

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 KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 01/01/1982
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) KOHLBERG KRAVIS ROBERTS & CO. L.P. 30 HUDSON YARDS NEW YORK, NY 10001
2b	Employer Identification Number (EIN) 13-2857105
2c	Plan Sponsor's telephone number 212-750-8300
2d	Business code (see instructions) 523900

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	09/15/2026	KATHLEEN KOBER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 2345
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) 1627 6a(2) 3203 6b 4 6c 1383 6d 4590 6e 5 6f 4595 6g(1) 2266 6g(2) 4460 6h 150
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:

2E 2F 2G 2J 2K 2R 2T 3D 3H

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 1
- (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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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		
A Name of plan KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLBERG KRAVIS ROBERTS & CO. L.P.	D Employer Identification Number (EIN) 13-2857105	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier NEW YORK LIFE					
(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-5582869	66915	GA31708	174	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
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(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0			

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	0
5 Current value of plan's interest under this contract in separate accounts at year end	5	6421760

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	0
c Premiums due but unpaid at the end of the year	6c	0
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	0

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	
c Additions: (1) Contributions deposited during the year	7c(1)	0
(2) Dividends and credits	7c(2)	0
(3) Interest credited during the year	7c(3)	0
(4) Transferred from separate account	7c(4)	0
(5) Other (specify below)	7c(5)	0
▶		
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	0
(2) Administration charge made by carrier	7e(2)	0
(3) Transferred to separate account	7e(3)	0
(4) Other (specify below)	7e(4)	0
▶		
(5) Total deductions	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	0
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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 KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLBERG KRAVIS ROBERTS & CO. L.P.		D Employer Identification Number (EIN) 13-2857105

Part I

Service Provider Information (see instructions)

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

1

Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786
(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

THOMPSON HINE

34-0575300

(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?
29	LEGAL	278384	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STRATEGIC ADVISERS LLC

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	69117	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

KESTRA ADVISORY SERVICES, LLC

35-2552359

(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?
16	OTHER SERVICES	52250	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

DELOITTE & TOUCHE LLP

13-3891517

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	ACCOUNTING/AUDITOR	44000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65 71	RECORDKEEPER	-880203	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AS SPL SM CAP VAL IS - SS&C GIDS, 2000 CROWN COLONY DRIVE QUINCY, MA 02169		0.15%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BLKRK HI YLD INST - BNY MELLON INV 500 ROSS STREET 15253-4426 PITTSBURGH, PA 53442		0.15%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CALV INTL RSP IDX A - SS&C GIDS, I 2000 CROWN COLONY DRIVE QUINCY, MA 02169		0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COL DIVIDEND INC S - COLUMBIA MGT 430 W 7TH STREET STE 219104 KANSAS CITY, MO 64105	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GS EM MKT EQ INS INV - GOLDMAN SAC 13-5108880	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GS GLB CR FX INC INV - GOLDMAN SAC 13-5108880	0.25%	

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GS STABLE VAL INST3 200 WEST ST NEW YORK, NY 10282	0.25%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HTFD S INTL STK A - HARTFORD ADMIN 41-0679409	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
J H ENTERPRISE T - JANUS HENDERSON 151 DETROIT STREET DENVER, CO 80206	0.35%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
J H VENTURE T - JANUS HENDERSON SE 151 DETROIT STREET DENVER, CO 80206	0.35%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS INTL INTR VAL R3 - MFS SERVICE 04-2865649	0.50%

