

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
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 11/01/1976
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) LAERDAL MEDICAL CORPORATION 167 MYERS CORNERS ROAD WAPPINGERS FALLS, NY 12590-8840
2b	Employer Identification Number (EIN) 13-2587752
2c	Plan Sponsor's telephone number 845-297-7770
2d	Business code (see instructions) 423990

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	09/09/2026	PATRICIA GOODWIN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/09/2026	PATRICIA GOODWIN
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor PATRICIA GOODWIN 167 MYERS CORNERS ROAD WAPPINGERS FALLS, NY 12590-8840	3b Administrator's EIN 13-2587752 3c Administrator's telephone number 845-297-7770
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	5 259
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 174 6a(2) 161 6b 15 6c 70 6d 246 6e 3 6f 249 6g(1) 6g(2) 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 1C

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) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached _____
- (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 SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
▶ Round off amounts to nearest dollar.	
▶ Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.	
A Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF LAERDAL MEDICAL CORPORATION	D Employer Identification Number (EIN) 13-2587752
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B	F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I	Basic Information			
1	Enter the valuation date: Month 01 Day 01 Year 2025			
2	Assets:			
a	Market value	2a	12476391	
b	Actuarial value	2b	11453846	
3	Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a	For retired participants and beneficiaries receiving payment	16	1118264	1118264
b	For terminated vested participants	69	854915	854915
c	For active participants	174	9830503	9830503
d	Total	259	11803682	11803682
4	If the plan is in at-risk status, check the box and complete lines (a) and (b): ☐			
a	Funding target disregarding prescribed at-risk assumptions	4a		
b	Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5	Effective interest rate	5	5.37 %	
6	Target normal cost			
a	Present value of current plan year accruals	6a	856432	
b	Expected plan-related expenses	6b	112733	
c	Target normal cost	6c	969165	

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	Signature of actuary CHRISTOPHER JONES Type or print name of actuary USI CONSULTING GROUP Firm name 600 THIRD AVENUE 3RD FLOOR NEW YORK, NY 10016 Address of the firm	09/01/2026 Date 26-06984 Most recent enrollment number 212-878-0455 Telephone number (including area code)
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Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	1904824
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	1212646
9 Amount remaining (line 7 minus line 8)	0	692178
10 Interest on line 9 using prior year's actual return of <u>14.59</u> %	0	100989
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1171585
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.24</u> %		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		170934
c Total available at beginning of current plan year to add to prefunding balance		1342519
d Portion of (c) to be added to prefunding balance		1233000
12 Other reductions in balances due to elections or deemed elections	0	16000
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	2010167

Part III Funding Percentages

14 Funding target attainment percentage	14	80.00 %
15 Adjusted funding target attainment percentage	15	80.00 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	80.00 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/06/2026	1200000				
Totals ►			18(b)	1200000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	1123445

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? ☒ Yes ☐ No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
5.00 %2nd segment:
5.27 %3rd segment:
5.50 %☐ N/A, full yield curve used**b** Applicable month (enter code) **21b** 0**22** Weighted average retirement age **22** 65**23** Mortality table(s) (see instructions) ☒ Prescribed - combined ☐ Prescribed - separate ☐ Substitute**Part VI Miscellaneous Items****24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**26** Demographic and benefit information**a** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No**b** Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment. **27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years **28** 0**29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) **29****30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29) **30** 0**Part VIII Minimum Required Contribution For Current Year****31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6c) **31a** 969165**b** Excess assets, if applicable, but not greater than line 31a **31b** 0**32** Amortization installments:**a** Net shortfall amortization installment Outstanding Balance Installment
2360003 259356**b** Waiver amortization installment**33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) **34** 1228521

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	1228521	1228521

36 Additional cash requirement (line 34 minus line 35) **36** 0**37** Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c) **37** 1123445**38** Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36) **38a** 1123445**b** Portion included in line 38a attributable to use of prefunding and funding standard carryover balances **38b** 1123445**39** Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) **39** 0**40** Unpaid minimum required contributions for all years **40** 0**Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)****41** If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2025
		This Form is Open to Public Inspection.
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LAERDAL MEDICAL CORPORATION	D Employer Identification Number (EIN) 13-2587752	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

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

MERRILL LYNCH,PIERCE,FENNER & SMITH

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 33	BROKERAGE	98591	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

BANK OF AMERICA

94-1687665

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21	TRUSTEE	10613	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
	For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
	A Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 LAERDAL MEDICAL CORPORATION	D Employer Identification Number (EIN) 13-2587752	

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	8207	9551
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1250000	1200000
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	28613	31163
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	847426	1470421
(2) U.S. Government securities	1c(2)	2064373	2225281
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	12881	
(B) Common	1c(4)(B)	5785487	6536268
(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)	1742619	1877070
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	753637	812504

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	12493243	14162258

Liabilities

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

Net Assets

1l Net assets (subtract line 1k from line 1f)	1l	12493243	14162258
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	1200000	
(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)		1200000
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	56824	
(B) U.S. Government securities	2b(1)(B)	88182	
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		145006
(2) Dividends: (A) Preferred stock	2b(2)(A)	688	
(B) Common stock	2b(2)(B)	73159	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	99350	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		173197
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	6351069	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	6182642	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		168427
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	773413	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		773413

		(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)		36361
c Other income	2c		31350
d Total income. Add all income amounts in column (b) and enter total	2d		2527754

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	747724	
(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)		747724
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)	98768	
(6) Bank or trust company trustee/custodial fees	2i(6)	12247	
(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)		111015
j Total expenses. Add all expense amounts in column (b) and enter total	2j		858739

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1669015
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **PKF O'CONNOR DAVIES LLP**

(2) EIN: **27-1728945**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 574768.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection.
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 LAERDAL MEDICAL CORPORATION		D Employer Identification Number (EIN) 13-2587752
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 94-1687665		
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 11
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A		
If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____		
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☒ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☒ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2025 v. 250312		

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_____.

Laerdal Medical Corporation Employees' Pension Plan

Financial Statements and Supplemental Schedules

December 31, 2025 and 2024

Independent Auditors' Report

The Board of Directors of
Laerdal Medical Corporation Employees' Pension Plan

Opinion

We have audited the financial statements of Laerdal Medical Corporation Employees' Pension Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, the related statements of changes in net assets available for benefits for the years then ended, the statement of accumulated plan benefits as of December 31, 2024, and the related statement of changes in accumulated plan benefits for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits as of December 31, 2025 and 2024, and the changes in its net assets available for benefits for the years then ended and the accumulated plan benefits as of December 31, 2024, and the changes in accumulated plan benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Laerdal Medical Corporation Employees' Pension Plan's internal control. Accordingly, no such opinion is expressed.
- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Laerdal Medical Corporation Employees' Pension Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2025 and Schedule H, Line 4j - Schedule of Reportable Transactions for the year ended December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's (DOL) 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 auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying supplemental schedules 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

PKF O'Connor Davies, LLP

Harrison, New York

August 31, 2026

Laerdal Medical Corporation Employees' Pension Plan

Statements of Net Assets Available for Benefits

As of December 31, 2025 and 2024

	<u>2025</u>	<u>2024</u>
ASSETS		
Cash and cash equivalents	\$ 9,551	\$ 8,207
Investments		
Investments at fair value		
Money market funds and interest bearing cash	1,470,421	847,426
U.S. government securities	2,225,281	2,064,373
Common stocks	6,536,268	5,785,487
Real estate investment trusts	812,504	753,637
Mutual funds	1,877,070	1,742,619
Preferred stock	-	12,881
Total Investments at Fair Value	<u>12,921,544</u>	<u>11,206,423</u>
Total Investments	<u>12,921,544</u>	<u>11,206,423</u>
 Receivables		
Employer contributions	1,200,000	1,250,000
Interest and dividend income	<u>31,163</u>	<u>28,613</u>
Total Receivables	<u>1,231,163</u>	<u>1,278,613</u>
Total Assets	<u>14,162,258</u>	<u>12,493,243</u>
 Net Assets Available for Benefits	<u><u>\$14,162,258</u></u>	<u><u>\$12,493,243</u></u>

See accompanying notes to the financial statements.

Laerdal Medical Corporation Employees' Pension Plan

Statements of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2025 and 2024

	2025	2024
ADDITIONS		
Investment income		
Net appreciation in fair value of investments	\$ 1,009,551	\$ 1,175,132
Interest and dividends	318,203	278,684
Total Investment Income	<u>1,327,754</u>	<u>1,453,816</u>
Contributions		
Employer contributions	1,200,000	1,250,000
Total Additions	<u>2,527,754</u>	<u>2,703,816</u>
DEDUCTIONS		
Benefits paid to participants	747,724	1,493,591
Administrative expenses	111,015	112,733
Total Deductions	<u>858,739</u>	<u>1,606,324</u>
Net Increase	1,669,015	1,097,492
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	12,493,243	11,395,751
End of year	<u>\$14,162,258</u>	<u>\$12,493,243</u>

See accompanying notes to the financial statements.

