Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 09/30/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ________

B This return/report is:
- [ ] the first return/report
- [X] the final return/report
- [ ] an amended return/report
- [X] 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
RETIREMENT PLAN FOR EMPLOYEES OF ALLIANCEBERNSTEIN L.P.

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan
01/01/1980

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)
ALLIANCEBERNSTEIN L.P.

501 COMMERCE STREET
NASHVILLE, TN 37203

2b Employer Identification Number (EIN)
13-4064930

2c Plan Sponsor's telephone number
629-213-5284

2d Business code (see instructions)
523900

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	04/10/2026	THOMAS SIMEONE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	728
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	37
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	0
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	0
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	0
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	0
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A 1I

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

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

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

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

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

b General Schedules
- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [ ] **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 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code______________________

SCHEDULE H (Form 5500)

Department of the Treasury
Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 09/30/2025

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF ALLIANCEBERNSTEIN L.P.

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
ALLIANCEBERNSTEIN L.P.

D Employer Identification Number (EIN)
13-4064930

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	6224146	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	52052206	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	0	0
(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)	0	0
(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)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	1877537	0

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
1e	Buildings and other property used in plan operation	1e		
1f	Total assets (add all amounts in lines 1a through 1e)	1f	60153889	0

Liabilities

			(a) Beginning of Year	(b) End of Year
1g	Benefit claims payable	1g		
1h	Operating payables	1h		
1i	Acquisition indebtedness	1i		
1j	Other liabilities	1j		
1k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0

Net Assets

			(a) Beginning of Year	(b) End of Year
1l	Net assets (subtract line 1k from line 1f)	1l	60153889	0

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)	-403781	
(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)		-403781
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	4971	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		4971
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	529890	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	516653	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		13237
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	1137084	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		1137084

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		36707
d Total income. Add all **income** amounts in column (b) and enter total	2d		788218

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1989043	
(2) To insurance carriers for the provision of benefits	2e(2)	56989845	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		58978888
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)	1963219	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1963219
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		60942107

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		-60153889
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] 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: PRICEWATERHOUSE COOPERS LLP **(2)** EIN: 13-4008324

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

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

Part IV Compliance Questions

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

During the plan year:		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**	X		
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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

If "Yes," enter the amount of any plan assets that reverted to the employer this year 2103781.

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 571376.

SCHEDULE R (Form 5500)	Retirement Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under 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.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 09/30/2025

A Name of plan
RETIREMENT PLAN FOR EMPLOYEES OF ALLIANCEBERNSTEIN L.P.

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
ALLIANCEBERNSTEIN L.P.

D Employer Identification Number (EIN)
13-4064930

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

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

EIN(s): 13-3722243 ____________

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

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 13

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .... ☐ Yes ☐ No ☐ N/A

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month ______ Day ______ Year ______

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? .... ☐ Yes ☐ No ☐ N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? .... ☐ Yes ☐ No ☐ N/A

Part III Amendments

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

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .... ☐ Yes ☐ No

11 a Does the ESOP hold any preferred stock? .... ☐ Yes ☐ No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) .... ☐ Yes ☐ No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? .... ☐ Yes ☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)........	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)........	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)........	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year........	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers........	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment .... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment .... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:
Public Equity: _______% Private Equity: _______% Investment-Grade Debt and Interest Rate Hedging Assets: _______%
High-Yield Debt: _______% Real Assets: _______% Cash or Cash Equivalents: _______% Other: _______%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is “Yes,” has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.______________________________

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ “Prior year” ADP test

☐ “Current year” ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number__________.

Retirement Plan for Employees of AllianceBernstein L.P.

Financial Statements and Supplemental Schedules
September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation)
(With Report of Independent Auditors Thereon)

Retirement Plan for Employees of AllianceBernstein L.P.
Index
September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation)

Report of Independent Auditors

To the Administrator of the Retirement Plan for Employees of AllianceBernstein L.P.

