

<p>Form 5500</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p>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).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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) M

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

<p>1a Name of plan <u>PILLSBURY WINTHROP SHAW PITTMAN LLP CASH BALANCE PLANS NO. 1 & NO. 2 MASTER TRUST</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>006</u></p>
<p>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) <u>PILLSBURY WINTHROP SHAW PITTMAN LLP</u></p> <p><u>FOUR EMBARCADERO CENTER, 22ND FLOOR</u> <u>SAN FRANCISCO, CA 94111</u></p>	<p>1c Effective date of plan</p> <hr/> <p>2b Employer Identification Number (EIN) <u>94-1311126</u></p> <p>2c Plan Sponsor's telephone number <u>415-983-1000</u></p> <p>2d Business code (see instructions)</p>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	QUINN BARACO
	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 <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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
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.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
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:

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) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> 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) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u> 0 </u> (4) <input type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan PILLSBURY WINTHROP SHAW PITTMAN LLP CASH BALANCE PLANS NO. 1 & NO. 2 MASTER TRUST	B Three-digit plan number (PN)	▶ <u>006</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 PILLSBURY WINTHROP SHAW PITTMAN LLP	D Employer Identification Number (EIN) <u>94-1311126</u>	

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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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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	PWSP LLP CASH BALANCE PLAN NO. 1	
b Name of plan sponsor	PILLSBURY WINTHROP SHAW PITTMAN LLP	c EIN-PN 94-1311126-003

a Plan name	PWSP LLP CASH BALANCE PLAN NO. 2	
b Name of plan sponsor	PILLSBURY WINTHROP SHAW PITTMAN LLP	c EIN-PN 94-1311126-004

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan PILLSBURY WINTHROP SHAW PITTMAN LLP CASH BALANCE PLANS NO. 1 & NO. 2 MASTER TRUST	B Three-digit plan number (PN) ► 006
C Plan sponsor's name as shown on line 2a of Form 5500 PILLSBURY WINTHROP SHAW PITTMAN LLP	D Employer Identification Number (EIN) 94-1311126

Part I	Asset and Liability Statement
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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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	-1042034	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	357204	438075
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	22957053	27078507
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	25591031	24953814
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	9773821	8757037
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	1429814	1363582

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	59066889	62591015
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	59066889	62591015

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)	981843	
(C) Corporate debt instruments.....	2b(1)(C)	1040610	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	23130	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2045583
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	255981	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		255981
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	46927850	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	47044931	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	300154	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	9
c Other income	2c	217128
d Total income. Add all income amounts in column (b) and enter total	2d	2701774

Expenses

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

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	2701774
l Transfers of assets:		
(1) To this plan	2l(1)	16095811
(2) From this plan	2l(2)	15273459

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name:

(2) EIN:

d The opinion of an independent qualified public accountant is **not attached** 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.)		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.)		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.)		X	
e Was this plan covered by a fidelity bond?			
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.)	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.)	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?			
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 _____.

00026004
 04- -12-D -66C-015-04
 1250 -99-02868-04



PILLSBURY WINTHROP SHAW-CONSOLIDATED
 ACCOUNT 6746013099

FORM 5500 - REPORTABLE TRANSACTION SCHEDULE

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
BEGINNING MARKET VALUE							
59,066,889.58							
COMPARATIVE VALUE (5%)							
2,953,344.47							
CATEGORY 1 - SINGLE TRANSACTION EXCEEDS 5% OF VALUE							
Issue: PILLSBURY - Galliard Portfolio							
04/30/2024	S	- 4,500,000.000	1.0000		4,500,000 *	4,500,000	
6746013002							
10/07/2024	B	3,000,000.000	1.0000		- 3,000,000 *	3,000,000	
6746013001							
10/07/2024	B	5,000,000.000	1.0000		- 5,000,000 *	5,000,000	
6746013002							
Issue: 31846V203 - First Am Govt Ob Fd Cl Y							
04/25/2024	B	4,500,000.000	1.0000		- 4,500,000 *	4,500,000	
6746013002							
04/26/2024	B	13,003,251.000	1.0000		- 13,003,251 *	13,003,251	
6746013000							
04/26/2024	S	- 5,117,171.000	1.0000		5,117,171 *	5,117,171	
6746013001							
04/26/2024	S	- 8,301,694.000	1.0000		8,301,694 *	8,301,694	
6746013002							
04/29/2024	S	- 13,003,251.000	1.0000		13,003,251 *	13,003,251	
6746013000							
06/04/2024	B	4,500,000.000	1.0000		- 4,500,000 *	4,500,000	
6746013001							
06/05/2024	S	- 4,500,000.000	1.0000		4,500,000 *	4,500,000	
6746013001							