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

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIM REAL RETURN A - SS&C GLOBAL IN 2000 CROWN COLONY DRIVE QUINCY, MA 02169	0.45%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TCWMW TOT RTN BD ADM - U.S. BANK G 615 EAST MICHIGAN STREET MILWAUKEE, WI 53202	0.50%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AVANTIS US SMALL CAP VALUE FUND 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.04%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BLACKROCK STRATEGIC INCOME OPPRTSI 40 EAST 52ND ST NEW YORK, NY 10022	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BROWN ADVISORY SUSTAIN GROWTH INST 777 E. WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
CLIFFWATER CORPORATELENDING FUND I 4640 ADMIRALTY WAY 11TH FL MARINA DEL REY, CA 90292	0.18%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JOHCM INTERNATIONAL SELECT INSTL 14 RYDER ST RYDER COURT GROUND FL BOSTON, MA 02114	0.10%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PARNASSUS VALUE EQUITY INVESTOR	1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PABRAI WAGONS FUND RETAIL	777 EAST WISCONSIN AVE. MILWAUKEE, WI 53202	0.40%
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation		(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WASATCH EMERGING INDIA FUND	505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN		B Three-digit plan number (PN) ▶ 001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 KOHLBERG KRAVIS ROBERTS & CO. L.P.		D Employer Identification Number (EIN) 13-2857105
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)		
a Name of MTIA, CCT, PSA, or 103-12 IE: SP SMALL CP IND CL C		
b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST		
c EIN-PN 82-6293122-009	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17176947
a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2015 TD INC TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-515	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 59270
a Name of MTIA, CCT, PSA, or 103-12 IE: SP 500 INDEX PL CL C		
b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST		
c EIN-PN 82-6293122-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 229991436
a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2065 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-565	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15906902
a Name of MTIA, CCT, PSA, or 103-12 IE: COL DIV INCOME CAP		
b Name of sponsor of entity listed in (a): AMERIPRISE TRUST COMPANY		
c EIN-PN 87-1854339-090	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 42685301
a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2020 TD INC TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-520	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3351129
a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2040 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-540	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79013923
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule D (Form 5500) 2025 v. 250312		

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2055 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-555	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 99535750

a Name of MTIA, CCT, PSA, or 103-12 IE: C&S US REALTY CT		
b Name of sponsor of entity listed in (a): SEI TRUST COMPANY		
c EIN-PN 46-3411346-064	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5795665

a Name of MTIA, CCT, PSA, or 103-12 IE: FID GROWTH CO POOL A		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-135	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 185558585

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM CORE PLUS CL F		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-052	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15104732

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2010 TD INC TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-510	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1992585

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2025 TD INC TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-525	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19409163

a Name of MTIA, CCT, PSA, or 103-12 IE: SP GLB EXUS IDX CL C		
b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST		
c EIN-PN 82-6293122-005	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13972679

a Name of MTIA, CCT, PSA, or 103-12 IE: GS STABLE VAL INST3		
b Name of sponsor of entity listed in (a): GOLDMAN SACHS TRUST COMPANY NA		
c EIN-PN 13-4166989-025	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8804039

a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM STABLE VALUE		
b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY		
c EIN-PN 04-3159710-202	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7321765

a Name of MTIA, CCT, PSA, or 103-12 IE: SP EM MKT IDX CL C		
b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST		
c EIN-PN 82-6293122-007	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17326814

a Name of MTIA, CCT, PSA, or 103-12 IE: SP MID CAP IDX CL C		
b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST		
c EIN-PN 82-6293122-013	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21411334

a Name of MTIA, CCT, PSA, or 103-12 IE: AB SMALL CAP VALUE 2		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 38-7312963-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3270406

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2030 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-530	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44200244

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2035 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-535	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 48511790

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2045 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-545	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 82553603

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2050 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-550	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 77707510

a Name of MTIA, CCT, PSA, or 103-12 IE: CG 2060 TD TD1		
b Name of sponsor of entity listed in (a): CAPITAL BANK AND TRUST COMPANY		
c EIN-PN 95-6597294-560	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21867384

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE VALUE ACCOUNT		
b Name of sponsor of entity listed in (a): NEW YORK LIFE		
c EIN-PN 13-5582869-125	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6421760

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

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

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

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

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

SCHEDULE H (Form 5500) 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 KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLBERG KRAVIS ROBERTS & CO. L.P.	D Employer Identification Number (EIN) 13-2857105

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	18278
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	2248385
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1702765	4325896
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	144258	358826
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	2621237	6351673
(9) Value of interest in common/collective trusts	1c(9)	388834648	1062528956
(10) Value of interest in pooled separate accounts	1c(10)	0	6421760
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	272898032	115561759
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	666200940	1197815533

Liabilities

1g Benefit claims payable	1g	0	0
1h Operating payables	1h	0	0
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	44403	72781
1k Total liabilities (add all amounts in lines 1g through 1j)	1k	44403	72781