Opinion

We have audited the accompanying financial statements of the Retirement Plan for Employees of AllianceBernstein L.P. (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 (in liquidation) as of September 30, 2025 and December 31, 2024, and the related statements of changes in net assets available for benefits (in liquidation) for the period from January 1, 2025 to September 30, 2025 and for the period from May 22, 2024 to December 31, 2024, and the statement of changes in net assets available for benefits (ongoing) for the period from January 1, 2024 to May 21, 2024 including the related notes (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits in liquidation of the Plan as of September 30, 2025 and December 31, 2024 and the changes in its net assets available for benefits in liquidation for the period from January 1 to September 30, 2025 and for the period from May 22, 2024 to December 31, 2024, the changes in its net assets available for benefits for the period from January 1, 2024 to May 21, 2024, in accordance with accounting principles generally accepted in the United States of America applied on the bases described in Note 3.

Basis for Opinion

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

Basis of Accounting

As discussed in Note 2 to the financial statements, the Compensation Committee of the AB Board of Directors approved a plan of liquidation on May 22, 2024, and the Plan determined liquidation is imminent. As a result, the Plan changed its basis of accounting on May 22, 2024 from the going concern basis to a liquidation basis. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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

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

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- 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 audit was conducted for the purpose of forming an opinion on the financial statements as a whole. Schedule H, line 4j - Schedule of Reportable Transactions for the period ended September 30, 2025 ("supplemental schedule") 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 audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including their 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 supplemental 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.

PricewaterhouseCoopers LLP

Nashville, TN
April 10, 2026

Retirement Plan for Employees of AllianceBernstein L.P.
Statements of Net Assets Available for Benefits
As of September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation)

	September 30, 2025 (In Liquidation)	December 31, 2024 (In Liquidation)
Assets		
Investments, at fair value		
Cash	$ —	$ 1,858,244
Money market fund	—	4,365,902
Hedge funds	—	1,877,537
Fixed income securities	—	52,052,206
Total investments	—	60,153,889
Accrued dividend and interest income	—	1,004,672
Total assets	—	61,158,561
Net assets available for benefits	$ —	$ 61,158,561

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

Retirement Plan for Employees of AllianceBernstein L.P.

Statements of Changes in Net Assets Available for Benefits

For the Period Ended September 30, 2025 (In Liquidation) and for the Periods from May 22, 2024 to December 31, 2024 (In Liquidation) and January 1, 2024 to May 21, 2024 (Ongoing)

	Period Ended September 30, 2025 (In Liquidation)	Period From May 22, 2024 to December 31, 2024 (In Liquidation)	Period From January 1, 2024 to May 21, 2024 (Ongoing)
Investment income			
Net appreciation (depreciation) in the fair value of investments	$ 187,327	$ 477,175	$ (2,765,071)
Dividends and interest	—	—	1,032,556
Total investment income (loss)	187,327	477,175	(1,732,515)
Other Additions			
Employer contributions	1,700,000	—	—
Annuity insurer refund	2,367,000	—	—
Total additions and investment income (loss)	4,254,327	477,175	(1,732,515)
Benefits paid			
Benefits paid to participants	1,989,043	39,853,650	2,927,291
Annuity insurer rollovers	59,356,845	—	—
PBGC payment	1,963,219	—	—
Total benefits paid	63,309,107	39,853,650	2,927,291
Other Deductions			
Excess assets to plan sponsor	2,103,781	—	—
Total other deductions	2,103,781	—	—
Total benefit payments and other deductions	65,412,888	39,853,650	2,927,291
Net (decrease) in net assets available for benefits	(61,158,561)	(39,376,475)	(4,659,806)
Net assets available for benefits at			
Beginning of period	61,158,561	100,535,036	101,429,982
End of period	$ —	$ 61,158,561	$ 96,770,176

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

1. Plan Sponsor

AllianceBernstein L.P. ("AB" or the "Plan Sponsor" or "Investment Manager") is the sponsor of the Retirement Plan for Employees of AllianceBernstein L.P. (the "Plan"). AB provides diversified investment management and related services globally to a broad range of clients. AllianceBernstein Corporation (the "Company"), an indirect wholly-owned subsidiary of Equitable Holdings ("EQH"), is the General Partner of AB.