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
08/30/2024	B	8,497,726.180	1.0000		- 8,497,726 *	8,497,726	
6746013000							
10/04/2024	S	- 8,497,726.180	1.0000		8,497,726 *	8,497,726	
6746013000							
10/04/2024	B	3,372,113.120	1.0000		- 3,372,113 *	3,372,113	
6746013001							
10/04/2024	B	5,125,613.060	1.0000		- 5,125,613 *	5,125,613	
6746013002							
10/07/2024	S	- 3,000,000.000	1.0000		3,000,000 *	3,000,000	
6746013001							
10/07/2024	S	- 5,000,000.000	1.0000		5,000,000 *	5,000,000	
6746013002							
12/27/2024	B	2,993,928.550	1.0000		- 2,993,929 *	2,993,929	
6746013001							
12/27/2024	B	4,546,428.600	1.0000		- 4,546,429 *	4,546,429	
6746013002							
GRAND TOTAL					0	106,458,903	106,458,903

CATEGORY 2 - SERIES OF TRANSACTIONS WITH SAME BROKER EXCEEDS 5% OF VALUE

NO TRANSACTIONS QUALIFIED FOR THIS SECTION

CATEGORY 3 - SERIES OF TRANSACTIONS IN SAME SECURITY EXCEEDS 5% OF VALUE

Issue: PILLSBURY - Galliard Portfolio

01/31/2024	B	69,022.330	1.0000		- 69,022	69,022	
6746013001							
01/31/2024	B	165,946.650	1.0000		- 165,947	165,947	
6746013002							
02/29/2024	B	16,686.800	1.0000		- 16,687	16,687	
6746013001							



FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
02/29/2024 6746013002	B	40,119.190	1.0000		- 40,119	40,119	
03/31/2024 6746013001	B	129,991.160	1.0000		- 129,991	129,991	
03/31/2024 6746013002	B	312,530.700	1.0000		- 312,531	312,531	
04/30/2024 6746013001	B	219,349.180	1.0000		- 219,349	219,349	
04/30/2024 6746013002	B	559,450.690	1.0000		- 559,451	559,451	
05/31/2024 6746013001	B	71,317.280	1.0000		- 71,317	71,317	
05/31/2024 6746013002	B	180,066.960	1.0000		- 180,067	180,067	
07/31/2024 6746013001	B	100,035.710	1.0000		- 100,036	100,036	
07/31/2024 6746013002	B	252,577.290	1.0000		- 252,577	252,577	
08/31/2024 6746013001	B	69,856.070	1.0000		- 69,856	69,856	
08/31/2024 6746013002	B	176,377.590	1.0000		- 176,378	176,378	
09/30/2024 6746013001	B	105,255.420	1.0000		- 105,255	105,255	
09/30/2024 6746013002	B	265,756.390	1.0000		- 265,756	265,756	
10/07/2024 6746013001	B	3,000,000.000	1.0000		- 3,000,000 *	3,000,000	

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
10/07/2024 6746013002	B	5,000,000.000	1.0000		- 5,000,000 *	5,000,000	
10/31/2024 6746013001	B	6,899.020	1.0000		- 6,899	6,899	
10/31/2024 6746013002	B	16,486.350	1.0000		- 16,486	16,486	
11/30/2024 6746013001	B	43,773.800	1.0000		- 43,774	43,774	
11/30/2024 6746013002	B	103,452.030	1.0000		- 103,452	103,452	
12/31/2024 6746013001	B	82,592.930	1.0000		- 82,593	82,593	
12/31/2024 6746013002	B	195,194.560	1.0000		- 195,195	195,195	
Total For Buys				0	11,182,738	11,182,738	0
04/30/2024 6746013001	S	- 2,500,000.000	1.0000		2,500,000	2,500,000	
04/30/2024 6746013002	S	- 4,500,000.000	1.0000		4,500,000 *	4,500,000	
06/30/2024 6746013001	S	- 198,678.340	1.0000		198,678	198,678	
06/30/2024 6746013002	S	- 501,637.220	1.0000		501,637	501,637	
Total For Sells				0	7,700,315	7,700,315	0