Net Assets

1l Net assets (subtract line 1k from line 1f)	1l	666156537	1197742752
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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)	13681479	
(B) Participants	2a(1)(B)	33923437	
(C) Others (including rollovers)	2a(1)(C)	11028977	
(2) Noncash contributions	2a(2)	0	58633893
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	114129	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	228754	
(F) Other	2b(1)(F)	698	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		343581
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	5220578
(B) Common stock	2b(2)(B)	880	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	5219698	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		5220578
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2534247	144968
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2389279	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		144968
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	-70317
(B) Other	2b(5)(B)	-70317	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-70317

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		71469532
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		46630144
c Other income	2c		41604
d Total income. Add all income amounts in column (b) and enter total	2d		182413983

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	45903274	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		45903274
f Corrective distributions (see instructions)	2f		23223
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	-880553	
(4) IQPA audit fees	2i(4)	51500	
(5) Investment advisory and investment management fees	2i(5)	69117	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	278384	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	93854	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		-387698
j Total expenses. Add all expense amounts in column (b) and enter total	2j		45538799

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		136875184
l Transfers of assets:			
(1) To this plan	2l(1)		394711031
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **DELOITTE & TOUCHE LLP**

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

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		☒	

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

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 KOHLBERG KRAVIS ROBERTS AND CO. 401(K) PROFIT SHARING PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 KOHLBERG KRAVIS ROBERTS & CO. L.P.		D Employer Identification Number (EIN) 13-2857105
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-6568107		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A		
If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____		
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 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)..... b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)..... c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14a 14b 14c	
15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20. a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation: _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☐ Design-based safe harbor method ☐ "Prior year" ADP test ☒ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter <u>06 / 30 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q703906A</u> .	

***Kohlberg Kravis
Roberts & Co. 401(k)
Profit Sharing Plan***

Plan No. 001, EIN: 13-2857105

Independent Auditor's Report

Financial Statements

As of December 31, 2025 and 2024

And for the Year Ended December 31, 2025

Supplemental Schedule

As of December 31, 2025

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

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



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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information

prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Other Matter — Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2025, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Deloitte & Touche LLP

September 10, 2026

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS:		
Participant-directed investments at fair value	\$ 1,189,215,475	\$ 663,579,703
Total Investments	<u>1,189,215,475</u>	<u>663,579,703</u>
Receivables:		
Notes receivable from participants	6,351,673	2,621,237
Employer contribution receivable	<u>2,248,385</u>	<u>-</u>
Total Receivables	<u>8,600,058</u>	<u>2,621,237</u>
TOTAL ASSETS	<u>1,197,815,533</u>	<u>666,200,940</u>
LIABILITIES - Other liabilities	<u>72,781</u>	<u>44,403</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 1,197,742,752</u></u>	<u><u>\$ 666,156,537</u></u>

See notes to financial statements.

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2025

	2025
Contributions:	
Participant contributions	\$ 33,900,214
Rollover contributions	11,028,977
Employer contributions	<u>13,681,479</u>
Total contributions	<u>58,610,670</u>
Investment income:	
Net appreciation in fair value of investments	118,174,327
Dividend income	5,220,578
Interest income	<u>114,827</u>
Net investment income	<u>123,509,732</u>
Other Income:	
Interest on notes receivable from participants	228,754
Revenue credit	<u>41,604</u>
Total other income	<u>270,358</u>
Deductions:	
Benefits paid to participants	45,903,274
Administrative expenses	<u>(387,698)</u>
Total deductions	<u>45,515,576</u>
Increase in net assets before plan transfers	136,875,184
Transfer of assets from Global Atlantic Financial Company 401(k) Plan, net	<u>394,711,031</u>
INCREASE IN NET ASSETS	<u>531,586,215</u>
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	<u>666,156,537</u>
End of year	<u><u>\$ 1,197,742,752</u></u>

See notes to financial statements.

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2025 AND 2024, AND FOR THE YEAR ENDED DECEMBER 31, 2025

1. PLAN DESCRIPTION

The following description of the Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan.

- a. **General** - The Plan was established on December 10, 1982 (effective January 1, 1982) as a defined contribution plan for eligible employees of Kohlberg Kravis Roberts & Co. L.P. (the “Partnership” or “Company”). The Partnership is the Plan’s administrator. An eligible employee may elect to participate in the Plan on the Enrollment Date coinciding with or immediately following the date he or she becomes a Covered Employee. Fidelity Management Trust Company (“FMTC”) serves as trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). Capitalized terms used but not defined herein have the same meanings as in the Plan document.

