

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 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 02/01/2023 and ending 01/31/2024	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____ ☐ 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 EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP
1b	Three-digit plan number (PN) ▶ 022
1c	Effective date of plan 02/01/1988
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) WINSTON & STRAWN LLP 35 W. WACKER DRIVE CHICAGO, IL 60601
2b	Employer Identification Number (EIN) 36-1975990
2c	Plan Sponsor's telephone number 312-558-5600
2d	Business code (see instructions) 541110

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.	11/15/2024	DAVID ROGERS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor WINSTON & STRAWN LLP RETIREMENT PLANS COMMITTEE 35 W. WACKER DRIVE CHICAGO, IL 60601	3b Administrator's EIN 37-1765906 3c Administrator's telephone number 312-558-5600
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 2726
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 1605 6a(2) 1629 6b 34 6c 1344 6d 3007 6e 5 6f 3012 6g(1) 2408 6g(2) 2848 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:

2F 3B 2G 2J 2T 2R

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 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
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 02/01/2023 and ending 01/31/2024

A Name of plan EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP	B Three-digit plan number (PN) ▶ 022
C Plan sponsor's name as shown on line 2a of Form 5500 WINSTON & STRAWN LLP	D Employer Identification Number (EIN) 36-1975990

Part I

Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	66525	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DELOITTE & TOUCHE, LLP

13-3891517

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	ACCOUNTANT/AUDITOR	20963	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MERRILL LYNCH

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	19019	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 02/01/2023 and ending 01/31/2024

A Name of plan EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP	B Three-digit plan number (PN) ▶ 022
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 WINSTON & STRAWN LLP	D Employer Identification Number (EIN) 36-1975990

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: WINSTON & STRAWN LLP RET PLN M		
b Name of sponsor of entity listed in (a): WINSTON & STRAWN LLP		
c EIN-PN 04-3603790-001	d Entity code M	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: MIP II CL 1		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-025	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 33756534
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2025		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083980-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49285718
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2035		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083976-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49402850
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2065		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 82-6194314-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1155641
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2045		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083972-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38505837
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2040		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083974-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50234769

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2055

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

c EIN-PN 27-6715091-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19483238
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2020

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

c EIN-PN 90-6083982-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 25119407
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET INC

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

c EIN-PN 90-6083967-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15295505
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2050

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

c EIN-PN 90-6083970-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34191465
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2060

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

c EIN-PN 45-3799419-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8369760
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a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2030

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

c EIN-PN 90-6083978-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50395579
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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, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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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
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 02/01/2023 and ending 01/31/2024		
A Name of plan EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP	B Three-digit plan number (PN) ▶	022
C Plan sponsor's name as shown on line 2a of Form 5500 WINSTON & STRAWN LLP		
		D Employer Identification Number (EIN) 36-1975990

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	21524
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	25889410
(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)	0	37550923
(2) U.S. Government securities	1c(2)	0	974937
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	140228
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	1157896
(B) Common	1c(4)(B)	0	24974679
(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)	1384198	3538882
(9) Value of interest in common/collective trusts	1c(9)	0	375196303
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	499795474	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)	0	619631380
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	15990

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	501179672	1089092152
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	58
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	58
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	501179672	1089092094

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	0	
(B) Participants	2a(1)(B)	24594181	
(C) Others (including rollovers)	2a(1)(C)	10853021	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		35447202
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(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)	94655	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		94655
(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)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(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)	0	
(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)		0
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		73444557
(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)		0
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		108986414

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	27310317	
(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)		27310317
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Recordkeeping fees.....	2i(3)	-233144	
(4) IQPA audit fees.....	2i(4)	20963	
(5) Investment advisory and investment management fees	2i(5)	85544	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		-126637
j Total expenses. Add all expense amounts in column (b) and enter total	2j		27183680

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		81802734
l Transfers of assets:			
(1) To this plan	2l(1)		506109688
(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: **DELOITTE & TOUCHE, LLP**

(2) EIN: **13-3891517**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		20000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
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.		☒	

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 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 02/01/2023 and ending 01/31/2024		
A Name of plan	B Three-digit plan number (PN)	
EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP	022	
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
WINSTON & STRAWN LLP	36-1975990	

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.....
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

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)..... b Enter the amount contributed by the employer to the plan for this plan year..... 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)
7	Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A
8	If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A

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

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No
11	a Does the ESOP hold any preferred stock? ☐ Yes ☐ No b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for: a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment) 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) 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)	14a 14b 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 b The corresponding number for the second preceding plan year	15a 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 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	16a 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) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20. a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation. _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☐ Design-based safe harbor method ☐ "Prior year" ADP test ☒ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.	

