repaid in one to five years, at the Participant's option. Loans are collateralized by the balance in the Participant's account and bear interest at the prime rate plus 1% at the time of loan origination. In 2022 and 2021, the applicable loan rate was 4.25% to 9.25%. No more than two loans from the Plan to a Participant are permitted at any time. All principal and interest payments made by the Participant are credited back to the Participant's account. As of December 31, 2022 notes receivable from Participants had loan maturity dates ranging from January 2023 to December 2030.

(l) Investment Management Fees and Administrative Expenses

Certain investment management fees are netted with investment income. As discussed in footnote (2) (c), the Company can use forfeitures to pay for administrative expenses or reduce the Company's contributions to the Plan. Administrative expenses not covered by forfeitures are paid by the Company. Participants who take a loan from the Plan incur a one-time fee for establishing the loan. A quarterly loan administration fee is also charged by the Trustee for each outstanding loan. These costs, which are borne by the Participants, are reported on the Statements of Changes in Net Assets Available for Benefits as Loan administrative expenses and totaled \$19,419 and \$91,478 for 2022 and 2021, respectively.

(m) Investment Elections

Each Member may direct his or her account balance into one or more of the investment options offered by the Plan, or into the many other options available through BrokerageLink, a self-directed brokerage account offered through Fidelity Investments; provided, however, that the maximum amount that a Member may invest through BrokerageLink is 100% of his or her account balance. BrokerageLink provides Members access to Fidelity's Funds Network, including in excess of two thousand funds inside and outside the Fidelity Fund Family. Allocations among the Plan investment options and BrokerageLink must be in increments of 1% of each contribution. A Participant may change such allocation and may transfer all or a

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portion of the value of his or her account in increments of 1% among the fund options (and BrokerageLink, up to maximum of 100%) at any time.

(2) Summary of Significant Accounting Policies

(a) Basis of Presentation and Use of Estimates

The accompanying financial statements have been prepared on the accrual basis in conformity with U.S. generally accepted accounting principles (GAAP). 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 at the date of the financial statements. Although these estimates and assumptions are based on the best available information, actual results could differ from those estimates.

(b) Investment Valuation

Investments are reported at fair value and include registered investment companies based on various equity and fixed income strategies, money market funds and exchange traded funds, as well as collective investment trusts. See footnote 4.

(c) Forfeitures

Terminated Participants may forfeit any unvested Profit Sharing Contributions. Forfeiture will occur in the Plan Year that the terminated Participant received a distribution of his or her entire vested account or, in the event no distribution is taken, after five consecutive one-year breaks in service. Such forfeitures are used to pay for Plan expenses or reduce the Company's subsequent contributions to the Plan, as directed by the Plan Administrator. As of December 31, 2022 and 2021, there were \$1,990 and \$398, respectively, of forfeitures available to reduce Plan expenses and/or Company contributions. Participants who did not take a distribution and are reemployed by the Company before five consecutive one-year breaks in service are eligible to have forfeited amounts restored to their accounts. Participants who did receive a distribution upon termination of employment and are reemployed by the Company before five consecutive one-year breaks in service and repay the full distribution before the end of the five-year period that begins on the date they are reemployed are eligible to have forfeited amounts restored to their accounts.

(d) Notes Receivable from Participants

Notes receivable from Participants are reported at their unpaid principal balance plus any accrued but unpaid interest. Delinquent Participant loans are reported as taxable distributions based upon the terms of the Plan document.

(e) Income Recognition

The net appreciation (depreciation) resulting from changes in market value (or fair value) of the investments consists of the net realized gains (losses) from the sale of investments and the unrealized appreciation (depreciation) of the market value for the investments remaining in the Plan. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Purchases and sales of securities are recorded on a trade date basis.

(f) Payment of Benefits

Benefits are recorded when paid.

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(g) Risks and Uncertainties

The Plan provides for various investment options in a combination of different investment instruments (as described in footnote 1(m) above). The Plan's investment options, and other options available through BrokerageLink are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks could materially affect Members' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

(3) Financial Information Certified by Trustee

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

The following information, which is included in the financial statements and supplemental schedule, was provided and certified by the Trustee as complete and accurate and was not subject to auditing procedures by the Plan's independent auditor:

- Investments at fair value (excluding level designation in footnote 4)
- Notes receivable from participants
- Interest and dividend income
- Net appreciation (depreciation) in fair value of investments
- Interest on notes receivable from participants
- Schedule of assets (held at end of year) – December 31, 2022

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(4) Fair Value Measurements

GAAP provides a framework for measuring fair value that prioritizes the inputs to valuation techniques used in connection with determining such valuation. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- Level 1 – Inputs to the valuation methodology are unadjusted quoted prices that the Plan has the ability to access for identical assets or liabilities in active markets.
- Level 2 – Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices which are observable for the specified asset or liability;
 - Inputs derived principally from or corroborated by observable market data by correlation or other means.
- Level 3 – Inputs to the valuation methodology are unobservable, but are significant to the fair value measurement.