The participating employers of the Plan are the Company (Kohlberg Kravis Roberts & Co. L.P), KKR Capstone Americas LLC, KKR Credit Advisors (US) LLC, KKR Capital Markets Holding L.P., K-Star Asset Management LLC and effective January 1, 2026, KKR Helix LLC

- b. **Merger:** Effective December 31, 2025, the Global Atlantic Financial Company 401(k) Plan was merged with and into the Plan. As a result of this merger, the Plan’s net assets available for benefits increased by \$394,711,031. This amount includes the employer true-up contributions earned by eligible employees during the period from January 1, 2025 through December 31, 2025 and ultimately funded to the Plan in July 2026.
- c. **Contributions** - Eligible employees may contribute no less than one percent and no more than fifty percent of their eligible compensation up to twenty-five percent of which may be treated as pre-tax 401(k) contributions and up to twenty-five percent of which may be treated as Roth 401(k) contributions subject to the IRS regular limit of \$23,500 in 2025. The amount of After-Tax Contributions made by an Eligible Employee by payroll withholding shall be a percentage, expressed in the increments prescribed by the Administrator, of his Compensation of not less than 1% nor more than a maximum percentage prescribed by the Plan for any group of Eligible Employees in compliance with Internal Revenue Code (“Code”) Section 415 limits, including but not limited to (i) 13%, in the case of any Partner or an Associate, Sr. Analyst or Analyst in Investing & Markets, (ii) 10%, in the case of any Managing Director or a Director or Principal in Investing & Markets and (iii) 8%, in the case of all other Eligible Employees. For the year ended December 31, 2025, participants who attained the age of 50 or older as of the end of the calendar year could elect to make additional “catch-up” contributions of up to \$7,500 (or, if age 60-63, \$11,250) in excess of the limits stated above and any other limits prescribed by law.

Each year, the Partnership may make contributions to the Plan. The Partnership’s contributions consist of a discretionary matching contribution and a discretionary profit sharing contribution. Matching contributions are made for each pay period based on regular participant 401(k) contributions. The maximum contribution amount eligible to be matched is 5% of eligible compensation, which is capped at \$175,000 as defined by the Plan. A Partner and an Associate, Sr. Analyst or Analyst in Investing & Markets are not eligible for the Plan matching contributions. Additional profit-sharing amounts of 5% of eligible compensation up to \$175,000 may be contributed

at the discretion of the Partnership. A Partner, any Managing Director, an Associate, Sr. Analyst or Analyst in Investing & Markets and a Director or Principal in Investing & Markets are not eligible for the Plan profit sharing contribution.

Participant catch-up contributions up to \$7,500 in 2025 (or, if age 60-63, \$11,250) are available for employees who will be at least age 50 by the end of the year on a pre-tax 401(k) and/or Roth 401(k) basis. Catch-up contributions are not eligible for matching. In addition to pre-tax and Roth 401(k) contribution, participants may make after-tax contributions to the plan of 8%, 10% or 13% of eligible compensation. After-tax contributions are not eligible for matching. All contributions are subject to the IRS aggregate contribution limit of \$70,000 in 2025 (excluding catch-up contributions).

The Plan offers participants the ability to “convert” any Plan contribution or account to a Roth account within the Plan, without taking an actual withdrawal, by making a Roth in-plan conversion.

During the year-ended December 31, 2025, the Partnership made a \$8,264,971 matching contribution and a \$5,416,508 profit sharing contribution to the Plan.