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

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Issue: 31846V203 - First Am Govt Ob Fd Cl Y							
01/03/2024	B	8,210.370	1.0000		- 8,210	8,210	
6746013000							
01/03/2024	B	2,976.760	1.0000		- 2,977	2,977	
6746013001							
01/03/2024	B	4,337.060	1.0000		- 4,337	4,337	
6746013002							
02/02/2024	B	120.610	1.0000		- 121	121	
6746013000							
02/02/2024	B	14,157.810	1.0000		- 14,158	14,158	
6746013001							
02/02/2024	B	21,390.220	1.0000		- 21,390	21,390	
6746013002							
02/07/2024	B	2,500.000	1.0000		- 2,500	2,500	
6746013002							
02/26/2024	B	45,795.000	1.0000		- 45,795	45,795	
6746013000							
03/04/2024	B	29,462.550	1.0000		- 29,463	29,463	
6746013000							
03/04/2024	B	13,192.140	1.0000		- 13,192	13,192	
6746013001							
03/04/2024	B	19,894.380	1.0000		- 19,894	19,894	
6746013002							
04/02/2024	B	122.990	1.0000		- 123	123	
6746013000							
Total Galliard Portfolio				0	18,883,053	18,883,053	0

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

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04/02/2024 6746013001	B	14,138.020	1.0000		- 14,138	14,138	
04/02/2024 6746013002	B	21,128.780	1.0000		- 21,129	21,129	
04/17/2024 6746013000	B	27,666.000	1.0000		- 27,666	27,666	
04/18/2024 6746013000	B	760,889.000	1.0000		- 760,889	760,889	
04/25/2024 6746013001	B	2,500,000.000	1.0000		- 2,500,000	2,500,000	
04/25/2024 6746013002	B	4,500,000.000	1.0000		- 4,500,000 *	4,500,000	
04/26/2024 6746013000	B	13,003,251.000	1.0000		- 13,003,251 *	13,003,251	
05/02/2024 6746013000	B	5,828.230	1.0000		- 5,828	5,828	
05/02/2024 6746013001	B	11,845.880	1.0000		- 11,846	11,846	
05/02/2024 6746013002	B	17,566.480	1.0000		- 17,566	17,566	
05/08/2024 6746013000	B	1,732.320	1.0000		- 1,732	1,732	
06/04/2024 6746013000	B	147.350	1.0000		- 147	147	
06/04/2024 6746013001	B	2,242.570	1.0000		- 2,243	2,243	
06/04/2024 6746013001	B	4,500,000.000	1.0000		- 4,500,000 *	4,500,000	

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

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06/04/2024 6746013002	B	3,073.670	1.0000		- 3,074	3,074	
06/04/2024 6746013002	B	2,500,000.000	1.0000		- 2,500,000	2,500,000	
06/20/2024 6746013001	B	2,000,000.000	1.0000		- 2,000,000	2,000,000	
06/21/2024 6746013002	B	727,022.440	1.0000		- 727,022	727,022	
07/02/2024 6746013000	B	140.470	1.0000		- 140	140	
07/02/2024 6746013001	B	3,045.960	1.0000		- 3,046	3,046	
07/02/2024 6746013002	B	3,180.710	1.0000		- 3,181	3,181	
07/23/2024 6746013000	B	178,205.000	1.0000		- 178,205	178,205	
07/25/2024 6746013000	B	289,544.000	1.0000		- 289,544	289,544	
07/31/2024 6746013000	B	30,563.000	1.0000		- 30,563	30,563	
08/02/2024 6746013000	B	228.910	1.0000		- 229	229	
08/02/2024 6746013001	B	2,086.110	1.0000		- 2,086	2,086	
08/02/2024 6746013002	B	2,663.400	1.0000		- 2,663	2,663	
08/07/2024 6746013000	B	30,563.000	1.0000		- 30,563	30,563	