Employee Savings Plan of Winston & Strawn LLP

Employer Identification Number: 36 1975990
Plan Number: 022

Financial Statements as of January 31, 2024 and
2023, and for the Year Ended January 31, 2024,
Supplemental Schedule as of January 31, 2024, and
Independent Auditor's Report

EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP

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NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

INDEPENDENT AUDITOR'S REPORT

To the Administrator of the
Employee Savings Plan of Winston & Strawn LLP

Opinion

We have audited the financial statements of the Employee Savings Plan of Winston & Strawn LLP (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of January 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended January 31, 2024, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of January 31, 2024 and 2023, and the changes in its net assets available for benefits for the year ended January 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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.

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of January 31, 2024 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 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 has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, 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 information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Deloitte + Touche LLP

November 15, 2024

EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF JANUARY 31, 2024 AND 2023

	2024	2023
ASSETS:		
Plan interest in the Winston & Strawn Retirement Plans Master Trust ("Master Trust")—at fair value	\$ -	\$ 499,795,474
Participant-directed investments	1,059,663,802	-
Notes receivable from participants	3,538,882	1,384,198
Contributions receivable from Partnership	<u>25,889,410</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$1,089,092,094</u>	<u>\$ 501,179,672</u>

EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED JANUARY 31, 2024

ADDITIONS:

Contributions:

Participants	\$ 24,594,181
Rollover	<u>10,853,021</u>

Total contributions 35,447,202

Net investment income from the Master Trust 73,539,212

Total additions 108,986,414

DEDUCTIONS:

Benefits paid to participants

(27,310,317)

Transaction fees

126,637

Total deductions (27,183,680)

INCREASE IN NET ASSETS BEFORE PLAN TRANSFERS 81,802,734

TRANSFERS IN TO PLAN:

Transfer from a plan merger—Scheper, Kim, & Harris LLP 401(k) Plan

11,653,868

Transfer from a plan merger—Winston & Strawn LLP Retirement Plan

494,455,820

Net transfers to Employee Savings Plan of Winston & Strawn LLP 506,109,688

INCREASE IN NET ASSETS 587,912,422

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year

501,179,672

End of year

\$1,089,092,094

See notes to financial statements.

EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP

NOTES TO FINANCIAL STATEMENTS

AS OF JANUARY 31, 2024 AND 2023, AND FOR THE YEAR ENDED JANUARY 31, 2024

1. DESCRIPTION OF THE PLAN

The Employee Savings Plan of Winston & Strawn LLP (the “Plan”) was established effective February 1, 1988, and is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”). The following description of the Plan provides only general information. Participants should refer to the Plan document for more specific information.

Effective May 1, 2023, the Scheper, Kim, & Harris LLP 401(k) Plan (“SKH Plan”) was merged into the Plan. SKH Plan’s net assets available for benefits totaling \$11,653,868 were transferred to the Plan.

Effective January 31, 2024, the Winston & Strawn LLP Retirement Plan (“Retirement Plan”) was merged into the Plan. The Retirement Plan’s net assets available for benefits totaling \$494,455,820 were transferred to the Plan. The transferred net assets include partnership contributions receivable owed by the Retirement Plan, on behalf of the Retirement Plan’s participants as of January 31, 2024 totaling \$25,889,410.