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

The following is a description of the valuation methodologies used for assets measured at fair value at December 31, 2022 and 2021.

Money market funds – the money market funds are valued based on published net asset values (“NAV”) and are included in Level 1 of the valuation hierarchy.

Exchange-traded funds and common stock – the exchange-traded funds and common stock are generally valued using unadjusted quoted market prices and are included in Level 1 of the valuation hierarchy.

Registered investment company funds – the Plan utilizes the daily NAV value reported by the registered investment funds. The NAV value is an unadjusted quoted price on an active market and classified within Level 1 of the fair value hierarchy.

Collective investment trusts – the collective investment trusts are valued based on the NAV, calculated daily and reported by each fund and are included in Level 1 of the valuation hierarchy.

The methods described above may produce a fair value calculation that is valid on the date of determination, but might not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate, in accordance with current guidance 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

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Notes to the Financial Statements
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measurement at the reporting date. There were no changes in valuation methodology used as at December 31, 2022 and 2021 and there were no transfers between any levels for the years ended December 31, 2022 and 2021.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2022 and 2021:

December 31, 2022				
	Level 1	Level 2	Level 3	Total
Money market fund	\$ 102,555,389	\$ -	\$ -	\$ 102,555,389
Registered investment company funds	568,120,274	-	-	568,120,274
Collective investment trusts	710,216,969	-	-	710,216,969
	\$ 1,380,892,632	\$ -	\$ -	\$ 1,380,892,632
BrokerageLink:				
Money market fund	\$ 5,245,071	\$ -	\$ -	\$ 5,245,071
Common stock	132,916	-	-	132,916
Exchange traded funds	16,384,360	-	-	16,384,360
Registered investment funds	12,437,466	-	-	12,437,466
Total BrokerageLinks	34,199,813	-	-	34,199,813
Total investments	\$ 1,415,092,445	\$ -	\$ -	\$ 1,415,092,445

December 31, 2021				
	Level 1	Level 2	Level 3	Total
Money market fund	\$ 91,472,043	\$ -	\$ -	\$ 91,472,043
Registered investment company funds	1,057,929,523	-	-	1,057,929,523
Collective investment trusts	468,021,106	-	-	468,021,106
	\$ 1,617,422,672	\$ -	\$ -	\$ 1,617,422,672
BrokerageLink:				
Money market fund	\$ 3,953,036	\$ -	\$ -	\$ 3,953,036
Common stock	2,036,364	-	-	2,036,364
Exchange traded funds	16,434,811	-	-	16,434,811
Registered investment funds	13,918,073	-	-	13,918,073
Total BrokerageLinks	36,342,284	-	-	36,342,284
Total investments	\$ 1,653,764,956	\$ -	\$ -	\$ 1,653,764,956

(5) Related Party Transaction

The Plan provides Participants with the option to invest in certain registered investment companies managed by an affiliate of FMTC, the Trustee of the Plan. The Plan also provides Participants with the option to invest in certain registered investment companies and collective trusts managed by subsidiaries of NBG. The Trustee and NBG are parties in interest as defined in ERISA. Accordingly, the transactions in

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which the Plan engages with the registered investment companies and collective investment trusts managed by affiliates of the Trustee and NBG are deemed party in interest transactions and generally would be prohibited under ERISA; however, due to certain class exemptions granted by the Department of Labor such transactions are deemed exempt.

(6) Tax Status

The initial Plan, which was effective as of January 1, 2010, was established as an individually designed plan and received a favorable determination letter from the IRS in November 2012.

As described in footnote 1, effective as of June 1, 2011, the Plan, was amended and restated pursuant to an Adoption Agreement with respect to the Fidelity Volume Submitter Defined Contribution Plan. The Fidelity Volume Submitter Defined Contribution Plan received an opinion letter from the Internal Revenue Service dated March 31, 2008 (the Opinion Letter) stating that such Plan qualifies under Section 401(a) of the IRC. Although the Volume Submitter Plan was amended to include an additional provisions addendum to the Adoption Agreement to the Fidelity Volume Submitter Defined Contribution Plan, the Company believes that the Plan continued to operate in compliance with the applicable requirements of the IRC and that it could continue to rely on the Opinion Letter through the date of the Plan's subsequent amendments and restatements.

GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2022 and 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(7) Plan Termination

The Plan has no termination date and it is NBG's current intention to continue the Plan indefinitely. However, NBG may terminate, amend, modify or suspend the Plan at any time subject to the applicable provisions of ERISA. In the event of a Plan termination, the rights of all Members to benefits accrued under the Plan as of the date of such termination, to the extent then funded, would be non-forfeitable and the Plan assets would be distributed in accordance with the terms of the Plan.

(8) Subsequent Events

In connection with the preparation of these financial statements, the Plan Administrator evaluated events occurring subsequent to the date of the financial statements through August 2, 2023, the date that the financial statements were available to be issued.

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Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2022

Investments at fair value	Description of investment	Shares/units par value	Current value
Fidelity Investments Money Market Treasury Fund	Money market fund	102,555,389	\$ 102,555,389
BrokerageLink	Money market fund	5,245,071	5,245,071
BrokerageLink	Common stock	4,106	132,916
BrokerageLink	Exchange-traded funds	661,963	16,384,360
BrokerageLink	Registered investment company funds	803,444	12,437,466
			<u>\$ 34,199,813</u>
BlackRock LifePath Retirement Fund	Collective investment trust	1,894,247	31,101,650
BlackRock LifePath 2025 Fund	Collective investment trust	1,547,158	29,616,817
BlackRock LifePath 2030 Fund	Collective investment trust	1,572,609	32,529,527
BlackRock LifePath 2035 Fund	Collective investment trust	2,086,316	46,349,568
BlackRock LifePath 2040 Fund	Collective investment trust	1,390,993	32,819,440
BlackRock LifePath 2045 Fund	Collective investment trust	1,096,635	27,172,768
BlackRock LifePath 2050 Fund	Collective investment trust	939,148	24,006,220
BlackRock LifePath 2055 Fund	Collective investment trust	681,948	17,758,544
BlackRock LifePath 2060 Fund	Collective investment trust	540,551	9,224,819
BlackRock LifePath 2065 Fund	Collective investment trust	283,603	3,322,151
BlackRock MSCI SCWI IMI Fund	Collective investment trust	29,238	28,640
* Neuberger Berman Strategic Income Fund	Collective investment trust	350,932	3,930,440
Boston Trust Small Cap Fund	Collective investment trust	1,606,114	19,369,738
* Neuberger Berman Sustainable Equity Fund	Collective investment trust	1,213,540	17,936,126
WT CIF II Growth	Collective investment trust	2,944,831	58,219,315
William Blair Emerging Markets Leaders Fund III	Collective investment trust	1,252,463	16,780,999
Vanguard 500 Index Fund	Collective investment trust	3,056,944	297,134,972
MFS Large Cap Value Fund	Collective investment trust	1,094,497	42,915,235
			<u>\$ 710,216,969</u>
* Neuberger Berman Large Cap Value Fund	Registered investment company funds	3,686,441	158,775,013
* Neuberger Berman Absolute Return Multi-Manager Fund	Registered investment company funds	204,734	2,333,970
* Neuberger Berman Real Estate Fund	Registered investment company funds	1,305,849	16,244,756
* Neuberger Berman Equity Income Fund	Registered investment company funds	2,538,006	32,816,422
* Neuberger Berman International Equity Fund	Registered investment company funds	2,610,493	29,185,306
Vanguard Total International Stock Index Fund	Registered investment company funds	159,158	17,733,389
Vanguard International Bond Index Fund	Registered investment company funds	3,613	68,424
* Neuberger Berman Multi Cap Opportunities Fund	Registered investment company funds	7,935,240	71,893,272
MetWest Total Return Bond Fund	Registered investment company funds	1,963,687	16,652,064
* Neuberger Berman Genesis Fund	Registered investment company funds	2,383,108	129,593,421
American Funds Capital World Fund	Registered investment company funds	409,302	21,103,594
PIMCO Foreign Bond (unhedged) Fund	Registered investment company funds	171,246	1,292,908
Blackstone Alternative Multi-Strategy Fund	Registered investment company funds	64,947	656,615
* Neuberger Berman High Income Bond Fund	Registered investment company funds	2,084,207	15,173,029
* Fidelity Spartan Extended Market Index Fund	Registered investment company funds	638,715	40,251,789
* Fidelity Spartan US Bond Index Fund	Registered investment company funds	1,409,263	14,346,302
			<u>\$ 568,120,274</u>
			<u>\$ 1,415,092,445</u>
	255 notes receivable from participants with interest rates ranging from 4.25% to 9.25% and maturity dates ranging from January 2023 to December 2030		
* Notes receivables from participants			<u>\$ 4,543,334</u>
			<u>\$ 1,419,635,779</u>

The information on this schedule was prepared from information provided and certified as complete and accurate by Fidelity Management Trust Company.

* Party in interest as defined by ERISA
See accompanying independent auditors' report.