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08/22/2024 6746013000	B	201,812.000	1.0000		- 201,812	201,812	
08/30/2024 6746013000	B	8,497,726.180	1.0000		- 8,497,726 *	8,497,726	
08/30/2024 6746013001	B	20,545.890	1.0000		- 20,546	20,546	
09/04/2024 6746013000	B	2,530.680	1.0000		- 2,531	2,531	
09/04/2024 6746013001	B	1,541.820	1.0000		- 1,542	1,542	
09/04/2024 6746013002	B	1,427.690	1.0000		- 1,428	1,428	
10/02/2024 6746013000	B	33,249.090	1.0000		- 33,249	33,249	
10/02/2024 6746013001	B	1,317.060	1.0000		- 1,317	1,317	
10/02/2024 6746013002	B	958.840	1.0000		- 959	959	
10/04/2024 6746013001	B	3,372,113.120	1.0000		- 3,372,113 *	3,372,113	
10/04/2024 6746013002	B	5,125,613.060	1.0000		- 5,125,613 *	5,125,613	
11/04/2024 6746013000	B	3,412.890	1.0000		- 3,413	3,413	
11/04/2024 6746013001	B	3,662.350	1.0000		- 3,662	3,662	
11/04/2024 6746013002	B	3,164.730	1.0000		- 3,165	3,165	

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FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
11/21/2024 6746013000	B	6,063.120	1.0000		- 6,063	6,063	
11/25/2024 6746013000	B	866.160	1.0000		- 866	866	
11/27/2024 6746013000	B	95,261.000	1.0000		- 95,261	95,261	
12/02/2024 6746013000	B	13,071.040	1.0000		- 13,071	13,071	
12/03/2024 6746013000	B	276.030	1.0000		- 276	276	
12/03/2024 6746013001	B	2,507.810	1.0000		- 2,508	2,508	
12/03/2024 6746013002	B	1,187.450	1.0000		- 1,187	1,187	
12/06/2024 6746013000	B	29,125.000	1.0000		- 29,125	29,125	
12/16/2024 6746013001	B	22,000.000	1.0000		- 22,000	22,000	
12/16/2024 6746013002	B	38,000.000	1.0000		- 38,000	38,000	
12/19/2024 6746013000	B	.130	1.0000				
12/19/2024 6746013001	B	3.290	1.0000		- 3	3	
12/19/2024 6746013002	B	1.050	1.0000		- 1	1	
12/27/2024 6746013001	B	2,993,928.550	1.0000		- 2,993,929 *	2,993,929	

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DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
12/27/2024 6746013002	B	4,546,428.600	1.0000		- 4,546,429 *	4,546,429	
Total For Buys							0
01/02/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
01/02/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
02/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
02/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
02/07/2024 6746013001	S	- 2,500.000	1.0000		2,500	2,500	
02/26/2024 6746013002	S	- 45,795.000	1.0000		45,795	45,795	
02/27/2024 6746013000	S	- 45,795.000	1.0000		45,795	45,795	
03/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
03/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
03/04/2024 6746013000	S	- 29,341.760	1.0000		29,342	29,342	
04/01/2024 6746013000	S	- 27,666.000	1.0000		27,666	27,666	
04/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	

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04/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
04/17/2024 6746013002	S	- 27,666.000	1.0000		27,666	27,666	
04/18/2024 6746013001	S	- 252,419.000	1.0000		252,419	252,419	
04/18/2024 6746013002	S	- 508,470.000	1.0000		508,470	508,470	
04/23/2024 6746013000	S	- 760,889.000	1.0000		760,889	760,889	
04/26/2024 6746013001	S	- 5,117,171.000	1.0000		5,117,171 *	5,117,171	
04/26/2024 6746013002	S	- 8,301,694.000	1.0000		8,301,694 *	8,301,694	
04/29/2024 6746013000	S	- 13,003,251.000	1.0000		13,003,251 *	13,003,251	
05/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
05/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
05/08/2024 6746013002	S	- 1,732.320	1.0000		1,732	1,732	
05/09/2024 6746013000	S	- 1,732.320	1.0000		1,732	1,732	
06/03/2024 6746013000	S	- 866.160	1.0000		866	866	
06/03/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	