Laerdal Medical Corporation Employees' Pension Plan

Statement of Accumulated Plan Benefits

As of December 31, 2024

	<u>2024</u>
Actuarial Present Value of Accumulated Plan Benefits	
Vested Benefits	
Participants currently receiving payments	\$ 1,001,848
Participants entitled to deferred benefits	705,844
Other participants	8,036,810
Total Vested Benefits	<u>9,744,502</u>
Total Actuarial Present Value of Accumulated Plan Benefits	<u><u>\$ 9,744,502</u></u>

See accompanying notes to the financial statements.

Laerdal Medical Corporation Employees' Pension Plan

Statement of Changes in Accumulated Plan Benefits For the Year Ended December 31, 2024

	<u>2024</u>
Actuarial present value of accumulated plan benefits at beginning of year	\$ 9,432,839
Increase (decrease) during the year attributable to:	
Decrease in discount period at 7.00%	608,907
Additional benefits earned, including experience (gains) and losses	1,196,347
Benefits paid	<u>(1,493,591)</u>
Net increase	<u>311,663</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 9,744,502</u></u>

See accompanying notes to the financial statements.

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

1. Description of Plan

The following description of the Laerdal Medical Corporation Employees' Pension Plan (the "Plan") provides only general information. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General

The Plan is a noncontributory defined benefit plan covering substantially all employees of Laerdal Medical Corporation (the "Company" or "Employer"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Board of Directors is responsible for oversight of the Plan. The Plan's management determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Board of Directors.

Funding policy

The Plan's funding policy is for the Company to contribute an amount which will meet or exceed the annual ERISA minimum funding requirement. The minimum funding requirements of ERISA were met in 2025 and 2024.

Pension benefits

Eligible employees automatically participate in the Plan on January 1 or July 1 after having attained the age of 21 and completing 1,000 hours of service within twelve months of the employee's hire date or any plan year beginning after the year in which the employee was hired. Employees hired after December 31, 2018 are not eligible to participate in the Plan. The Plan provides defined benefits to participants who retire at age 65 after at least three years of participation, based on their years of service, age and the average of the highest three consecutive calendar years of total salary. Benefits are also available at early retirement after age 55 with at least three years participation. Participants hired on or prior to January 1, 2008 became vested in accordance with a graded scale which results in full vesting after they had completed three years of continuous service. Participants hired after January 1, 2008 are not vested until after three years of continuous service, after which they are fully vested. Pension payments are made as either annuities or a lump sum payment. The Plan provides a death benefit for employees equal to the lump sum value of the accrued benefit.

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

2. Summary of Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein; disclosure of contingent assets and liabilities; and the actuarial present value of accumulated plan benefits at the date of the financial statements, and changes therein. Actual results could differ from those estimates.

Fair Value Measurements

The Plan follows U.S. GAAP guidance on Fair Value Measurements which defines fair value and establishes a fair value hierarchy organized into three levels based upon the input assumptions used in pricing assets. Level 1 inputs have the highest reliability and are related to assets with unadjusted quoted prices in active markets. Level 2 inputs relate to assets with other than quoted prices in active markets which may include quoted prices for similar assets or liabilities or other inputs which can be corroborated by observable market data. Level 3 inputs are unobservable and are used to the extent that observable inputs do not exist.

Investment Valuation and Income Recognition

Investments are reported at fair value. Common stocks, preferred stocks, real estate investment trusts, and U.S. government securities that are traded on a national securities exchange are valued at the last reported sales price on the last business day of the plan year; investments traded in the over-the-counter market and listed securities for which no sale was reported on that date are valued at the average of the last reported bid and asked prices. The mutual funds and money market fund are valued at the daily closing price as reported by the fund. These funds held by the Plan are open-end funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price and are deemed actively traded. The interest-bearing cash is an insured savings account, which is valued at amortized cost, which approximates fair value.

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

2. Summary of Accounting Policies (continued)

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits payments to participants are recorded upon distribution.

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company, as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the statements of changes in net assets available for benefits. In addition, certain investment-related expenses are included in net appreciation in fair value of investments in the statements of changes in net assets available for benefits.

Subsequent Events

Management has evaluated subsequent events for disclosure and/or recognition in the financial statements through the date that the financial statements were available to be issued, which date is August 31, 2026.

3. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are based on employees' compensation during each year of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

3. Actuarial Present Value of Accumulated Plan Benefits (continued)

accruals as of the benefit information date. Benefits payable under all circumstances, such as retirement, death, disability, and termination of employment, are included, to the extent they are attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

The actuarial present value of accumulated plan benefits is determined by the Plan's independent actuary and is that amount that results 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.

There were no changes in significant actuarial assumptions from the prior year valuation.

The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2025. Had the valuation been performed as of December 31, there would be no material differences. The significant actuarial assumptions used in the valuation were:

Assumption	December 31, 2024
Discount rate	7.00%
Mortality	Pri-2012 Total Dataset Mortality Table with MP-2021 Scaling
Retirement age	65
Salary increase (optional disclosure)	3.00% per annum

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

4. Investments

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2025 and 2024:

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

4. Investments (continued)

Assets at Fair Value as of December 31, 2025

	Level 1	Level 2	Total
Money market funds and interest bearing cash	\$ 1,461,696	\$ 8,725	\$ 1,470,421
U.S. government securities	788,580	1,436,701	2,225,281
Common stocks	6,536,268	-	6,536,268
Real estate investment trusts	812,504	-	812,504
Mutual funds	1,877,070	-	1,877,070
Total investments at fair value	\$ 11,476,118	\$ 1,445,426	\$12,921,544

Assets at Fair Value as of December 31, 2024

	Level 1	Level 2	Total
Money market funds and interest bearing cash	\$ 838,903	\$ 8,523	\$ 847,426
U.S. government securities	771,649	1,292,724	2,064,373
Common stocks	5,785,487	-	5,785,487
Real estate investment trusts	753,637	-	753,637
Mutual funds	1,742,619	-	1,742,619
Preferred stock	12,881	-	12,881
Total investments at fair value	\$ 9,905,176	\$ 1,301,247	\$11,206,423

5. Related-Party and Party In Interest Transactions

Certain Plan investments are managed by Bank of America, N.A. Bank of America, N.A. is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions under ERISA. Fees paid by the Plan to the trustee amounted to \$111,015 and \$112,733 for the years ending December 31, 2025 and 2024.

As described in Note 2, the Plan paid certain expenses related to Plan operations and investment activity to various service providers. Additionally, certain administrative functions of the Plan are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. These transactions are party in interest transactions under ERISA.

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

6. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation ("PBGC") (a U.S. government agency) up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor's pensions. However, the PBGC does not guarantee all benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide for accumulated benefit obligations and may also depend on the financial condition of the plan sponsor and the level of benefits guaranteed by the PBGC.

Laerdal Medical Corporation Employees' Pension Plan

Notes to Financial Statements

December 31, 2025 and 2024

7. Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated December 6, 2017, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). The plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

8. Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made, and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Laerdal Medical Corporation Employees' Pension Plan

Supplemental Schedules

December 31, 2025 and 2024

Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	MONEY MARKET FUNDS AND INTEREST BEARING CASH			
	BlackRock Liquidity Fund T-Fund	93,655	\$ 93,655	\$ 93,655
	BLF FedFund Cash Reserve	1,368,041	1,368,041	1,368,041
*	ISA Bank of America	8,725	8,725	8,725
	Total Money Market Funds and Interest Bearing Cash		1,470,421	1,470,421
	U.S. GOVERNMENT SECURITIES			
	FHLMC RA 5391	3%; 2051	82,197	83,963
	FHLMC SD 3478	2.5%; 2052	11,423	11,731
	FHLMC SD 4583	3.5%; 2053	16,700	17,093
	FHLMC SD 5368	2.5%; 2052	12,303	12,366
	FHLMC SD 6647	3.5%; 2052	855	866
	FHLMC SD 6653	3.5%; 2053	4,899	5,096
	FHLMC SD 8179	3%; 2051	8,895	7,556
	FHLMC SD 8190	3%; 2052	13,804	11,777
	FHLMC SD 8213	3%; 2052	4,854	4,973
	FHLMC SD 8220	3%; 2052	20,764	20,131
	FHLMC SD 8227	4%; 2052	16,342	16,030
	FHLMC SD 8243	3.5%; 2052	2,209	2,297
	FHLMC SD 8244	4%; 2052	6,086	6,218
	FHLMC SD 8258	5%; 2052	5,388	5,389
	FHLMC SD 8264	3.5%; 2052	14,307	14,523
	FHLMC SD 8299	5%; 2053	1,559	1,616
	FHLMC SD 8316	5.5%; 2053	762	768
	FHLMC SD 8342	5.5%; 2053	8,682	8,846
	FHLMC SD 8347	4.5%; 2053	19,650	20,323
	FHLMC SD 8360	4.5%; 2053	48,360	49,873
	FHLMC SD 8363	6%; 2053	739	722
	FHLMC SD 8384	6%; 2053	6,645	6,703
	FHLMC SD 8393	4.5%; 2054	853	879
	FHLMC SD 8438	5.5%; 2054	11,401	11,559
	FHLMC SD 8468	5%; 2054	5,379	5,466
	FHLMC SD 8469	5.5%; 2054	5,974	6,041
	FHLMC SD 8473	4.5%; 2054	7,165	7,325
	FHLMC SD 8487	4%; 2054	2,666	2,710
	FHLMC SD 8489	4.5%; 2054	26,992	26,857
	FHLMC SD 8508	6.5%; 2055	31,204	31,084
	FHLMC SD 8524	5.5%; 2055	7,317	7,339
	FHLMC SD 8534	6%; 2055	35,690	35,565
	FHLMC SB 1057	5%; 2038	678	677
	FHLMC SB 1215	6%; 2039	15,568	14,674
	FHLMC SB 8243	5%; 2038	2,382	2,397
	FHLMC SB 8272	5%; 2038	3,790	3,760
	FHLMC SB 8328	5.5%; 2039	24,987	24,661
	FHLMC SB 8353	5.5%; 2040	7,431	7,519
	FHLMC SB 8373	6%; 2040	15,338	15,516
	FNMA PCB3586	3%; 2052	736	726
	FNMA PFA0741	6%; 2038	2,329	2,321
	FNMA PFA2839	2.5%; 2052	8,351	8,349