- d. **Participant Accounts** - Each participant’s account is credited with the participant’s contribution and allocations of (a) the Partnership’s contributions and (b) Plan earnings and charged with an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.
- e. **Investments** - Participants direct the investment of their contributions into various investment options offered by the Plan. Participants may direct their investments into various registered investment companies, common collective trust, and a self-directed brokerage account option. The self-directed brokerage account includes a variety of mutual funds and money market funds. Partnership contributions are automatically allocated proportionately to the participant directed investments.
- e. **Vesting** - A participant is fully vested in (a) their voluntary contributions and (b) Qualified Nonelective and Qualified Matching contributions (as defined in the Plan document), and any earnings thereon. Vesting for participants with respect to Partnership contributions is based on years of continuous service according to the following schedule:

Years of Service	Cumulative Vesting Percentage
Less than 2	0 %
2	20
3	40
4	60
5	80
6 or more	100

Participants become 100% vested in company matching and profit sharing contribution accounts under the Plan, regardless of years of vesting service, if the participant (1) terminates employment with the Company due to death or becoming disabled or any related employer under IRS rules or (2) are employed with the Company or any related employer under IRS rules on or after the employee’s 65th birthday.

Participants will be 100% vested if they transfer directly from employment prior to January 1, 2026 with the Company or any related employer to employment with Global Atlantic Financial Group Limited or its affiliated employers (“Global Atlantic”). Effective January 1, 2026, participants will be 100% vested in their matching contribution account (but not in their profit sharing contribution account) if they transfer directly from employment during the period from January 1, 2026 through December 31, 2026 with Global Atlantic to employment with the Company or any related employer.

f. **Withdrawals and Payments of Benefits** - Participants are entitled to benefits, withdrawals or payments under the following circumstances:

- 1) **Late Retirement** - If a participant does not retire on the normal retirement date, the participant may continue to participate in the Plan. Contributions made by the Partnership will continue to be allocated to the participant’s Plan account and the participant may elect to receive his or her Plan account balance after the actual date of retirement.
- 2) **Termination of Employment** - A participant who leaves the Partnership for any reason is entitled to receive the full value of his or her voluntary contributions, vested Partnership contributions and any actual earnings thereon.
- 3) **Hardship Withdrawals** - Under the terms of the Plan, a participant may make a withdrawal during employment for reasons of economic hardship. Withdrawals may be made only for immediate and serious financial need, as defined in the Plan document, up to the amount required to meet the immediate need (as increased for applicable taxes or penalties) from the participant’s pre-tax 401(k) contributions (and any Roth in plan conversions thereof) and Roth 401(k) contributions and all earnings thereon.
- 4) **Non-Hardship Withdrawals** – Under the terms of the Plan, a participant who has attained age 59 ½ may make a withdrawal during employment subject to certain limitations and conditions. A withdrawal of rollover contributions may be made without regard to the age of the participant. The Plan also permits various special circumstance withdrawals, including qualified birth or adoption distributions (QBAD), qualified disaster recovery distributions, emergency personal expense withdrawals and domestic abuse withdrawals.
- 5) **Roth Withdrawals and Distributions** – Upon withdrawal or distribution from a participant’s Roth account under the Plan, the Roth 401(k) contribution and Roth conversion amounts will not be taxable for federal and most state income taxes (having already been taxed when converted under the Plan). The earnings in a Roth account will not be taxable, if included in a “qualified distribution,” i.e., as a withdrawal or distribution made from the Plan after both:
 - a. Five tax years beginning with the tax year in which the participant first made:
 - Any Roth 401(k) contributions under the Plan;
 - Any Roth 401(k) contributions to a participant’s previous employer’s 401(k) plan, if the participant made a Roth 401(k) rollover contribution to the Plan; or
 - A Roth in-plan conversion for any contribution or account under the Plan.

AND

- b. The Participant’s age 59 ½, death or disability.

Effective in 2024, all Roth amounts held under the Plan are not subject to required minimum distributions (RMDs) during a participant's lifetime.

- 6) After-Tax Contribution Withdrawals - Participants may withdraw during employment all or any portion of their after-tax contribution Plan account, at any time and for any reason, including their Roth in-plan conversion Plan account attributable to after-tax contributions.
- 7) Required Distribution – The distribution of a participant's vested Plan accounts must be made or begin with annual distributions from a participant's account no later than April 1 following the year the participant attains a required commencement of age 70½, 72, 73 or 75 or, if later, following the year that the participant terminates employment (if not a 5% owner).
- g. Notes receivable from participants - Participants are permitted to borrow from the Plan. Participants may only have two loans outstanding at any time. Participant loans are a minimum of \$1,000 and a maximum of the lesser of (i) \$50,000 reduced by the excess, if any, of the participant's highest outstanding balance of loans from the Plan during the one-year period prior to the date of the loan over the participant's current outstanding balance of loans or (ii) fifty percent of the participant's vested balance. Loans must normally be repaid through payroll deductions over a period of no more than five years. However, if a participant uses the loan to purchase a principal residence, the loan can be repaid over a period of no more than fifteen years.