2. Description of Plan

General

On May 22, 2024, the Compensation Committee of the AB Board of Directors approved the termination of the Plan through a standard plan termination process effective July 31, 2024, as described in further detail below, with an amendment to the Plan made on June 10, 2024. It was determined that on May 22, 2024, the plan's termination was imminent. On January 29, 2025, the insurer annuity rollovers were distributed from the Plan and the remaining assets were liquidated. The Plan was formally terminated effective September 30, 2025.

The Plan operated as a qualified, noncontributory, defined benefit plan covering current and former employees of AB and certain of its subsidiaries who were employed by AB or an affiliate prior to October 2, 2000. Effective December 31, 2008, Plan participants did not accrue additional benefits under the Plan and their service and compensation after December 31, 2008 were not taken into account when calculating their accrued retirement benefits, except for purposes of vesting credit and eligibility for early retirement benefits. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

AB was the Plan Administrator and the Plan was operated in accordance with the provisions of the Plan document by an Administrative Committee and an Investment Committee on behalf of AB. These Committees were appointed by the Compensation and Workplace Practices Committee of the Board of Directors of the Company.

The following is a brief summary of the provisions of the Plan document. Participants should refer to the Plan document for a complete description of the Plan's provisions. Capitalized terms used herein and not defined have the meanings assigned to them in the Plan document.

Plan Investments

Under the terms of a trust agreement between AB and the individuals designated as trustees of the Plan, the trustees managed a trust fund which held the assets of the Plan. During 2025, the Plan assets were distributed to the qualified insurance company to administer all future payments. Any remaining assets were liquidated and the trust was formally terminated effective September 30, 2025. During 2024, when the Plan's termination became imminent, a significant portion of the Plan assets were liquidated and reallocated into cash and subsequently distributed to participants in the form of lump sum disbursements in December 2024. The assets of the plan as of December 31, 2024 under the liquidation basis, were invested in cash, a hedge fund, and fixed income securities. The Plan's assets were held in custody by Sanford C. Bernstein & Co., LLC ("SCB LLC"), an indirect wholly-owned subsidiary of AB.

Eligibility

Persons who were employed by AB or certain of its subsidiaries prior to October 2, 2000 were eligible to participate in the Plan on the first day of the Plan year in which their one-year anniversary ended, provided they had worked at least 1,000 hours in their anniversary year and had attained age twenty-one.

Vesting

Benefits payable under the Plan were 100% vested upon the participant's completion of five years of service.

Benefits

Benefits were determined using a formula that takes into consideration a participant's years of credited service, average final base compensation (generally base salary excluding commissions, bonuses and overtime) and average covered compensation for Social Security purposes. Participants were entitled to receive full pension benefits upon reaching age 65 and may choose to receive such benefits under various payment options, including life annuity, life annuity-period certain, joint and survivor annuity, other annuities or a lump-sum payment. The Plan also provided benefits upon early retirement, disability and death. Participants who separated from service with AB with a vested benefit value of $1,000 or less received a lump-sum payment equal to the value of their vested benefit.

Plan Termination

AB had the right to discontinue its contributions to the Plan at any time and to terminate the Plan subject to the provisions of ERISA. As noted above, the Compensation Committee of the AB Board of Directors approved the termination of the Plan, effective May 22, 2024. Notice of Intent to Terminate was mailed to Plan participants on May 29, 2024 and subsequently, the application for approval of the Plan's termination was filed with the IRS. The Plan termination date is July 31, 2024. During 2025, the the net assets available under the Plan were distributed to the qualified insurance company to administer all future payments. Any remaining assets were liquidated and the Plan was terminated effective September 30, 2025.