See independent auditors' report

Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
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		SHARES/UNITS		
	FNMA PFA3067	6%; 2040	10,988	10,985
	FNMA PFS2824	2.5%; 2051	34,033	35,366
	FNMA PFS3497	3.5%; 2052	1,545	1,546
	FNMA PFS5387	2.5%; 2052	734	746
	FNMA PFS5452	3.5%; 2052	15,470	15,974
	FNMA PFS6256	3.5%; 2052	23,875	24,861
	FNMA PFS6631	2.5%; 2052	185,318	190,123
	FNMA PFS7751	4%; 2053	825	854
	FNMA PFS7879	2.5%; 2052	5,181	5,380
	FNMA PFS8852	2.5%; 2052	17,572	17,868
	FNMA PFS8874	3%; 2052	24,110	24,415
	FNMA PFS9366	2.5%; 2052	5,239	5,394
	FNMA PMA4579	3%; 2052	1,418	1,378
	FNMA PMA4599	3%; 2052	2,141	2,134
	FNMA PMA4624	3%; 2052	43,899	45,680
	FNMA PMA4731	3.5%; 2052	1,552	1,537
	FNMA PMA4737	5%; 2052	3,675	3,585
	FNMA PMA4782	3.5%; 2052	18,908	19,271
	FNMA PMA4783	4%; 2052	10,504	10,758
	FNMA PMA4869	5.5%; 2053	21,326	21,305
	FNMA PMA4918	5%; 2053	27,757	28,302
	FNMA PMA5087	5.5%; 2038	1,810	1,810
	FNMA PMA5107	5.5%; 2053	24,712	25,239
	FNMA PMA5139	6%; 2053	18,533	18,733
	FNMA PMA5164	5%; 2053	838	859
	FNMA PMA5294	5%; 2054	13,714	14,164
	FNMA PMA5300	5.5%; 2039	3,359	3,407
	FNMA PMA5389	6%; 2054	4,441	4,391
	FNMA PMA5425	5.5%; 2039	5,386	5,262
	FNMA PMA5446	6.5%; 2054	9,240	9,277
	FNMA PMA5448	5%; 2039	663	663
	FNMA PMA5507	5%; 2039	8,833	8,825
	FNMA PMA5550	4%; 2054	3,613	3,635
	FNMA PMA5552	5%; 2054	12,948	12,943
	FNMA PMA5761	6%; 2055	4,711	4,714
	FNMA PMA5762	6.5%; 2055	4,552	4,539
	FNMA PMA5772	5.5%; 2040	14,117	14,065
	FNMA PMA5800	5%; 2040	1,864	1,864
	FNMA PMA5801	5.5%; 2040	4,505	4,497
	FHLMC RR 0017	5%; 2040	3,629	3,616
	FHLMC RQ 0012	5%; 2055	64,085	65,054
	FHLMC RQ 0056	5.5%; 2055	25,654	25,703
	GNM PMA8151M	4.5%; 2052	3,828	3,685
	GNM PMA8346M	4%; 2052	13,291	13,413
	GNM PMA8347M	4.5%; 2052	5,393	5,333
	GNM PMA8426M	4%; 2052	1,472	1,510
	GNM PMA8724M	4.5%; 2053	1,585	1,574
	GNM PMA8726M	5.5%; 2053	9,606	9,650
	GNM PMA9015M	4.5%; 2053	42,767	43,817

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Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	GNM PMA9103M	4%; 2053	11,865	12,337
	GNM PMA9104M	4.5%; 2053	822	854
	GNM PMA9106M	5.5%; 2053	2,903	3,007
	GNM PMA9305M	5.5%; 2053	9,969	10,172
	GNM PMA9489M	6%; 2054	6,908	7,030
	GNM PMA9541M	5.5%; 2054	3,775	3,873
	GNM PMA9726M	6%; 2054	666	672
	GNM PMB0024M	4.5%; 2054	5,471	5,556
	GNM PMB0093M	6%; 2054	5,758	5,812
	GNM PMB0206M	6%; 2055	23,858	23,903
	GNM PMB0305M	4%; 2055	3,736	3,730
	GNM PMB0308M	5.5%; 2055	4,763	4,837
	GNM PMB0422M	4.5%; 2055	3,757	3,858
	GNM PMB0622M	5%; 2055	21,855	21,880
	GNM PMB0624M	6%; 2055	10,170	10,119
	GNM PMB0744M	4.5%; 2055	976	974
	GNM PMB0746M	5.5%; 2055	5,056	5,041
	GNM PMA9962M	4%; 2054	8,772	9,057
	U.S.Treasury Bond	3%; 2052	76,786	68,756
	U.S.Treasury Note	4%; 2028	108,068	111,147
	U.S.Treasury Note	3.625%; 2029	74,238	75,988
	U.S.Treasury Note	4.00%; 2034	117,092	118,629
	U.S.Treasury Note	4.750%; 2045	94,731	94,517
	U.S.Treasury Note	4.750%; 2055	23,315	22,612
	U.S.Treasury Note	4.00%; 2030	129,667	130,642
	U.S.Treasury Note	4.250%; 2035	65,243	65,538
	U.S.Treasury Note	3.625%; 2030	71,807	71,744
	U.S.Treasury Note	3.500%; 2027	28,942	29,007
	Total U.S. Government Securities		2,209,842	2,225,281
	COMMON STOCKS			
	Accenture PLC	94	29,850	25,220
	AerCap Holdings	450	28,831	64,692
	AES Corp.	3,999	51,205	57,346
	AIA Group LTD	451	17,833	18,505
	Akzo Nobel	802	18,266	18,566
	Albertsons Cos Inc	2,569	53,453	44,110
	Alcon Sa Act	292	25,165	23,013
	Alibaba Group Holding	45	5,408	6,596
	Allison Transmission Holdings Inc.	433	22,697	42,391
	Ally Fincl Inc	893	31,409	40,444
	Alphabet Inc. Shs Cl A	565	54,012	176,845
	Alphabet Inc. Shs Cl C	318	6,559	99,788
	Amazon Com Inc.	607	34,935	140,108
	Amphenol Corp. Cl A	109	4,206	14,730
	Applied Material Inc	167	29,028	42,917
	AptarGroup Inc.	188	27,368	22,928
	Armstrong World Inds Inc.	283	30,251	54,081
	Autodesk Inc.	194	12,323	57,426

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Laerdal Medical Corporation Employees' Pension Plan
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As of December 31, 2025