General—The Plan sponsor is Winston & Strawn LLP, a Delaware limited liability partnership (the “Partnership”). The Winston & Strawn LLP Retirement Plans Committee is the Plan administrator and consists of partners of the Partnership who are appointed by the Executive Committee of the Partnership. Fidelity Management Trust Company (“Fidelity” or “Trustee”) is the custodian and trustee of the Plan’s assets and is the recordkeeper. A “Plan Year” covers the 12-month period commencing on February 1 and ending on the following January 31.

Eligibility and Vesting—All partners, associate attorneys, of counsel, and administrative staff members of the Partnership are eligible to participate in the Plan upon their date of hire. Participants are 100% vested immediately in all contributions upon entry into the Plan.

Participant Contributions—Participants may contribute up to 75% of their compensation, as defined in the Plan, during the Plan Year, subject to certain Internal Revenue Code (“IRC”) limitations, and may change their contribution rate effective as of any payroll period. Participants may characterize their contributions as pre-tax, Roth (after-tax) or a combination of both.

Partnership Contributions—Effective January 31, 2024, partners and administrative staff members of the Partnership who are U.S. citizens and certain partners in the Paris office are eligible to receive profit sharing contributions funded by the Partnership. The Partnership makes a contribution each Plan Year, out of its net income, on behalf of each eligible participant who is employed on January 31 of that year.

Rollover Contributions—Rollover contributions to the Plan may be in the form of a direct transfer from a qualified retirement plan or conduit individual retirement account (IRA). Additionally, a participant may receive a distribution check from a qualified retirement plan or conduit IRA, and deposit it in the Plan within 60 days of the distribution date.

A partner or employee who makes only a rollover contribution to the Plan will become a Plan participant with respect to the rollover contribution only.

Participant Accounts—An individual account is maintained for each participant of the Plan. Participants direct the investment of all contributions into various options offered by the Plan and in the self-directed brokerage account option.

Participants may transact on a daily basis within an option.

Participant accounts are credited with the contributions, transfers, and withdrawals made and reflect allocations of investment gains or losses and expenses through changes in the value of the investments in their account. Dividends and capital gain distributions earned on investments are automatically reinvested. The benefit to which each participant is entitled is the value of the benefit that can be provided from that participant's account.

Notes Receivable from Participants—A participant may apply for a loan for any purpose other than the purchase of publicly traded securities. Loan terms range from one to five years. As of January 31, 2024, participant loans have maturities through 2029 at interest rates ranging from 4.25% to 9.5% and as of January 31, 2023, participant loans have maturities through 2027 at interest rates ranging from 4.25% to 8.5%. The loans are secured by the balances in the participants' accounts. Other details of the Plan's loan provision include the following:

- a. There is a limit of one new loan each Plan Year.
- b. The minimum amount of a loan is \$1,000.
- c. The amount of the loan at origination date, when added to the participant's then-outstanding loan balance(s) under the Plan, may not exceed 50% of the value of the participant's Plan account balance.
- d. The amount of the loan at origination date, when added to the participant's then-outstanding loan balance(s) under the Plan and the Retirement Plan, if applicable, may not exceed \$50,000, reduced by the highest outstanding balance of the participant's combined loans from the Plan and the Retirement Plan during the one-year period ending on the day before which such loan is to be made.
- e. For each loan, a participant's account is charged a loan origination fee of \$35, plus a quarterly maintenance fee of \$3.75.
- f. The interest rate charged for a loan originated within the Plan is equal to the current prime rate, plus one percentage point, as determined at the time the loan is made. Principal and interest are paid ratably through payroll deductions.

Payment of Benefits—Under the terms of the Plan, a participant may withdraw all or a portion of his or her account balance upon retirement or other separation from service. A participant may elect to receive the withdrawal in partial payments, as a lump-sum payment, or as a direct transfer to an eligible retirement plan or IRA. A participant who has reached 59 1/2 may withdraw all or any part of his or her account balance prior to retirement.

2. SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting—The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Use of Estimates—The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities,

and changes therein, and the disclosures of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties—The Plan utilizes various investment instruments through the Winston & Strawn LLP Retirement Plans Master Trust (the “Master Trust”). Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the participant account balances and the amounts reported in the financial statements.