In connection with the Plan termination, certain participants were given the option to elect to receive their Plan benefits: (a) in the form of a lump sum to be distributed either (i) directly to the participant or (ii) as a direct rollover to the Company's 401(k) plan, or other eligible retirement plan, or (b) to receive their accrued Plan benefits along with other Plan participants in the form of an annuity to be purchased from a qualified insurance company to administer all future payments, or (c) as a deferred payment. If the present value of the accrued benefit was $7,000 or less, participants were required to receive a lump sum. Lump sum distributions for electing participants were made in December 2024 in the amount of $35.2 million. Lump sum disbursements made in the normal course during 2024 were $4.2 million. Plan participants who chose or who were already receiving benefits in the form of an annuity had an annuity purchased on their behalf in 2025. During the period ended September 30, 2025 annuity insurance rollovers of $59.4 million were distributed to the qualified insurer. Benefit payments to the participants, consisting of lump sum disbursements and annuity payments, were $2.0 million. Benefits for missing participants in the amount of $1.9 million (inclusive of interest and administrative fees) were transferred to the PBGC on April 21, 2025. AB contributed an additional $1.7 million to the Plan to cover all remaining obligations. In August 2025, a refund of $2.4 million from Pacific Life Insurance Company and Pacific Life & Annuity Company ("PacLife") was sent to the Plan as a result of data cleanse activities and a true up process by the insurance companies. *See Note 4 Accumulated Plan Benefits* for additional information. Approximately $2.1 million was later refunded to the Plan Sponsor after all obligations were satisfied.

In accordance with the terms of ERISA, notices were provided to Participants including a Notice of Annuity Contract, mailed to participants on March 12, 2025 and 'Welcome Letters' from PacLife, the qualified insurance carrier, were mailed to Participants on March 19, 2025. Additionally, an amended Form 501, along with an amended form MP-100, Missing Participants Program Plan Information for Single-Employer DB Plan, was filed with the Pension Benefit Guaranty Corporation ("PBGC") on September 4, 2025.

Administrative Expenses
Expenses for administering the Plan may be paid from Plan assets, unless paid by AB. For each of the periods presented, AB paid all Plan expenses. Further, AB paid all costs incurred through the liquidation period of the Plan until its final termination.

3. Summary of Significant Accounting Policies

Basis of Accounting
The accompanying financial statements for the period January 1, 2024 to May 21, 2024 were prepared in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") using the going concern (Ongoing) basis of accounting.

As discussed in *Note 2*, on May 22, 2024, the Compensation Committee of the AB Board of Directors approved the termination of the Plan, effective July 31, 2024. As a result, the Plan changed its basis of accounting for the period subsequent to May 21, 2024 and for the periods ended December 31, 2024 and September 30, 2025 to a liquidation basis of accounting under ASC 205, *The Liquidation Basis of Accounting*, in accordance with U.S. GAAP.

Under the liquidation basis of accounting, assets are measured to reflect the estimated amount of cash expected to be collected in settling or disposing of the assets during the liquidation process and liabilities are measured using the accrual basis of accounting and would include any expected costs of the disposal of assets and other costs expected to be incurred during the liquidation process.

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

Investments, Valuation and Income Recognition

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The Plan presents in the statements of changes in net assets available for benefits, the net appreciation (depreciation) in the fair value of its investments, which includes the Plan's gains and losses on investments bought and sold as well as held for all periods presented.

Cash and Cash Equivalents
Cash and the money market fund at September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation) include the following:

	2025 (In Liquidation)	2024 (In Liquidation)
Cash	$ —	$ 1,858,244
Money market fund	$ —	4,365,902

During 2025, the Plan assets were liquidated and the Plan was terminated.