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06/03/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
06/05/2024 6746013001	S	- 4,500,000.000	1.0000		4,500,000 *	4,500,000	
06/05/2024 6746013002	S	- 2,500,000.000	1.0000		2,500,000	2,500,000	
06/20/2024 6746013002	S	- 727,022.440	1.0000		727,022	727,022	
06/21/2024 6746013001	S	- 2,000,000.000	1.0000		2,000,000	2,000,000	
07/01/2024 6746013000	S	- 866.160	1.0000		866	866	
07/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
07/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
07/23/2024 6746013001	S	- 73,782.000	1.0000		73,782	73,782	
07/23/2024 6746013002	S	- 104,423.000	1.0000		104,423	104,423	
07/25/2024 6746013000	S	- 178,205.000	1.0000		178,205	178,205	
07/25/2024 6746013001	S	- 69,564.000	1.0000		69,564	69,564	
07/25/2024 6746013002	S	- 219,980.000	1.0000		219,980	219,980	
07/26/2024 6746013000	S	- 289,544.000	1.0000		289,544	289,544	

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07/31/2024 6746013000	S	- 30,563.000	1.0000		30,563	30,563	
08/01/2024 6746013000	S	- 866.160	1.0000		866	866	
08/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
08/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
08/07/2024 6746013000	S	- 30,563.000	1.0000		30,563	30,563	
08/22/2024 6746013001	S	- 73,904.000	1.0000		73,904	73,904	
08/22/2024 6746013002	S	- 127,908.000	1.0000		127,908	127,908	
08/26/2024 6746013000	S	- 201,812.000	1.0000		201,812	201,812	
09/03/2024 6746013000	S	- 866.160	1.0000		866	866	
09/03/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
09/03/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
10/01/2024 6746013000	S	- 866.160	1.0000		866	866	
10/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
10/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	

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PILLSBURY WINTHROP SHAW-CONSOLIDATED
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 Period from January 1, 2024 to December 31, 2024

FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
10/04/2024 6746013000	S	- 8,497,726.180	1.0000		8,497,726 *	8,497,726	
10/07/2024 6746013001	S	- 3,000,000.000	1.0000		3,000,000 *	3,000,000	
10/07/2024 6746013002	S	- 5,000,000.000	1.0000		5,000,000 *	5,000,000	
11/01/2024 6746013000	S	- 866.160	1.0000		866	866	
11/01/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
11/01/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
11/21/2024 6746013002	S	- 6,063.120	1.0000		6,063	6,063	
11/25/2024 6746013002	S	- 866.160	1.0000		866	866	
11/27/2024 6746013002	S	- 95,261.000	1.0000		95,261	95,261	
11/29/2024 6746013000	S	- 95,261.000	1.0000		95,261	95,261	
12/02/2024 6746013000	S	- 866.160	1.0000		866	866	
12/02/2024 6746013001	S	- 2,905.090	1.0000		2,905	2,905	
12/02/2024 6746013002	S	- 12,204.880	1.0000		12,205	12,205	
12/02/2024 6746013002	S	- 13,071.040	1.0000		13,071	13,071	

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 Period from January 1, 2024 to December 31, 2024

FORM 5500 - REPORTABLE TRANSACTION SCHEDULE (continued)

DATE	BOUGHT/ SOLD	SHARES/ PAR VALUE	UNIT PRICE	EXPENSE INCURRED	PRINCIPAL CASH	TRANSACTION COST	REALIZED GAIN/LOSS
12/06/2024 6746013002	S	-29,125.000	1.0000		29,125	29,125	
12/10/2024 6746013000	S	-29,125.000	1.0000		29,125	29,125	
12/16/2024 6746013000	S	-60,000.000	1.0000		60,000	60,000	
Total For Sells				0	56,267,272	56,267,272	0
Total First Am Govt Ob Fd CI Y				0	112,583,978	112,583,978	0
GRAND TOTAL				0	131,467,031	131,467,031	0

CATEGORY 4 - SINGLE TRANSACTION WITH ONE BROKER EXCEEDS 5% OF VALUE
 NO TRANSACTIONS QUALIFIED FOR THIS SECTION

Attachment to 2024 Schedule H (Form 5500)
Plan Name: Pillsbury Winthrop Shaw Pittman Llp Cash Balance Plans No. 1 & No. 2 Master Trust
Plan Sponsor: Pillsbury Winthrop Shaw Pittman LLP
EIN / PN : 94-1311126 / 006
2024 Schedule H line 4i
Schedule of Assets at Year End

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	Cash	First Amer Govt Oblig Fund Cl Y	8,533,823	8,533,823
	Pillsbury	Galliard Portfolio	54,049,398	54,049,398
	GRAND TOTAL		<u>62,583,221</u>	<u>62,583,221</u>