(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
		SHARES/UNITS		
	Ashtead Group Plc	452	26,769	31,974
	Assa Abloy Ab	1,535	24,238	29,641
	Avantor Inc.	2,488	34,201	28,512
	Ball Corp.	517	34,348	27,385
	Barrick Mining Corp	830	14,634	36,147
	Berkshire Hathaway Inc.	128	48,227	64,339
	Block Inc.	240	25,107	15,622
	Boeing Co.	501	85,327	108,777
	Boyd Gaming Corp.	38	1,953	3,239
	BP Plc	1,105	40,407	38,377
	Brookfield Corp	1,101	42,163	50,525
	Brown Forman Corp.	245	16,368	6,385
	Bruker Corp.	498	38,610	23,461
	Caesars Entertainment Inc,	373	13,993	8,724
	Cameco Corp	509	29,934	46,568
	Capital One Financial Corp.	275	27,613	66,649
	CBRE Group	228	21,274	36,660
	Check Point Software Tech	263	52,972	48,802
	Churchill Downs Inc.	458	49,826	52,111
	CIE Generale Des Etablissements Michelin	1,558	30,034	25,847
	Cincinnati Financial Corp.	185	16,271	30,214
	Citi Group Inc.	548	38,147	63,946
	Coca-Cola Europacific	373	34,041	33,831
	Cooper Cos Inc	426	35,171	34,915
	Copart Inc.	626	17,101	24,508
	Coterra Energy Inc.	1,949	48,786	51,298
	Credicorp Ltd Com	149	31,361	42,763
	CSX Corp	1,309	44,334	47,451
	Daikin Industries LTD	1,437	16,397	18,322
	DBS Group Holdings	237	26,048	41,620
	Deere & Co.	46	11,258	21,416
	Diageo Plc Spd Adr New	200	21,917	17,254
	Disney Walt Co.	1,039	110,690	118,207
	Dollar Tree Inc.	525	46,267	64,580
	DSM-Firmenich	2,255	25,248	18,119
	Entegris Inc.	454	30,390	38,250
	EQT Corp	822	41,551	44,059
	Erste Group	876	35,275	52,770
	Expeditors International Wash Inc.	193	9,130	28,759
	Experian PLC	530	23,819	23,940
	Factset Resh Systems Inc.	51	7,260	14,800
	Fanuc Ltd	1,307	18,397	25,447
	Fast Retailing Co LTD	832	27,825	30,118
	Flex Ltd.	585	420	35,346
	Fidelity National Info	1,285	78,112	85,401
	General Motors Co.	616	26,938	50,093
	GE Healthcare	587	44,139	48,146
	GSK Plc Shs	573	22,903	28,100
	Haleon Plc Shs	2,728	30,913	27,580

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Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	Heineken N V	404	17,979	16,483
	Huntington Ingalls	122	26,155	41,489
	Illumina Inc.	147	34,770	19,281
	Incyte Corp.	512	34,704	50,570
	Intuitive Surgical Inc.	58	10,237	32,849
	ING GP	1,876	35,720	52,528
	Keysight Technologies	188	29,954	38,200
	Kinder Morgan Inc.	2,056	45,964	56,519
	Kyndryl Holdings	1,753	50,560	46,560
	Lamb Weston Holdings Inc.	334	24,687	13,991
	Lennox International Inc.	64	15,683	31,077
	LVMH Moet Hennessy Adr	151	16,497	22,772
	M&T Bank Corp.	201	32,772	40,497
	Magnum (the) Ice Cream CO B.V. Regiest	65	939	1,030
	Marvell Tech Inc	555	41,355	47,164
	Meta Platforms Inc.	263	26,969	173,604
	Microsoft Corp.	212	14,069	102,527
	Moelis and Company	517	20,061	35,539
	Mohawk Industries Inc	356	41,156	38,911
	Monotaro Co LTF	2,024	41,859	32,161
	Monster Beverage Corp.	886	16,225	67,930
	Muenchener Rueck-Unspon	517	34,715	35,362
	Nestle SA	587	52,140	57,984
	Netflix Com Inc.	1,380	43,689	129,389
	Newmarket Corp.	47	23,074	32,301
	Nike Inc.	280	20,403	17,839
	Novartis AG ADR	206	12,210	28,401
	Novo Nordisk AS ADR	619	36,080	31,495
	Nvidia Corp.	1,443	21,137	269,120
	Old Dominion Freight Line Inc.	118	10,160	18,502
	Oracle Corp.	582	33,665	113,438
	Otis Worldwide Corp.	379	26,784	33,106
	Otsuka Holdings Co	1,083	26,999	30,681
	PACS Group Inc.	146	5,570	5,605
	Pan Pac Intl Hldgs Corp	3,132	41,133	36,989
	PayPal Holdings, Inc.	230	18,747	13,427
	Pool Corp.	90	29,185	20,588
	Post Holdings Inc.	255	14,735	25,258
	Pub SVC Enterprise Group	813	63,099	65,284
	Qualcomm Inc.	482	61,974	82,446
	QXO inc	2,302	42,942	44,406
	Regeneron Pharmaceuticals	169	92,958	130,446
	Rentokil Intl	586	14,169	17,264
	Roche Holding Ltd ADR	1,231	49,259	63,483
	SalesForce Inc.	425	89,103	112,587
	Safran Sa-Unspon	602	44,930	52,404
	SEI Investments Co.	297	9,022	24,360
	Shopify, Inc. CL A	478	27,282	76,944
	Somnigroup International	605	31,810	54,014

See independent auditors' report

Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	Sony Group Corp	1,750	46,528	44,800
	Southwest Airlines Co.	1,429	46,034	59,061
	Starbucks Corp.	322	22,231	27,116
	Steris PLC	151	27,171	38,282
	Symrise Ag	780	23,240	15,694
	Tesla Inc.	468	96,340	210,469
	Teva Pharmaceutical Industries Ltd	2,526	26,431	78,836
	Thermo Fisher Scientific Inc	52	27,927	30,131
	Totalenergies SE	348	20,424	22,881
	UniFirst Corp.	129	27,641	24,884
	Unilever PLC	291	17,051	19,031
	Vertex Pharmaceuticals Inc.	140	34,623	63,470
	Visa Inc. CL A	328	20,924	115,033
	Vulcan Materials Co.	131	20,600	37,364
	Wal-Mart De Mex Spnadr V	962	28,981	29,986
	Warner Bros Discovery	676	6,085	19,482
	Wells Fargo & Co.	766	40,318	71,391
	Weyerhaeuser Co	879	27,585	20,824
	Willis Towers Watson Plc	131	30,373	43,047
	Workday Inc.	68	9,788	14,605
	Waters Corp.	79	22,346	30,007
	Yum Brands Inc.	135	8,451	20,423
	Yum China Holdings Inc.	126	4,913	6,015
	Zimmer Biomet Holdings	533	53,858	47,927
	Total Common Stocks		4,306,058	6,536,268
	REAL ESTATE INVESTMENT TRUSTS			
	Agree Realty Corp.	248	18,502	17,863
	American Homes 4 Rent	339	11,757	10,882
	American Tower Corp.	289	58,071	50,740
	Americold Realty TR	180	5,181	2,315
	BXP Inc	239	16,495	16,128
	Carter Reit Inc	297	9,313	10,740
	Crown Castle International Corp.	723	79,845	64,253
	Digital Realty Trust, Inc.	508	69,593	78,593
	Equinix Inc.	44	31,258	33,711
	Equity Lifestyles Properties Inc.	113	6,829	6,849
	Equity Residential	171	10,981	10,780
	Essex Property Trust, Inc.	103	24,936	26,953
	Extra Space Storage Inc.	316	45,014	41,150
	Gaming and Leisure	152	6,658	6,793
	Healthcare Trust of America Inc.	1,002	21,190	16,984
	HighWoods Properties Inc.	389	14,091	10,044
	Host Hotels & Resorts Inc.	1,341	21,091	23,776
	Hudson Pacific	323	6,114	3,498
	Invitation Homes Inc.	888	33,110	24,678
	IRON Mountain REIT Inc.	357	26,820	29,613
	Kilroy Realty Corp	96	3,223	3,588
	Kimco Realty Corp.	916	17,760	18,567

See independent auditors' report

Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	Kite Realty Group	585	12,715	14,022
	Lamar Advertising Co. A	33	4,117	4,177
	Omega Healthcare Inv.	226	8,694	10,021
	Outfront Media Inc	239	4,427	5,760
	Prologis Inc.	455	36,918	58,085
	Public Storage, Inc.	54	15,475	14,013
	Realty Income	230	13,709	12,965
	SBA Communications Corp.	98	21,553	18,956
	SL Green Realty Group	108	5,402	4,954
	Simon Property Group	86	9,875	15,919
	Sun Communities Inc.	191	27,292	23,667
	UDR Inc.	412	17,454	15,112
	Welltower Inc.	573	52,146	106,355
	Total Real Estate Investment Trusts		767,609	812,504
	MUTUAL FUNDS			
	Cohen & Steers Low Duration Fund	66,370	618,658	637,151
	Lord Abbett Short Duration Income Fund	157,243	616,077	611,674
	Neuberger Berman Strategic Income Fund	61,412	643,657	628,245
	Total Mutual Funds		1,878,392	1,877,070
	Total Investments		\$ 10,632,322	\$ 12,921,544

*Denotes a party-in-interest.