Fixed Income Securities
Fixed income securities at September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation) include the following:

	2025 (In Liquidation)	2024 (In Liquidation)
Fixed income securities - U.S. Long Duration Portfolio	$ —	$ 52,052,206

During 2025, the Plan assets were liquidated and the plan was terminated. During 2024, the Plan invested in a separately managed account (U.S. Long Duration), managed against the Bloomberg Long U.S. Corporate index. The portfolio invested in U.S. dollar denominated investment grade fixed income securities with at least 10 years to maturity. The portfolio was managed in our systematic strategy which utilizes AB's quantitative expertise and models. The strategy used a dynamic factor-based approach, deep set of historical data and market liquidity information to deliver alpha through security selection and portfolio structure. These securities were included in Level 2 of the valuation hierarchy.

Hedge Fund
Hedge Fund at September 30, 2025 (In Liquidation) and December 31, 2024 (In Liquidation) included the following:

	2025 (In Liquidation)	2024 (In Liquidation)
AB Securitized Assets (Cayman) Fund	$ —	$ 1,877,537

During 2024, the hedge fund held by the Plan sought to provide attractive risk-adjusted returns over full market cycles with less volatility than the broad equity markets by allocating all or substantially all of its assets among portfolio managers through portfolio funds that employed a broad range of investment strategies.

The hedge fund was measured at fair value using its NAV per share (or its equivalent) as a practical expedient. There were no unfunded commitments of this fund as of December 31, 2024 (In Liquidation).

The Plan had the right as of either the first or last business day of the calendar quarter each year upon, either 65 or 95 days priors written notice to the Investment Manager, to redeem all or any portion of its shares, provided that shares may not be redeemed by a shareholder prior to the end of the first calendar quarter that follows the one year anniversary of the date on which such capital subscriptions were made.

Contributions and Payments of Benefits
AB contributions were accrued as of the last day of the Plan year. Benefit payments are recorded when paid.

Funding Policy
AB's policy was to satisfy its funding obligation for each year in an amount not less than the minimum required by ERISA, as determined by the Plan's independent consulting actuary, and not greater than the maximum amount that can be deducted for federal income tax purposes. For the January 1, 2024 (Ongoing) and December 31, 2024 (in Liquidation) valuation date, the actuary used the traditional unit credit cost funding method for the Plan, as mandated under the Pension Protection Act of 2006. For the September 30, 2025 (in Liquidation), there was no funding method applied due to the Plan termination. AB did not make a contribution to the Plan for either of the

periods presented. For each of the Plan periods presented, AB met the minimum funding requirements as required by ERISA.

Recently Adopted Accounting Pronouncements or Accounting Pronouncements Not Yet Adopted

During 2025, there have been no recently adopted accounting pronouncements or pronouncements not yet adopted that have or are expected to have a material impact on our results of operations.

4. Accumulated Plan Benefits

Mercer provided actuarial and third-party administration services to the Plan.

Prior to the plan termination announcement date, the accumulated plan benefits were determined using beginning of year information. In connection with the adoption of the liquidation basis of accounting, the Plan changed from using a beginning of year to end of year information date.

There are no accumulated plan benefits as of September 30, 2025 due to the Plan termination and liquidation of the Plan assets. The accumulated plan benefits as of December 31, 2024 were determined based on actual lump sums paid and the actual insurer annuity premium transferred in the first quarter of 2025 (known amounts).

Accumulated plan benefits represented the total future periodic payments, including lump-sum distributions, that are payable to employees or their beneficiaries pursuant to the Plan. Accumulated benefits included benefits expected to be paid to: (a) retired or terminated employees or their beneficiaries; (b) beneficiaries of deceased employees; and (c) present employees or their beneficiaries. Benefits under the Plan are included to the extent that they are deemed attributable to services rendered by employees to the valuation date.