Investment Valuation and Income Recognition—The Plan’s investments and interest in the Master Trust are stated at fair value. Fair value of the underlying financial instruments is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net investment income from interest in the Master Trust includes the Master Trust’s gains and losses on investments bought and sold, as well as held during the year.

Management fees and operating expenses charged to the Master Trust for investments are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction in investment return for such investments.

Notes Receivable from Participants—Notes receivable from participants are measured at their unpaid principal balance, plus any accrued but unpaid interest. Delinquent participant loans are recorded as distributions based on the terms of the Plan document.

Administrative Revenue (Expenses)—The Partnership pays all administrative expenses related to the Plan. Transaction fees charged by Fidelity for benefit distributions and loans are deducted from participants’ accounts. Transaction fees related to assets held in the self-directed brokerage or participant accounts are reflected as a reduction of return of those assets. The Plan has a revenue-sharing agreement whereby certain investment managers return a portion of the investment fees to the recordkeeper to offset the Plan’s administrative expenses. Future Plan expenses can be paid from any excess remaining revenue sharing amounts.

Payment of Benefits—Benefit payments to participants are recorded upon distribution. There are no amounts allocated to accounts of persons who had elected to withdraw from the Plan but had not yet been paid as of January 31, 2024 and 2023.

Excess Contributions Payable—The Plan is required to return any contributions received during the Plan Year in excess of the IRC limits. There are no excess contributions in the Plan as of January 31, 2024 and 2023.

Contributions—Participant contributions are recorded when withheld. Partnership contributions are recorded when earned.

3. INTEREST IN MASTER TRUST

The Plan’s investment assets were held in the Master Trust that was established for the investment assets of the Plan and the Retirement Plan. Due to the merger transaction, effective January 31, 2024,

the Plan no longer invests in the Master Trust. Prior to January 31, 2024, each participating plan, the Plan and Retirement Plan, had a divided interest in the Master Trust based upon the underlying participant account balances in each plan. The assets of the Master Trust are held by the Trustee. Use of the Master Trust permitted the commingling of trust assets with the assets of the Plan and the Retirement Plan for investment and administrative purposes. Although assets of both plans were commingled in the Master Trust, the Trustee maintained supporting records for the purpose of allocating the net gain or loss of the investment account to the participating plans. The assets were allocated among the participating plans by assigning to each plan specifically identifiable transactions, including participant-directed transactions, and allocating among the plans the net investment income of the Master Trust reported in the Statement of Changes in Net assets Available for Benefits as noted, as appropriate to each participant account balance as included in each respective plan. The value of the Plan's interest in the Master Trust is based on the beginning of year value of the Plan's interest in the Master Trust, plus actual contributions, allocated investment loss, less actual distributions and allocated administrative expenses.

The net assets of the Master Trust and the Plan's interest in the Master Trust Balances as of January 31, 2023 is summarized as follows:

	2023	
	Plan	Trust
Investments at fair value:		
Mutual funds	\$316,508,443	\$540,752,242
Fidelity BrokerageLink account	12,262,852	46,501,894
Common collective trust funds	<u>171,024,179</u>	<u>330,051,328</u>
Total investments	<u>499,795,474</u>	<u>917,305,464</u>
Net assets of Master Trust	<u>\$499,795,474</u>	<u>\$917,305,464</u>

The net investment income of the Master Trust for the year ended January 31, 2024, is summarized as follows:

Net appreciation in fair value of investments	\$ 104,626,120
Interest and dividends	<u>23,474,501</u>
Net investment income of the Master Trust	<u>\$ 128,100,621</u>

4. FAIR VALUE MEASUREMENTS

FASB Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, establishes a single authoritative definition of fair value, sets a framework for measuring fair value, and requires disclosures about fair value measurements. In accordance with ASC 820, the Plan classifies its investments into a fair value hierarchy that prioritizes inputs to valuation techniques used to measure fair value, as follows: Level 1 refers to securities valued using unadjusted quoted prices from active markets for identical assets; Level 2 refers to securities not traded on an active market, but for which observable market inputs are readily available; and Level 3 refers to securities valued based on significant unobservable inputs. Assets and liabilities are classified in their entirety based on the lowest

level of input that is significant to the fair value measurement. The Master Trust or the Plan had no Level 3 investments as of January 31, 2023.