Loans bear interest at a fixed rate equal to the U.S. prime rate (as reported by Reuters) in effect on the first business day of a month which includes the date a participant applies for a loan +.75%. At December 31, 2025 the interest rates ranged from 3.25% to 9.50% due from 2026 to 2040.

On March 27, 2020, the Coronavirus Aid Relief and Economic Security, or CARES Act, was passed into law. The CARES Act provided immediate and temporary relief for eligible plan participants impacted by the coronavirus (COVID-19) with respect to loans. Under the CARES Act, the limitation on loans was increased to the lesser of \$100,000 or 100% of eligible participant's vested account balance, and loan payments and the loan repayment due dates may be delayed for up to one year. Both of these expired on December 31, 2020. Plan amendments related to CARES Act provisions will be completed by the last date of the 2026 plan year.

- h. Forfeited Accounts - Partnership contributions, which have been forfeited by employees upon termination, are used to offset Plan administrative expenses and/or reduce future Partnership contributions. As of December 31, 2025 and 2024, forfeited nonvested accounts available for Plan use totaled \$185,699 and \$67,059, respectively. During the year ended December 31, 2025, the Plan paid \$349,324 of administrative expenses from forfeited nonvested accounts and \$1,623,217 was used to reduce Partnership contributions.
- i. Administrative Expenses - Administrative expenses of the Plan may be deducted from the participants Plan accounts or paid by the Plan sponsor, as provided in the Plan document. Recordkeeping fees are charged directly to a participant's Plan accounts. Investment management fees for investments are included as a reduction of investment return and are not reflected separately in the statement of changes in net assets available for benefits. The remaining expenses are paid by the Plan and through credits provided by the recordkeeper. The Plan has a revenue-sharing agreement whereby certain investment managers return a portion of the investment fees to the recordkeeper, which are allocated to attributable participant accounts based on the investment option of the investment fees and any remaining amounts are used to offset the Plan's administrative expenses.

- j. **Revenue Credit Account** - FMTC, the Plan trustee, funds quarterly in arrears a calculated Revenue Credit to a suspense account in the Plan (the “Revenue Credit Account”), consisting of principally of net float earnings of the plan for the quarter. The Plan’s administrator may direct the Trustee to use amounts held in the Revenue Credit Account to reimburse the Partnership for or directly pay fees and expenses associated with services provided to the Plan for which payments or allocations are permissible under the Plan and meet the requirements and applicable laws, including ERISA and the Code. Amounts unused for expenses may be allocated to Participant accounts. During the year ended December 31, 2025, revenue credits available for Plan use including dividends of \$205 in the Revenue Credit Account totaled \$43,548. During the year ended December 31, 2025, the Plan paid \$27,604 of expenses from the Revenue Credit Account and allocated \$0 to Participation accounts. As of December 31, 2025 and 2024, the balance remaining in the Revenue Credit Account totaled \$159,864 and \$1,739, respectively.

Beginning July 1, 2024, the quarterly administrative expenses per participant accounts were reduced from \$20.00 to \$17.75 each calendar quarter in arrears. Participants also pay administrative costs for loans, distributions and qualified domestic relation orders. Quarterly revenue credits are also allocated to the Participants depending on the investment options in which they are invested. During the year ended December 31, 2025, FMTC allocated \$207,355 of expenses and \$1,054,183 of revenue credits to Participant accounts.

- k. **Distribution of “Excess Deferrals”** - Amounts payable to participants for contributions in excess of amounts allowed by the Code are recorded as a liability with a corresponding reduction to contributions. At December 31, 2025 and 2024, \$19,157 and \$403 of excess deferrals are included in other liabilities in the statements of net assets available for benefits. The Plan distributed the 2024 excess deferrals of \$403 to the respective participants before April 15, 2025. The Plan distributed the 2025 excess deferrals of \$19,157 to the respective participants before April 15, 2026.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the Plan’s significant accounting policies is as follows:

Basis of Accounting - The financial statements of the Plan are prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Investments Valuation and Income Recognition - The Plan’s investments are stated at fair value. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of the shares held by the Plan at year end. Money held in a short-term money market account is valued at cost plus accrued interest. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. Net appreciation/(depreciation) includes the Plan’s gains and losses on investments bought and sold as well as held during the year.