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

Upon adoption of the liquidation basis of accounting during 2024, the Plan recorded the following cumulative effect adjustment in the actuarial present value of accumulated plan benefits at the beginning of the period as of the date of adoption (see below discussion for the changes in actuarial assumptions):

Changes in actuarial assumptions 2024 - upon adoption of liquidation basis	$	1,545,296

The actuarial present value of accumulated plan benefits as of the most current valuation date is as follows:

	Benefit Information Date		
	September 30, 2025 (In Liquidation)	December 31, 2024 (In Liquidation)[1]	January 1, 2024 (Ongoing)
Vested benefits			
Active participants	$ —	$ 7,100,751	$ 11,627,764
Inactive participants with deferred benefits	—	24,356,733	56,540,215
Inactive participants receiving benefits	—	28,164,949	31,251,677
Total vested benefits	—	59,622,433	99,419,656
Nonvested benefits	—	—	—
Total actuarial present value of accumulated plan benefits	$ —	$ 59,622,433 [2]	$ 99,419,656
Assumed rate of interest	— %	Please see footnote[3]	5.25 %

[1] Reflects participant status as of January 1, 2024 unless during the year there was a lump sum payout or a death with no further benefits due.

[2] Reflects the discounted value of remaining obligations of the plan such as insurer annuity premium, remaining monthly payments and PBGC transfer.

[3] A discount rate of 4.63% is applied to the remaining 2025 obligations to determine their present value as of December 31, 2024. Otherwise, the liability as of December 31, 2024, reflects the actual obligations, including the insurer annuity premium and refund, which is based on actuarial assumptions that incorporate proprietary insurer assumptions.

The changes in the actuarial present value of accumulated plan benefits during the periods ended September 30, 2025 (in Liquidation), December 31, 2024 (in Liquidation), and May 21, 2024 (Ongoing) are as follows:

	Period from January 1, 2025 to September 30, 2025	Period from May 22, 2024 to December 31, 2024	Period from January 1, 2024 to May 21, 2024
Actuarial present value of accumulated plan benefits at beginning of the benefit information date	$ 60,683,017 [4]	$ 96,939,837 [5]	$ 99,419,656
Increase/decrease during the year attributed to:			
Benefits accumulated and (gains)	—	—	—
Increase for interest due to decrease in discount period	259,090	2,536,246	1,992,768
Benefits paid	(1,989,043)	(39,853,650)	(2,927,291)
Annuity insurer refund	2,367,000	—	—
PBGC Missing Participants	(1,963,219)	—	—
Annuity insurer rollovers	(59,356,845)	—	—
Net (decrease)	(60,683,017)	(37,317,404)	(934,523)
Actuarial present value of accumulated plan benefits at end of the benefit information date	**$ —**	**$ 59,622,433 [6]**	**$ 98,485,133**

Data, assumptions, methods and provisions under the Liquidation Basis of Accounting for the period of January 1, 2025 to September 30, 2025 utilizing actual and known facts about the plan assets as of September 30, 2025:

- Actual annuity rollover to qualified insurance carrier of $59,356,845.

Data, assumptions, methods and provisions under the Liquidation Basis of Accounting for the period of May 22, 2024 to December 31, 2024, utilizing actual and known facts about the plan assets as of December 31, 2024:

- Actual lump sums and annuities paid during 2024 of $39,853,650.
- Given the plan termination and known subsequent activity after December 31, 2024 but before the financial statement issuance date, the December 31, 2024 accumulated plan benefits is based on the following items discounted back to December 31, 2024 using the plan administrator's discount rate assumption of 4.63%:
    - Actual insurer premium transfer of $59,356,845 made during the first quarter of 2025.
    - Insurer premium refund of $2,367,000 received during the third quarter of 2025.
    - Lump sums of $83,622 made during the first quarter of 2025.

[4] The revised liability amount of $60,683,017 reflects the discounted value of nine additional lump sums totaling $1,060,853 (paid on January 2, 2025) which were not included in the December 31, 2024 liability. This balance was prefunded to the Plan's trustee in 2024, which was subsequently distributed to participants in 2025.
[5] Includes impact of the adoption of plan liquidation of $1,545,296.
[6] Reflects the discounted value of remaining obligations of the plan such as insurer annuity premium and refund, remaining monthly payments and PBGC transfer.

- Missing participant transfer to the PBGC of $1,963,219 made during the first quarter of 2025.