Laerdal Medical Corporation Employees' Pension Plan

Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions

EIN: 13-2587752 Plan Number: 001

For the Year Ended December 31, 2025

	(a)	(b) Description of asset	(c)	(d) Selling	(g) Cost	(h) Current	(i) Net
			Purchase price	price		value	gain/(loss)
Single Transactions							
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	\$1,250,000	\$ -	\$1,250,000	\$1,250,000	\$ -
Series Transactions							
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	1,543,791	-	1,543,791	1,543,791	-
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	1,009,714	1,009,714	1,009,714	-
Total Series Transactions			\$1,543,791	\$1,009,714	\$2,553,505	\$2,553,505	\$ -

See independent auditors' report

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Line 22 – Description of Weighted Average Retirement Age
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

The Plan assumes that 100% of all active employees will retire at age 65.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Line 26 - Schedule of Active Participant Data

EIN/PN: 13-2587752/001

Plan Year: 01/01/2025 - 12/31/2025

Attained Age	Years of Credited Service:										Total No.
	Under 1 No.	1 to 4 No.	5 to 9 No.	10 to 14 No.	15 to 19 No.	20 to 24 No.	25 to 29 No.	30 to 34 No.	35 to 39 No.	40 & up No.	
Under 25	0	0	0	0	0	0	0	0	0	0	0
25 to 29	0	0	0	0	0	0	0	0	0	0	0
30 to 34	0	0	5	2	0	0	0	0	0	0	7
35 to 39	0	0	9	4	2	0	0	0	0	0	15
40 to 44	0	0	3	6	9	3	0	0	0	0	21
45 to 49	0	0	11	6	9	2	1	0	0	0	29
50 to 54	0	0	5	8	5	5	4	0	1	0	28
55 to 59	0	0	3	3	6	8	10	3	2	0	35
60 to 64	0	0	1	5	9	2	4	3	2	0	26
65 to 69	0	0	1	2	3	2	3	1	0	0	12
70 & up	0	0	0	1	0	0	0	0	0	0	1
Total	0	0	38	37	43	22	22	7	5	0	174

LAERDAL MEDICAL CORPORATION EMPLOYEES' PENSION PLAN
Schedule SB, Line 32 – Schedule of Amortization Bases
EIN/PN: 13-2587752 / 001
Plan Year: 01/01/2025 – 12/31/2025

Type of Base	Present Value of Remaining Installments as of 01/01/2025	Valuation Date Base Is Established For	Number of Years Remaining	Amortization Installment Amount as of 01/01/2025
Shortfall	\$1,486,606	01/01/2021	11	\$171,989
Shortfall	\$174,319	01/01/2022	12	\$18,923
Shortfall	\$238,806	01/01/2023	13	\$24,488
Shortfall	\$260,081	01/01/2024	14	\$25,337
Shortfall	\$200,191	01/01/2025	15	\$18,619
Total	\$2,360,003	N/A	N/A	\$259,356

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

COST METHOD

In accordance with PPA, the annual cost is equal to the target normal cost plus the shortfall amortization charge minus any prefunding and carryover balances.

Unit Credit method. The normal cost is the sum of the individual normal costs for active participants. The normal cost for an individual is the present value, as of the valuation date, of the participant's retirement, death, and withdrawal benefits which he is expected to accrue during the current plan year.

The actuarial accrued liability is the sum of the individual present values, for all participants, of the benefits accrued, based on service to the valuation date.

The actuarial liabilities shown in this report are determined using software purchased from an outside vendor which was developed for this purpose. Certain information is entered into this model in order to generate the liabilities specific to your pension plan. These inputs include economic and non-economic assumptions, plan provisions and census information. We rely on the coding within the software to value the liabilities using the actuarial methods and assumptions selected. Both the input to and the output from the model is checked for accuracy and reviewed for reasonableness.

ACTUARIAL ASSUMPTIONS

Interest Rate (as prescribed by PPA and modified by MAP-21, HATFA, BBA, ARPA and IIRA)

Without Adjusted Interest Rates:

Liabilities are valued using the three segment rates based on the 24-month average of the corporate bond yield curve published by the Secretary of the Treasury for the applicable month of January 2025.

With Adjusted Interest Rates:

The interest rates are the adjusted 24-month segment rates using 25-year average segment rate corridors of 95% to 105% per Funding Relief.

PBGC Premiums & LDROM:

The Plan Sponsor is using the Standard Method to determine the Variable Rate Premium.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

(continued)

	Without Adjusted Interest Rates	With Adjusted Interest Rates	PBGC Premiums & LDROM
Segment 1 (0 to 5 years)	5.00%	5.00%	4.65%
Segment 2 (5 to 20 years)	5.27%	5.27%	5.28%
Segment 3 (20+ years)	5.40%	5.50%	5.63%
Effective Rate	5.32%	5.37%	5.42%

Mortality Assumption Non-Disabled – 2025 Optional Combined Mortality Table
provided in IRS Notice 2024-42

Disabled – 2025 Optional Combined Mortality Table provided
in IRS Notice 2024-42

Salary Projection – 3.00% per annum

Social Security Wage Base Increases – 2.00% per annum

Form of Payment - 10 Year Certain and Life at Normal Retirement Date

Expense Load - \$112,733 is included in the Target Normal Cost to reflect anticipated
administrative expenses to be paid from the Plan Trust.

Retirement Age – 65

Cost of Living Increase – N/A

Withdrawal Rates – T-5 – See withdrawal rates in table below

Disability Rates – 50% of the 1955 UAW rates

Pre-retirement Decrement Rates

	Withdrawal	Disability	
<u>Age</u>	<u>Unisex</u>	<u>Male</u>	<u>Female</u>
20	7.938%	0.015%	0.020%
25	7.724%	0.015%	0.025%
30	7.222%	0.020%	0.030%
35	6.276%	0.025%	0.040%
40	5.150%	0.035%	0.050%
45	3.975%	0.050%	0.075%
50	2.563%	0.090%	0.130%
55	0.939%	0.180%	0.245%
60	0.090%	0.450%	0.605%

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

(continued)

Credit Balances – Excess contributions plus interest for the 2024 plan year in the amount of \$1,233,000 were elected to be added to the prefunding balance.
The voluntary/deemed reduction of the funding standard carryover balance was \$0.
The voluntary reduction of the prefunding balance was \$16,000.

Expected Return on Assets for FASB ASC 960 and Asset Smoothing –
Effective January 1, 2024: 7.00%
Effective January 1, 2025: 7.00%

RATIONALE FOR ASSUMPTIONS

1. Prescribed Assumptions: The Interest Rates and Mortality Assumptions are prescribed by the IRS and/or Plan Sponsor elections.
2. The Retirement, Withdrawal, and Disability Assumptions were chosen based on industry trends related to the business of the Plan Sponsor.
3. The Expected Return on Plan Assets and the Salary Projection assumptions were chosen based on discussions with the Plan Sponsor.

ASSET VALUATION

The actuarial value of plan assets is developed as the 3-year average of the plan assets based on the market value of assets as of the valuation date and the "adjusted value" of market assets for each of the two immediately preceding valuation dates. The adjusted value of assets at each preceding valuation date is equal to the market value of assets on such valuation date plus the net cash flow amount (including expected earnings on investments) for each following year up to the current valuation date. In this way, one third of the investment gain or loss over the preceding twelve months is recognized in plan assets immediately, and the other two thirds is deferred. Valuation assets are further limited to a 10% corridor around market value.

ATTRIBUTION PARAMETERS

Attribution parameters determine how growth in the benefit formula is allocated to years of service.

Accrual rate proration, by component – This method attributes the benefit separately for each component of the benefit formula, based on the credited service. If there are no accrual definitions in the benefit formula, then the entire projected benefit is assigned to past service (and considered fully accrued as of the valuation date). This results in "natural" or "direct differencing" attribution.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Statement of Actuarial Methods and Assumptions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

(continued)

ACCRUED AND VESTED BENEFITS

Vested benefits are based on the plan document's vesting schedule based on years of service. Please refer to the Summary of Plan Provisions section of this report for requirements for particular benefits.

Disability and death benefits (other than the qualified pre-retirement survivor annuity) are not treated as vested benefits for liability calculation purposes.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Summary of Plan Provisions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

SUMMARY OF PLAN PROVISIONS

Effective Date: The Effective Date of the amended Plan is November 1, 1976.

The Plan was restated effective January 1, 2013; last amended effective January 1, 2021.

Eligibility: All employees participate on the January 1st or July 1st following the attainment of age 21 and completion of 1 year of service.

The Plan is closed to new participants hired on or after January 1, 2018.

Retirement Dates:

Normal: The later of age 65 and five years of participation in the Plan.

Early: The later of age 55 and five years of participation in the Plan.

Retirement Benefits:

(a) Normal Retirement

Effective January 1, 1995, the plan has been changed to provide a lump sum payment at termination. The lump sum payment is based upon the sum of a participant's accumulated percentage of their Final Average Compensation, based upon their age, for each year they are an active participant in the Plan. In addition, Participants accumulate a percentage of their Final Average Compensation in excess of the Average Social Security Wage Base, based upon their age, for each year they are an active Participant in the Plan. The chart below outlines the applicable percentage accumulated for each Year of participation based upon a participant's age. The Average Social Security Wage Base (AVSSWB) is defined as an average of the taxable wage bases over the 35 years preceding the year a Participant reaches his Social Security Retirement Age. The Social Security Retirement Age is between 65 and 67 depending on a Participant's year of birth.