Mutual Funds—Shares of mutual funds are valued at quoted market prices that represent the net asset value (“NAV”) of shares held at plan year-end. The mutual funds held by the Plan are deemed to be actively traded.

Self-Directed Brokerage Account—Investments entered into through Fidelity BrokerageLink (self-directed brokerage account) are primarily stated at quoted market prices reported in the active market in which the individual security is traded or valued using pricing models maximizing the use of observable inputs for similar securities. Participants have the option to invest in a variety of individual common and preferred stocks, mutual funds, U.S. government securities, corporate debt, and interest-bearing cash.

Common Collective Trust Funds—

Collective Trust Funds—The collective trust fund is valued at the net asset value of units of a bank collective trust. The net asset value as provided by the trustee is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported net asset value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to confirm that securities liquidations will be carried out in an orderly business manner.

Stable Value Fund—The stable value fund (“SV Fund”) is composed primarily of fully benefit-responsive investment contracts that are valued at the net asset value of units of the bank collective trust. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require 12 months’ notification in order to confirm that securities liquidations will be carried out in an orderly business manner.

A summary of the Plan's, Master Trust's and Plan's interest in Master Trust's investments measured at fair value on a recurring basis, as of January 31, 2024 and 2023, set forth by level within the fair value hierarchy, is as follows:

	Plan Asset Value at January 31, 2024			Total
	Level 1	Level 2	Level 3	
Mutual funds	\$628,775,901	\$ -	\$ -	\$ 628,775,901
Fidelity BrokerageLink account	<u>54,560,444</u>	<u>1,131,154</u>	<u>-</u>	<u>55,691,598</u>
Common collective trust funds—common collective trust ^(a)				341,439,769
Common collective trust funds—stable value fund ^(a)				33,756,534
Total investments at fair value	<u>\$683,336,345</u>	<u>1,131,154</u>	<u>\$ -</u>	<u>1,059,663,802</u>
Total investments				<u>\$1,059,663,802</u>

	Master Trust Asset Value at January 31, 2023			Total	Employee Savings Plan Balance as of 1/31/2023
	Level 1	Level 2	Level 3		
Mutual funds	\$540,752,242	\$ -	\$ -	\$540,752,242	\$316,508,443
Fidelity BrokerageLink account	<u>45,580,408</u>	<u>921,486</u>	<u>-</u>	<u>46,501,894</u>	<u>12,262,852</u>
Common collective trust funds—common collective trust ^(a)				293,348,929	151,967,437
Common collective trust funds—stable value fund ^(a)				36,702,399	19,056,742
Total investments at fair value	<u>\$586,332,650</u>	<u>\$921,486</u>	<u>\$ -</u>	<u>917,305,464</u>	<u>499,795,474</u>
Total investments				<u>\$917,305,464</u>	<u>\$499,795,474</u>

(a) In accordance with Subtopic ASC 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits. Refer to Note 5 for further information. These investments are priced daily and there are no unfunded commitments or redemption restrictions associated with the funds.

Transfers Between Levels—The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, transfers are reported at the beginning of the reporting period.

The significance of transfers between levels is evaluated based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended, January 31, 2024 and 2023, there were no transfers between levels.

5. SV FUND

The SV Fund is a collective trust fund sponsored by Fidelity. The beneficial interest of each participant is represented by units. Units are issued and redeemed daily at the SV Fund's constant NAV of \$1 per unit. Distribution to the SV Fund's unit holders is declared daily from the net investment income and automatically reinvested in the SV Fund on a monthly basis, when paid. It is the policy of the SV Fund to use its best efforts to maintain a stable NAV of \$1 per unit, although there is no guarantee that the SV Fund will be able to maintain this value.