- Monthly benefit payments to in-pay retirees for January 2025, February 2025 and March 2025 totaling $844,567.

Data, assumptions, methods and provisions under the Ongoing Basis of Accounting for the period January 1, 2024 to May 21, 2024:

(a) assumed rates of interest of 5.25% period January 1, 2024 to May 21, 2024;

(b) varying retirement rates for participants between ages 55 to 65, with immediate retirement for participants over age 65;

(c) employee turnover based upon age of participant;

(d) interest rates for lump sum conversions based on IRS segment rates projected based on implied November 2023 forward rates for the period January 1, 2024 to May 21, 2024;

(e) mortality under the Pri-2012 white-collar mortality table for males and females, projected generationally with the MP-2021 improvement scale for the period January 1, 2024 to May 21, 2024;

(f) mortality for lump sum conversions for benefits to be paid after 2024 under the RP-2014 mortality table (unisex) adjusted back to 2006 projected generationally with the MP-2021 improvement scales for the period January 1, 2024 to May 21, 2024;

(g) forms of payments for males/females of 65%/60% for a lump sum, 10%/25% for a single life annuity and 25%/15% for a joint and 50% survivor annuity.

The ongoing actuarial assumptions were based on the assumption that the Plan will continue. The Plan sponsor (AB) approved the termination of the Plan on May 22, 2024, and the liquidation basis of accounting was applied, certain assumptions related to the termination of the Plan and other relevant factors that are applicable in determining the actuarial present value of the accumulated Plan benefits under this approach were applied, as noted above.

5. Reconciliation of statement of changes in net assets available for benefits

Upon adoption of the liquidation basis of accounting during 2024, the plan recorded the following cumulative effect adjustment to net assets available for benefits as of the date of adoption:

Net assets available at end of period from January 1, 2024 to May 2024 (Ongoing)	$	96,770,176
Accrued dividend and interest income to be recognized in liquidation		3,764,860
Net assets available at beginning of period from May 22, 2024 through December 31, 2024 (In Liquidation)	$	100,535,036

6. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net decrease in assets available for benefits per the financial statements to the Form 5500 as of September 30, 2025:

Net decrease in assets available for benefits as of September 30, 2025 per financial statements	$	(61,158,561)
Accrued dividend and interest income recognized in liquidation		1,004,672
Net decrease in assets per Form 5500 as of September 30, 2025	$	(60,153,889)

7. Fair Value

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date. The three broad levels of fair value hierarchy are as follows:

- Level 1 – Quoted prices in active markets are available for identical assets or liabilities as of the reported date.
- Level 2 – Quoted prices in markets that are not active or other pricing inputs that are either directly or indirectly observable as of the reported date.
- Level 3 – Prices or valuation techniques that are both significant to the fair value measurement and unobservable as of the reported date. These financial instruments do not have two-way markets and are measured using management's best estimate of fair value, where the inputs into the determination of fair value require significant management judgment or estimation.

See *Note 3* for further discussion of the Plan's valuation methods. If the inputs used to measure the financial assets and liabilities fall within more than one level described above, the categorization is based on the lowest level input that is significant to the fair value measurement of the investment.

The financial statements were presented on a liquidation basis as of May 22, 2024 and the investments held as of December 31, 2024 were measured at fair value, which is the amount the Plan expected to sell these investments for as of December 31, 2024.

All remaining assets were liquidated at fair value as of September 30, 2025.

The following table summarizes the valuation of the Plan's investments by fair value hierarchy as of December 31, 2024 (In Liquidation):

	Level 1	Level 2	Level 3	Total
December 31, 2024 (In Liquidation)				
Cash	$ 1,858,244	$ —	$ —	$ 1,858,244
Money Market Fund	4,365,902	—	—	4,365,902
Fixed Income securities	—	52,052,206	—	52,052,206
Total assets in the fair value hierarchy	6,224,146	52,052,206	—	58,276,352
Investments measured at net asset value [a]	—	—	—	1,877,537
Investments at fair value	**$ 6,224,146**	**$ 52,052,206**	**$ —**	**$ 60,153,889**

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

8. Related Party Transactions

The hedge funds and CITs receive investment advisory services pursuant to contracts with AB under which AB is not paid investment advisory fees. The AB mutual funds receive investment advisory services pursuant to a contract with AB under which AB is paid investment advisory fees by the fund. All securities are held in custody of SCB LLC, a party in interest, and are included below.