Notes receivable from participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participants loans are recorded as distributions based on the terms of the Plan document. As of December 31, 2025, participants loans have maturities through 2040 at interest rates ranging from 3.25 to 9.50 percent.

Payment of Benefits - Benefits are recorded when paid. There were no amounts allocated to participants who withdrew from the Plan, but have not yet been paid at December 31, 2025 and 2024.

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

changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan provides for various investment options in common stocks, a money market fund, a guaranteed interest account, common collective trust, and in registered investment companies which invest in combinations of stocks, bonds, fixed income securities, mutual funds, and other investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that such changes could materially affect participants' account balances and the amounts reported in the financial statements.

Subsequent Events - Subsequent events were evaluated through September 10, 2026, the date the financial statements were available to be issued. No events occurred that require additional disclosure or adjustments to the Plan's financial statements.

3. FAIR VALUE MEASUREMENTS

ASC 820, *Fair Value Measurement*, established a single authoritative definition of fair value, set a framework for measuring fair value, and requires additional disclosures about fair value measurements. In accordance with ASC 820, the Plan classifies its investments into Level 1, which refers to securities valued using quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to securities valued based on significant unobservable inputs. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The following tables set forth by level within the fair value hierarchy a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2025 and 2024.

	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2025 Total
Registered Investment Companies				
Equity Funds	\$ 80,243,876	\$ -	\$ -	\$ 80,243,876
Fixed Income Funds	24,243,743	-	-	24,243,743
Total Registered Investment Companies	\$ 104,487,619	\$ -	\$ -	\$ 104,487,619
Brokerage Link	15,777,140	-	-	15,777,140
Common Collective Trust				1,062,528,956
Insurance Company General Account				6,421,760
Total Investments				\$ 1,189,215,475

	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2024 Total
Registered Investment Companies				
Equity Funds	\$ 239,043,992	\$ -	\$ -	\$ 239,043,992
Fixed Income Funds	25,413,752	-	-	25,413,752
Total Registered Investment Companies	\$ 264,457,744	\$ -	\$ -	\$ 264,457,744
Brokerage Link	10,287,311	-	-	10,287,311
Common Collective Trust				388,834,648
Insurance Company General Account				-
Total Investments				\$ 663,579,703

The valuation methods described in Note 2 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Common Collective Trust and Insurance Company Separate Account amounts in the table above include stable value funds, all of which invest in benefit-responsive investment contracts ("Stable Value Contract") and are valued at the net asset value of units of the collective trust or separate account. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require 12 months' notification in order to confirm that securities liquidations will be carried out in an orderly business manner. The fund permits redemptions on a daily basis, and there are no restrictions on participant directed redemptions. As of December 31, 2025 and 2024, there were no unfunded commitments.

4. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of registered investment companies or interests in a collective investment trust managed by FMTC, the Plan trustee, or one or more affiliates thereof; and; therefore, transactions of these shares or interests constitutes party-in-interest transactions. Investments in such party-in-interest transactions as of December 31, 2025 and 2024, totaled \$193,142,147 and \$124,081,814, respectively. During the year ended December 31, 2025, these investments recorded net appreciation of investments and dividend and interest income of \$29,205,855. Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund.

FMTC funds quarterly in arrears a calculated Revenue Credit to a suspense account in the Plan (the "Revenue Credit Account"). As disclosed in Note 1, during the year ended December 31, 2025, revenue credits available for Plan use in the Revenue Credit Account totaled \$43,548.

The Plan issues loans to participants, which are secured by vested balances in the participants' accounts. Certain administrative functions are performed by the officers and employees of the Partnership (who may also be participants in the Plan) at no cost to the Plan. These transactions are not deemed prohibited party-in-interest transactions, because they are covered by statutory or administrative exemptions from the Code and ERISA's rules on prohibited transactions.