6. RELATED PARTY TRANSACTIONS AND EXEMPT PARTY-IN-INTEREST TRANSACTIONS

As Fidelity is a service provider of the Plan, transactions in the investments managed by Fidelity affiliates qualify as exempt party-in-interest transactions. In addition, the Plan document provides for secured participant loans, which also qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services are included as a reduction of the return on each investment. Administrative revenues arise when investment managers return a portion of the investment fees to the trustee to offset the administrative expenses. Any excess resulting from this revenue sharing remains in an unallocated account from which future Plan expenses can be paid.

7. PLAN TERMINATION

Although it has not expressed any intent to do so, the Partnership has the right, as stated in the Plan document, to terminate the Plan at any time, subject to the provisions of ERISA.

8. FEDERAL INCOME TAX STATUS

The Plan obtained its latest determination letter dated September 29, 2017, in which the Internal Revenue Service ("IRS") stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the IRC. In December 2016, the IRS began publishing a Required Amendments List for individually designed plans which specifies changes in qualification requirements. The list is published annually and requires plans to be amended for each item on the list, as applicable, to retain its tax-exempt status. The Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax exempt. Therefore, no provision for income taxes has been included in these financial statements.

9. SUBSEQUENT EVENTS

Management has evaluated subsequent events through November 15, 2024, the date the financial statements were available to be issued, and concluded that no subsequent events have occurred that would require recognition or additional disclosure.

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SUPPLEMENTAL SCHEDULE

EMPLOYEE SAVINGS PLAN OF WINSTON & STRAWN LLP**Employer Identification Number: 36-1975990****Plan Number: 022****FORM 5500, SCHEDULE H, PART IV, LINE 4i—SCHEDULE OF ASSETS****(HELD AT END OF YEAR)****AS OF JANUARY 31, 2024**

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment	*Cost	Current Value
** FID GOVT MMKT	INTEREST BEARING CASH		25,902,142
MIP II CL 1	COMMON/COLLECTIVE TRUST		33,756,534
** FID EQUITY INCOME K	MUTUAL FUNDS		18,716,459
** FID GROWTH CO K	MUTUAL FUNDS		174,391,429
** FID 500 INDEX	MUTUAL FUNDS		120,948,758
** FID INTL INDEX	MUTUAL FUNDS		17,702,559
** FID EXT D MKT IDX	MUTUAL FUNDS		22,533,187
** BROKERAGELINK	VARIOUS COMMON AND PREFERRED STOCKS, MUTUAL FUNDS, GOVERNMENT SECURITIES AND CORPORATE DEBT		55,691,598
VANGUARD TARGET INC	COMMON/COLLECTIVE TRUST		15,295,505
VANGUARD TARGET 2020	COMMON/COLLECTIVE TRUST		25,119,407
VANGUARD TARGET 2025	COMMON/COLLECTIVE TRUST		49,285,718
VANGUARD TARGET 2030	COMMON/COLLECTIVE TRUST		50,395,579
VANGUARD TARGET 2035	COMMON/COLLECTIVE TRUST		49,402,850
VANGUARD TARGET 2040	COMMON/COLLECTIVE TRUST		50,234,769
VANGUARD TARGET 2045	COMMON/COLLECTIVE TRUST		38,505,837
VANGUARD TARGET 2050	COMMON/COLLECTIVE TRUST		34,191,465
VANGUARD TARGET 2055	COMMON/COLLECTIVE TRUST		19,483,238
VANGUARD TARGET 2060	COMMON/COLLECTIVE TRUST		8,369,760
VANGUARD TARGET 2065	COMMON/COLLECTIVE TRUST		1,155,641
JH DSCPL VAL MDCP A	MUTUAL FUNDS		16,111,243
VANG FTSE SOC IDX IS	MUTUAL FUNDS		8,733,007
DODGE & COX STOCK I	MUTUAL FUNDS		55,210,351
VANG TOT BD MKT INST	MUTUAL FUNDS		14,204,325
VANG WELLINGTON ADM	MUTUAL FUNDS		38,889,981
DODGE & COX INTL STK I	MUTUAL FUNDS		25,993,307
CRM MID CAP VAL INST	MUTUAL FUNDS		17,154,264
C&S INST REALTY SHS	MUTUAL FUNDS		5,701,982
VANG INFL PROT INST	MUTUAL FUNDS		8,181,799
PGIM TOTAL RTN BD R6	MUTUAL FUNDS		23,375,036
J H SMALL CAP VAL I	MUTUAL FUNDS		21,927,500
J H VENTURE I	MUTUAL FUNDS		13,098,572
** Notes receivable from participants	PARTICIPANT LOANS AT INTEREST RATES OF 4.25% to 9.50%		3,538,882
			1,063,202,684

*Cost information is not required for participant-directed investments and, therefore, is not included.