The following is a summary of transactions with parties affiliated with the Plan for the periods ended September 30, 2025 (In Liquidation) December 31, 2024 (In Liquidation) and May 21, 2024 (Ongoing):

	Aggregate cost of purchases	Aggregate proceeds from sales
From January 1, 2025 to September 30, 2025 (In Liquidation)		
AB Funds and Investments	$ 6,420,840	$ 64,856,857
Period From May 22, 2024 to December 31, 2024 (In Liquidation)		
AB Funds and Investments	$40,469,557	$ 79,214,704
Period From January 1, 2024 to May 21, 2024 (Ongoing)		
AB Funds and Investments	$64,593,125	$ 65,995,582

9. Tax Status

On June 12, 2024, AB filed for an IRS determination as to the qualified status of the Plan upon termination. On December 15, 2025, AB received a favorable determination letter from the IRS which found the termination of the Plan does not affect its qualification for federal tax purposes. Accordingly, no provision for income taxes has been included in the Plan's financial statements. Prior to termination, the Plan obtained its latest determination letter dated March 22, 2017 from the IRS, stating that the Plan was qualified under Section 401(a) of the Code and, therefore, the related trust was exempt from taxation.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan, and has concluded that as of September 30, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes the Plan's Forms 5500 are no longer subject to examinations by the IRS for years prior to 2022. See *Note 2* for further information. The Plan has complied with all applicable tax regulations and requirements related to its termination.

10. Subsequent Events

Management has evaluated subsequent events for possible recognition or disclosure in the financial statements through April 10, 2026 the date the financial statements were available to be issued. Management has determined that there are no other material events that would require disclosure in the financial statements through this date.

Retirement Plan for Employees of AllianceBernstein L.P.
Schedule H, Line 4j – Schedule of Reportable Transactions
EIN – 13-4064930 – Plan Number – 002
For the year ended September 30, 2025 (In Liquidation)

Identity of party involved	Description of asset	Number of Transactions	Purchase Price	Sales price	Cost of asset	Current value of asset on transaction date	Net gain (loss)
ABFIS- GOVT MONEY MARKET CLASS 1	MUTUAL FUND	Multiple purchases	$ 3,055,578	$ —	$ 3,055,578	$ 3,055,578	$ —
ABFIS- GOVT MONEY MARKET CLASS 1	MUTUAL FUND	Multiple sales	$ —	$ 7,421,481	$ 7,421,481	$ 7,421,481	$ —

Retirement Plan for Employees of AllianceBernstein L.P.
Schedule H, Line 4j – Schedule of Reportable Transactions
EIN – 13-4064930 – Plan Number – 002
For the year ended September 30, 2025 (In Liquidation)

Identity of party involved	Description of asset	Number of Transactions	Purchase Price	Sales price	Cost of asset	Current value of asset on transaction date	Net gain (loss)
ABFIS- GOVT MONEY MARKET CLASS 1	MUTUAL FUND	Multiple purchases	$ 3,055,578	$ —	$ 3,055,578	$ 3,055,578	$ —
ABFIS- GOVT MONEY MARKET CLASS 1	MUTUAL FUND	Multiple sales	$ —	$ 7,421,481	$ 7,421,481	$ 7,421,481	$ —

Schedule H, line 2a(1)(A) — Received or receivable in cash from employers

Detail for the value shown on Schedule H Line 2a(1)(A) is outlined below.

Item	**Amount**
Employer contributions	1,700,000
Excess assets returned to plan sponsor	(2,103,781)
Net Amount	(403,781)