<u>Age</u>	<u>Percentage of Final Average Pay</u>	<u>Percentage of Final Average Pay in Excess of the AVSSWB</u>
21 – 34	2.0%	N/A
35 – 39	3.5%	1%
40 – 44	5.0%	2%
45 – 49	6.5%	3%
50 – 54	8.0%	3%
55 – 59	10.5%	4%
60 and up	14.0%	4%

In no event will a Participant's benefit be less than his prior accrued benefit as of December 31, 1994. The prior accrued benefit provided a monthly pension equal to 34% of Final Average Compensation plus 8.8% of Final Average Compensation in excess of \$12,156, the Earnings Base.

Laerdal Medical Corporation Employees' Pension Plan
Schedule SB, Part V – Summary of Plan Provisions
EIN/PN: 13-2587752/001
Plan Year: 01/01/2025 – 12/31/2025

(continued)

The resultant amount is multiplied by a fraction where the numerator is the Participant's service at December 31, 1994, and the denominator is the Participant's total service at Normal Retirement Date, but not less than 15.

Notwithstanding the foregoing, effective August 1, 2004, the following chart shall be used in calculating the normal retirement benefit:

<u>Age</u>	<u>Percentage of Final Average Pay</u>	<u>Percentage of Final Average Pay in Excess of the AVSSWB</u>
21 – 34	0.5%	N/A
35 – 39	1.0%	1%
40 – 44	2.5%	2%
45 – 49	4.0%	3%
50 – 54	5.5%	3%
55 – 59	8.0%	4%
60 and up	11.0%	4%

Effective January 1, 2021, a participant must complete a Year of Service (1,000 hours) in order to receive a benefit accrual for the Plan Year.

(b) Final Average Compensation: Determined using the highest five consecutive calendar years of total salary. Compensation is limited to \$350,000 for the 2025 Plan Year and for all future years.

(c) Early Retirement: The early retirement benefit is the benefit the employee will have at early retirement based upon the formula outlined for normal retirement.

Termination of Employment:

Vesting: Employees who terminate on or after January 1, 2008 will be 100% vested after 3 years of service.

Employees who terminate before January 1, 2008 will be vested according to the following schedule:

<u>Years of Service</u>	<u>Vesting Percentage</u>
Less than 1	0%
1 but less than 2	20%
2 but less than 3	40%
3 but less than 4	60%
4 but less than 5	80%
5 years or more	100%

Employees hired on or after January 1, 1995 will be 100% vested after 5 years, and 0% vested before.

SCHEDULE SB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

► Round off amounts to nearest dollar.
► Caution: A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan Laerdal Medical Corporation Employees' Pension Plan		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF Laerdal Medical Corporation		D Employer Identification Number (EIN) 13-2587752
E Type of plan: ☒ Single ☐ Multiple-A ☐ Multiple-B		F Prior year plan size: ☐ 100 or fewer ☒ 101-500 ☐ More than 500

Part I Basic Information			
1 Enter the valuation date: Month <u>1</u> Day <u>1</u> Year <u>2025</u>			
2 Assets:			
a Market value		2a	12,476,391
b Actuarial value		2b	11,453,846
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment.....	16	1,118,264	1,118,264
b For terminated vested participants.....	69	854,915	854,915
c For active participants	174	9,830,503	9,830,503
d Total.....	259	11,803,682	11,803,682
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... ☐			
a Funding target disregarding prescribed at-risk assumptions		4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor.....		4b	
5 Effective interest rate	5		5.37 %
6 Target normal cost.....			
a Present value of current plan year accruals.....		6a	856,432
b Expected plan-related expenses		6b	112,733
c Target normal cost		6c	969,165

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		09/01/2026
Signature of actuary		Date
CHRISTOPHER JONES		26-06984
Type or print name of actuary		Most recent enrollment number
USI CONSULTING GROUP		(212) 878-0455
Firm name		Telephone number (including area code)
600 THIRD AVENUE 3RD FLOOR NEW YORK NY 10016		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐
For Paperwork Reduction Act Notice, see the Instructions for Form 5500 or 5500-SF. **Schedule SB (Form 5500) 2025 v. 250312**

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	1,904,824
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	1,212,646
9 Amount remaining (line 7 minus line 8)	0	692,178
10 Interest on line 9 using prior year's actual return of <u>14.59%</u>	0	100,989
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		1,171,585
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.24%</u>		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		170,934
c Total available at beginning of current plan year to add to prefunding balance		1,342,519
d Portion of (c) to be added to prefunding balance		1,233,000
12 Other reductions in balances due to elections or deemed elections	0	16,000
13 Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	2,010,167

Part III Funding Percentages

14 Funding target attainment percentage	14	80.00%
15 Adjusted funding target attainment percentage	15	80.00%
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	80.00%
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls**18** Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/06/2026	1,200,000				
Totals ►			18(b)	1,200,000	18(c) 0

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

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	1,123,445

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☒ Yes ☐ No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner?..... ☒ Yes ☐ No

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

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost**21** Discount rate:**a** Segment rates:1st segment:
5.00 %2nd segment:
5.27 %3rd segment:
5.50 %☐ N/A, full yield curve used**b** Applicable month (enter code)**21b**

0

22 Weighted average retirement age**22**

65

23 Mortality table(s) (see instructions)

Prescribed - combined



Prescribed - separate



Substitute

Part VI Miscellaneous Items**24** Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**25** Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No**26** Demographic and benefit information**a** Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.Yes ☐ No**b** Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...Yes ☒ No**27** If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.**27****Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years****28** Unpaid minimum required contributions for all prior years **28** 0**29** Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)..... **29****30** Remaining amount of unpaid minimum required contributions (line 28 minus line 29)..... **30** 0**Part VIII Minimum Required Contribution For Current Year****31** Target normal cost and excess assets (see instructions):**a** Target normal cost (line 6c)**31a**

969,165

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

0

32 Amortization installments:

Outstanding Balance

Installment

a Net shortfall amortization installment

2,360,003

259,356

b Waiver amortization installment**33** If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount**33****34** Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)..... **34** 1,228,521

Carryover balance

Prefunding balance

Total balance

35 Balances elected for use to offset funding requirement

0

1,228,521

1,228,521

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

1,123,445

38 Present value of excess contributions for current year (see instructions)**a** Total (excess, if any, of line 37 over line 36)**38a**

1,123,445

b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances**38b**

1,123,445

39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37) **39** 0**40** Unpaid minimum required contributions for all years **40** 0**Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)****41** If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☒ 2021

Laerdal Medical Corporation Employees' Pension Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
EIN: 13-2587752 Plan Number: 001
As of December 31, 2025

(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
		SHARES/UNITS		
	MONEY MARKET FUNDS AND INTEREST BEARING CASH			
	BlackRock Liquidity Fund T-Fund	93,655	\$ 93,655	\$ 93,655
	BLF FedFund Cash Reserve	1,368,041	1,368,041	1,368,041
*	ISA Bank of America	8,725	8,725	8,725
	Total Money Market Funds and Interest Bearing Cash		1,470,421	1,470,421
	U.S. GOVERNMENT SECURITIES			
	FHLMC RA 5391	3%; 2051	82,197	83,963
	FHLMC SD 3478	2.5%; 2052	11,423	11,731
	FHLMC SD 4583	3.5%; 2053	16,700	17,093
	FHLMC SD 5368	2.5%; 2052	12,303	12,366
	FHLMC SD 6647	3.5%; 2052	855	866
	FHLMC SD 6653	3.5%; 2053	4,899	5,096
	FHLMC SD 8179	3%; 2051	8,895	7,556
	FHLMC SD 8190	3%; 2052	13,804	11,777
	FHLMC SD 8213	3%; 2052	4,854	4,973
	FHLMC SD 8220	3%; 2052	20,764	20,131
	FHLMC SD 8227	4%; 2052	16,342	16,030
	FHLMC SD 8243	3.5%; 2052	2,209	2,297
	FHLMC SD 8244	4%; 2052	6,086	6,218
	FHLMC SD 8258	5%; 2052	5,388	5,389
	FHLMC SD 8264	3.5%; 2052	14,307	14,523
	FHLMC SD 8299	5%; 2053	1,559	1,616
	FHLMC SD 8316	5.5%; 2053	762	768
	FHLMC SD 8342	5.5%; 2053	8,682	8,846
	FHLMC SD 8347	4.5%; 2053	19,650	20,323
	FHLMC SD 8360	4.5%; 2053	48,360	49,873
	FHLMC SD 8363	6%; 2053	739	722
	FHLMC SD 8384	6%; 2053	6,645	6,703
	FHLMC SD 8393	4.5%; 2054	853	879
	FHLMC SD 8438	5.5%; 2054	11,401	11,559
	FHLMC SD 8468	5%; 2054	5,379	5,466
	FHLMC SD 8469	5.5%; 2054	5,974	6,041
	FHLMC SD 8473	4.5%; 2054	7,165	7,325
	FHLMC SD 8487	4%; 2054	2,666	2,710
	FHLMC SD 8489	4.5%; 2054	26,992	26,857
	FHLMC SD 8508	6.5%; 2055	31,204	31,084
	FHLMC SD 8524	5.5%; 2055	7,317	7,339
	FHLMC SD 8534	6%; 2055	35,690	35,565
	FHLMC SB 1057	5%; 2038	678	677
	FHLMC SB 1215	6%; 2039	15,568	14,674
	FHLMC SB 8243	5%; 2038	2,382	2,397
	FHLMC SB 8272	5%; 2038	3,790	3,760
	FHLMC SB 8328	5.5%; 2039	24,987	24,661
	FHLMC SB 8353	5.5%; 2040	7,431	7,519
	FHLMC SB 8373	6%; 2040	15,338	15,516
	FNMA PCB3586	3%; 2052	736	726
	FNMA PFA0741	6%; 2038	2,329	2,321
	FNMA PFA2839	2.5%; 2052	8,351	8,349