**Party-in-interest.

See accompanying Independent Auditor's Report

Employee Savings Plan of Winston & Strawn LLP
Winston & Strawn LLP
EIN: 36-1975990 PN: 022
Schedule H, line 4i – Schedule of Assets (Held At End of Year)
1/31/2024

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current value
	FID GOVT MMKT	INTEREST BEARING CASH	25,902,141
	MIP II CL 1	COMMON/COLLECTIVE TRUST	33,756,534
	FID EQUITY INCOME K	REGISTERED INVESTMENT COMPANY	18,716,459
	FID GROWTH CO K	REGISTERED INVESTMENT COMPANY	174,391,429
	FID 500 INDEX	REGISTERED INVESTMENT COMPANY	120,948,758
	FID INTL INDEX	REGISTERED INVESTMENT COMPANY	17,702,559
	FID EXTD MKT IDX	REGISTERED INVESTMENT COMPANY	22,533,187
	BROKERAGELINK	Includes COMMON STOCK, UNIT, CASH, EXTERNAL FUND, FIDELITY FUND,PREFERRED STOCK, CERT. OF DEP., GOVERNMENT BOND, CORPORATE,BOND, NON INTEREST BEARING CASH, RIGHTS/WARRANTS, OTHER LIABILITIES, OPTION	55,691,598
	VANGUARD TARGET INC	COMMON/COLLECTIVE TRUST	15,295,505
	VANGUARD TARGET 2020	COMMON/COLLECTIVE TRUST	25,119,407
	VANGUARD TARGET 2025	COMMON/COLLECTIVE TRUST	49,285,718
	VANGUARD TARGET 2030	COMMON/COLLECTIVE TRUST	50,395,578
	VANGUARD TARGET 2035	COMMON/COLLECTIVE TRUST	49,402,850
	VANGUARD TARGET 2040	COMMON/COLLECTIVE TRUST	50,234,768
	VANGUARD TARGET 2045	COMMON/COLLECTIVE TRUST	38,505,837
	VANGUARD TARGET 2050	COMMON/COLLECTIVE TRUST	34,191,465
	VANGUARD TARGET 2055	COMMON/COLLECTIVE TRUST	19,483,238
	VANGUARD TARGET 2060	COMMON/COLLECTIVE TRUST	8,369,760
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	JH DSCPL VAL MDCP A	REGISTERED INVESTMENT COMPANY	16,111,243
	VANG FTSE SOC IDX IS	REGISTERED INVESTMENT COMPANY	8,733,007
	DODGE & COX STOCK I	REGISTERED INVESTMENT COMPANY	55,210,351
	VANG TOT BD MKT INST	REGISTERED INVESTMENT COMPANY	14,204,325
	VANG WELLINGTON ADM	REGISTERED INVESTMENT COMPANY	38,889,981
	DODGE&COX INTL STK I	REGISTERED INVESTMENT COMPANY	25,993,307
	CRM MID CAP VAL INST	REGISTERED INVESTMENT COMPANY	17,154,264
	C&S INST REALTY SHS	REGISTERED INVESTMENT COMPANY	5,701,982
	VANG INFL PROT INST	REGISTERED INVESTMENT COMPANY	8,181,799
	PGIM TOTAL RTN BD R6	REGISTERED INVESTMENT COMPANY	23,375,036
	J H SMALL CAP VAL I	REGISTERED INVESTMENT COMPANY	21,927,500
	J H VENTURE I	REGISTERED INVESTMENT COMPANY	13,098,572
	Participant Loans	Participant Loans	3,538,882
		Total	1,063,202,684