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		SHARES/UNITS		
	FNMA PFA3067	6%; 2040	10,988	10,985
	FNMA PFS2824	2.5%; 2051	34,033	35,366
	FNMA PFS3497	3.5%; 2052	1,545	1,546
	FNMA PFS5387	2.5%; 2052	734	746
	FNMA PFS5452	3.5%; 2052	15,470	15,974
	FNMA PFS6256	3.5%; 2052	23,875	24,861
	FNMA PFS6631	2.5%; 2052	185,318	190,123
	FNMA PFS7751	4%; 2053	825	854
	FNMA PFS7879	2.5%; 2052	5,181	5,380
	FNMA PFS8852	2.5%; 2052	17,572	17,868
	FNMA PFS8874	3%; 2052	24,110	24,415
	FNMA PFS9366	2.5%; 2052	5,239	5,394
	FNMA PMA4579	3%; 2052	1,418	1,378
	FNMA PMA4599	3%; 2052	2,141	2,134
	FNMA PMA4624	3%; 2052	43,899	45,680
	FNMA PMA4731	3.5%; 2052	1,552	1,537
	FNMA PMA4737	5%; 2052	3,675	3,585
	FNMA PMA4782	3.5%; 2052	18,908	19,271
	FNMA PMA4783	4%; 2052	10,504	10,758
	FNMA PMA4869	5.5%; 2053	21,326	21,305
	FNMA PMA4918	5%; 2053	27,757	28,302
	FNMA PMA5087	5.5%; 2038	1,810	1,810
	FNMA PMA5107	5.5%; 2053	24,712	25,239
	FNMA PMA5139	6%; 2053	18,533	18,733
	FNMA PMA5164	5%; 2053	838	859
	FNMA PMA5294	5%; 2054	13,714	14,164
	FNMA PMA5300	5.5%; 2039	3,359	3,407
	FNMA PMA5389	6%; 2054	4,441	4,391
	FNMA PMA5425	5.5%; 2039	5,386	5,262
	FNMA PMA5446	6.5%; 2054	9,240	9,277
	FNMA PMA5448	5%; 2039	663	663
	FNMA PMA5507	5%; 2039	8,833	8,825
	FNMA PMA5550	4%; 2054	3,613	3,635
	FNMA PMA5552	5%; 2054	12,948	12,943
	FNMA PMA5761	6%; 2055	4,711	4,714
	FNMA PMA5762	6.5%; 2055	4,552	4,539
	FNMA PMA5772	5.5%; 2040	14,117	14,065
	FNMA PMA5800	5%; 2040	1,864	1,864
	FNMA PMA5801	5.5%; 2040	4,505	4,497
	FHLMC RR 0017	5%; 2040	3,629	3,616
	FHLMC RQ 0012	5%; 2055	64,085	65,054
	FHLMC RQ 0056	5.5%; 2055	25,654	25,703
	GNM PMA8151M	4.5%; 2052	3,828	3,685
	GNM PMA8346M	4%; 2052	13,291	13,413
	GNM PMA8347M	4.5%; 2052	5,393	5,333
	GNM PMA8426M	4%; 2052	1,472	1,510
	GNM PMA8724M	4.5%; 2053	1,585	1,574
	GNM PMA8726M	5.5%; 2053	9,606	9,650
	GNM PMA9015M	4.5%; 2053	42,767	43,817

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		SHARES/UNITS		
	GNM PMA9103M	4%; 2053	11,865	12,337
	GNM PMA9104M	4.5%; 2053	822	854
	GNM PMA9106M	5.5%; 2053	2,903	3,007
	GNM PMA9305M	5.5%; 2053	9,969	10,172
	GNM PMA9489M	6%; 2054	6,908	7,030
	GNM PMA9541M	5.5%; 2054	3,775	3,873
	GNM PMA9726M	6%; 2054	666	672
	GNM PMB0024M	4.5%; 2054	5,471	5,556
	GNM PMB0093M	6%; 2054	5,758	5,812
	GNM PMB0206M	6%; 2055	23,858	23,903
	GNM PMB0305M	4%; 2055	3,736	3,730
	GNM PMB0308M	5.5%; 2055	4,763	4,837
	GNM PMB0422M	4.5%; 2055	3,757	3,858
	GNM PMB0622M	5%; 2055	21,855	21,880
	GNM PMB0624M	6%; 2055	10,170	10,119
	GNM PMB0744M	4.5%; 2055	976	974
	GNM PMB0746M	5.5%; 2055	5,056	5,041
	GNM PMA9962M	4%; 2054	8,772	9,057
	U.S.Treasury Bond	3%; 2052	76,786	68,756
	U.S.Treasury Note	4%; 2028	108,068	111,147
	U.S.Treasury Note	3.625%; 2029	74,238	75,988
	U.S.Treasury Note	4.00%; 2034	117,092	118,629
	U.S.Treasury Note	4.750%; 2045	94,731	94,517
	U.S.Treasury Note	4.750%; 2055	23,315	22,612
	U.S.Treasury Note	4.00%; 2030	129,667	130,642
	U.S.Treasury Note	4.250%; 2035	65,243	65,538
	U.S.Treasury Note	3.625%; 2030	71,807	71,744
	U.S.Treasury Note	3.500%; 2027	28,942	29,007
	Total U.S. Government Securities		2,209,842	2,225,281
	COMMON STOCKS			
	Accenture PLC	94	29,850	25,220
	AerCap Holdings	450	28,831	64,692
	AES Corp.	3,999	51,205	57,346
	AIA Group LTD	451	17,833	18,505
	Akzo Nobel	802	18,266	18,566
	Albertsons Cos Inc	2,569	53,453	44,110
	Alcon Sa Act	292	25,165	23,013
	Alibaba Group Holding	45	5,408	6,596
	Allison Transmission Holdings Inc.	433	22,697	42,391
	Ally Fincl Inc	893	31,409	40,444
	Alphabet Inc. Shs Cl A	565	54,012	176,845
	Alphabet Inc. Shs Cl C	318	6,559	99,788
	Amazon Com Inc.	607	34,935	140,108
	Amphenol Corp. Cl A	109	4,206	14,730
	Applied Material Inc	167	29,028	42,917
	AptarGroup Inc.	188	27,368	22,928
	Armstrong World Inds Inc.	283	30,251	54,081
	Autodesk Inc.	194	12,323	57,426

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Laerdal Medical Corporation Employees' Pension Plan
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		SHARES/UNITS		
	Ashtead Group Plc	452	26,769	31,974
	Assa Abloy Ab	1,535	24,238	29,641
	Avantor Inc.	2,488	34,201	28,512
	Ball Corp.	517	34,348	27,385
	Barrick Mining Corp	830	14,634	36,147
	Berkshire Hathaway Inc.	128	48,227	64,339
	Block Inc.	240	25,107	15,622
	Boeing Co.	501	85,327	108,777
	Boyd Gaming Corp.	38	1,953	3,239
	BP Plc	1,105	40,407	38,377
	Brookfield Corp	1,101	42,163	50,525
	Brown Forman Corp.	245	16,368	6,385
	Bruker Corp.	498	38,610	23,461
	Caesars Entertainment Inc,	373	13,993	8,724
	Cameco Corp	509	29,934	46,568
	Capital One Financial Corp.	275	27,613	66,649
	CBRE Group	228	21,274	36,660
	Check Point Software Tech	263	52,972	48,802
	Churchill Downs Inc.	458	49,826	52,111
	CIE Generale Des Etablissements Michelin	1,558	30,034	25,847
	Cincinnati Financial Corp.	185	16,271	30,214
	Citi Group Inc.	548	38,147	63,946
	Coca-Cola Europacific	373	34,041	33,831
	Cooper Cos Inc	426	35,171	34,915
	Copart Inc.	626	17,101	24,508
	Coterra Energy Inc.	1,949	48,786	51,298
	Credicorp Ltd Com	149	31,361	42,763
	CSX Corp	1,309	44,334	47,451
	Daikin Industries LTD	1,437	16,397	18,322
	DBS Group Holdings	237	26,048	41,620
	Deere & Co.	46	11,258	21,416
	Diageo Plc Spisd ADR New	200	21,917	17,254
	Disney Walt Co.	1,039	110,690	118,207
	Dollar Tree Inc.	525	46,267	64,580
	DSM-Firmenich	2,255	25,248	18,119
	Entegris Inc.	454	30,390	38,250
	EQT Corp	822	41,551	44,059
	Erste Group	876	35,275	52,770
	Expeditors International Wash Inc.	193	9,130	28,759
	Experian PLC	530	23,819	23,940
	Factset Resh Systems Inc.	51	7,260	14,800
	Fanuc Ltd	1,307	18,397	25,447
	Fast Retailing Co LTD	832	27,825	30,118
	Flex Ltd.	585	420	35,346
	Fidelity National Info	1,285	78,112	85,401
	General Motors Co.	616	26,938	50,093
	GE Healthcare	587	44,139	48,146
	GSK Plc Shs	573	22,903	28,100
	Haleon Plc Shs	2,728	30,913	27,580

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Laerdal Medical Corporation Employees' Pension Plan
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		SHARES/UNITS		
	Heineken N V	404	17,979	16,483
	Huntington Ingalls	122	26,155	41,489
	Illumina Inc.	147	34,770	19,281
	Incyte Corp.	512	34,704	50,570
	Intuitive Surgical Inc.	58	10,237	32,849
	ING GP	1,876	35,720	52,528
	Keysight Technologies	188	29,954	38,200
	Kinder Morgan Inc.	2,056	45,964	56,519
	Kyndryl Holdings	1,753	50,560	46,560
	Lamb Weston Holdings Inc.	334	24,687	13,991
	Lennox International Inc.	64	15,683	31,077
	LVMH Moet Hennessy Adr	151	16,497	22,772
	M&T Bank Corp.	201	32,772	40,497
	Magnum (the) Ice Cream CO B.V. Regiest	65	939	1,030
	Marvell Tech Inc	555	41,355	47,164
	Meta Platforms Inc.	263	26,969	173,604
	Microsoft Corp.	212	14,069	102,527
	Moelis and Company	517	20,061	35,539
	Mohawk Industries Inc	356	41,156	38,911
	Monotaro Co LTF	2,024	41,859	32,161
	Monster Beverage Corp.	886	16,225	67,930
	Muenchener Rueck-Unspon	517	34,715	35,362
	Nestle SA	587	52,140	57,984
	Netflix Com Inc.	1,380	43,689	129,389
	Newmarket Corp.	47	23,074	32,301
	Nike Inc.	280	20,403	17,839
	Novartis AG ADR	206	12,210	28,401
	Novo Nordisk AS ADR	619	36,080	31,495
	Nvidia Corp.	1,443	21,137	269,120
	Old Dominion Freight Line Inc.	118	10,160	18,502
	Oracle Corp.	582	33,665	113,438
	Otis Worldwide Corp.	379	26,784	33,106
	Otsuka Holdings Co	1,083	26,999	30,681
	PACS Group Inc.	146	5,570	5,605
	Pan Pac Intl Hldgs Corp	3,132	41,133	36,989
	PayPal Holdings, Inc.	230	18,747	13,427
	Pool Corp.	90	29,185	20,588
	Post Holdings Inc.	255	14,735	25,258
	Pub SVC Enterprise Group	813	63,099	65,284
	Qualcomm Inc.	482	61,974	82,446
	QXO inc	2,302	42,942	44,406
	Regeneron Pharmaceuticals	169	92,958	130,446
	Rentokil Intl	586	14,169	17,264
	Roche Holding Ltd ADR	1,231	49,259	63,483
	SalesForce Inc.	425	89,103	112,587
	Safran Sa-Unspon	602	44,930	52,404
	SEI Investments Co.	297	9,022	24,360
	Shopify, Inc. CL A	478	27,282	76,944
	Somnigroup International	605	31,810	54,014

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		SHARES/UNITS		
	Sony Group Corp	1,750	46,528	44,800
	Southwest Airlines Co.	1,429	46,034	59,061
	Starbucks Corp.	322	22,231	27,116
	Steris PLC	151	27,171	38,282
	Symrise Ag	780	23,240	15,694
	Tesla Inc.	468	96,340	210,469
	Teva Pharmaceutical Industries Ltd	2,526	26,431	78,836
	Thermo Fisher Scientific Inc	52	27,927	30,131
	Totalenergies SE	348	20,424	22,881
	UniFirst Corp.	129	27,641	24,884
	Unilever PLC	291	17,051	19,031
	Vertex Pharmaceuticals Inc.	140	34,623	63,470
	Visa Inc. CL A	328	20,924	115,033
	Vulcan Materials Co.	131	20,600	37,364
	Wal-Mart De Mex Spnadr V	962	28,981	29,986
	Warner Bros Discovery	676	6,085	19,482
	Wells Fargo & Co.	766	40,318	71,391
	Weyerhaeuser Co	879	27,585	20,824
	Willis Towers Watson Plc	131	30,373	43,047
	Workday Inc.	68	9,788	14,605
	Waters Corp.	79	22,346	30,007
	Yum Brands Inc.	135	8,451	20,423
	Yum China Holdings Inc.	126	4,913	6,015
	Zimmer Biomet Holdings	533	53,858	47,927
	Total Common Stocks		4,306,058	6,536,268
	REAL ESTATE INVESTMENT TRUSTS			
	Agree Realty Corp.	248	18,502	17,863
	American Homes 4 Rent	339	11,757	10,882
	American Tower Corp.	289	58,071	50,740
	Americold Realty TR	180	5,181	2,315
	BXP Inc	239	16,495	16,128
	Carter Reit Inc	297	9,313	10,740
	Crown Castle International Corp.	723	79,845	64,253
	Digital Realty Trust, Inc.	508	69,593	78,593
	Equinix Inc.	44	31,258	33,711
	Equity Lifestyles Properties Inc.	113	6,829	6,849
	Equity Residential	171	10,981	10,780
	Essex Property Trust, Inc.	103	24,936	26,953
	Extra Space Storage Inc.	316	45,014	41,150
	Gaming and Leisure	152	6,658	6,793
	Healthcare Trust of America Inc.	1,002	21,190	16,984
	HighWoods Properties Inc.	389	14,091	10,044
	Host Hotels & Resorts Inc.	1,341	21,091	23,776
	Hudson Pacific	323	6,114	3,498
	Invitation Homes Inc.	888	33,110	24,678
	IRON Mountain REIT Inc.	357	26,820	29,613
	Kilroy Realty Corp	96	3,223	3,588
	Kimco Realty Corp.	916	17,760	18,567

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Laerdal Medical Corporation Employees' Pension Plan
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		SHARES/UNITS		
	Kite Realty Group	585	12,715	14,022
	Lamar Advertising Co. A	33	4,117	4,177
	Omega Healthcare Inv.	226	8,694	10,021
	Outfront Media Inc	239	4,427	5,760
	Prologis Inc.	455	36,918	58,085
	Public Storage, Inc.	54	15,475	14,013
	Realty Income	230	13,709	12,965
	SBA Communications Corp.	98	21,553	18,956
	SL Green Realty Group	108	5,402	4,954
	Simon Property Group	86	9,875	15,919
	Sun Communities Inc.	191	27,292	23,667
	UDR Inc.	412	17,454	15,112
	Welltower Inc.	573	52,146	106,355
	Total Real Estate Investment Trusts		767,609	812,504
	MUTUAL FUNDS			
	Cohen & Steers Low Duration Fund	66,370	618,658	637,151
	Lord Abbett Short Duration Income Fund	157,243	616,077	611,674
	Neuberger Berman Strategic Income Fund	61,412	643,657	628,245
	Total Mutual Funds		1,878,392	1,877,070
	Total Investments		\$ 10,632,322	\$ 12,921,544

*Denotes a party-in-interest.

Laerdal Medical Corporation Employees' Pension Plan

Schedule H, Part IV, Line 4j - Schedule of Reportable Transactions

EIN: 13-2587752 Plan Number: 001

For the Year Ended December 31, 2025

	(a)	(b) Description of asset	(c)	(d) Selling	(g) Cost	(h) Current	(i) Net
			Purchase price	price		value	gain/(loss)
Single Transactions							
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	\$1,250,000	\$ -	\$1,250,000	\$1,250,000	\$ -
Series Transactions							
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	1,543,791	-	1,543,791	1,543,791	-
	Bank of America, N.A.	BlackRock Liquidity Fed Fund	-	1,009,714	1,009,714	1,009,714	-
Total Series Transactions			\$1,543,791	\$1,009,714	\$2,553,505	\$2,553,505	\$ -

See independent auditors' report