5. CERTIFIED INVESTMENT INFORMATION

The following is a summary of the information regarding the Plan as of December 31, 2025 and 2024, and for the year ended December 31, 2025, included in the Plan's financial statements and supplemental schedule, that was derived from information prepared by FMTC, and furnished to the Plan administrator. The Plan administrator has obtained certifications from FMTC that such information is complete and accurate.

	2025	2024
Statements of Net Assets Available for Benefits		
Investments:		
Participant-directed investments at fair value	\$ 1,189,215,475	\$ 663,579,703
Notes receivable from participants	\$ 6,351,673	\$ 2,621,237

Statement of Changes in Net Assets Available for Benefits

Investment income:	
Dividend income	\$ 5,220,578
Interest income	\$ 114,827
Net appreciation in fair value of investments	\$ 118,174,327
Interest on notes receivable from participants	\$ 228,754

All investment balances and information are included in the supplemental schedule of assets (held at end of year) and in Note 3 with the exception of the designation of such investments as Level 1, Level 2 or Level 3, which is included in Note 3, Fair Value Measurements.

6. FEDERAL INCOME TAX STATUS OF THE PLAN

The Internal Revenue Service (“IRS”) has determined and informed the Partnership by letter dated September 21, 2022, that the Plan and related trust were designed in accordance with the applicable sections of the Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator and the Plan’s tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code. Therefore, no provision for income taxes has been included in the Plan’s financial statements.

7. PLAN TERMINATION

Although it has not expressed an intent to do so, the Partnership has the right under the Plan to terminate the Plan or to discontinue contributions at any time, subject to the provisions set forth in ERISA. In the event of termination, partial termination or complete discontinuance of contributions under the Plan, the interests of all affected participants shall be fully vested and nonforfeitable to the extent then funded.

* * * * *

SUPPLEMENTAL SCHEDULE

KOHLBERG KRAVIS ROBERTS & CO. 401(k)
PROFIT SHARING PLAN

Plan Number: 001

Employer Tax Identification Number: 13-2857105

FORM 5500, SCHEDULE H, PART IV, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
as of December 31, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost **	Current Value
Investments:				
*	Spartan****	SP 500 Index PL CL C, 707970.935shares	\$	229,991,436
*	Fidelity****	FID GROWTH CO POOL A, 2092215.412shares		185,558,585
	Capital Group****	CG 2055 TD TD1, 6140391.712shares		99,535,750
	Capital Group****	CG 2045 TD TD1, 5130739.751shares		82,553,603
	Capital Group****	CG 2040 TD TD1, 4969429.124shares		79,013,923
	Capital Group****	CG 2050 TD TD1, 4814591.689shares		77,707,510
	Capital Group****	CG 2035 TD TD1, 3176934.521shares		48,511,790
	Capital Group****	CG 2030 TD TD1, 2988522.278shares		44,200,244
	Ameriprise****	COL DIV INCOME CAP, 3632791.549shares		42,685,301
	Hartford Mutual Funds	HTFD S INTL STK SDR, 1609356.638shares		34,810,384
	Capital Group****	CG 2060 TD TD1, 1348174.114shares		21,867,384
	John Hancock	John Hancock Disciplined Value Mid Cap I Fund R6, 780532.37shares		21,433,419
*	Spartan****	SP Mid Cap Index CL C, 155888.852shares		21,411,334
	Capital Group****	CG 2025 TD INC TD1, 1349733.147shares		19,409,163
*	Spartan****	SP EM MKT IDX CL C, 107260.21shares		17,326,814
*	Spartan****	SP Small Cap Index CL C, 99357.627shares		17,176,947
	Janus Henderson	J H ENTERPRISE N, 113941.25shares		16,441,722
	Capital Group****	CG 2065 TD INC TD1, 980696.802shares		15,906,902
*	Fidelity***	Fidelity Brokeragelink, 15777129.99shares		15,777,140
*	Fidelity****	FIAM CORE PLUS CL F, 612768.036shares		15,104,732
*	Spartan****	SP GLB EXUS IDX CL C, 75121.929shares		13,972,679
	BlackRock	BLK RK HIGH YLD K, 1720086.298shares		12,436,224
	Goldman Sachs****	Goldman Sachs Stable Value Inst3 Funds, 8804038.7shares		8,804,039
*	Fidelity	FID US BOND IDX, 718140.331shares		7,583,562
	Janus Henderson	J H Venture N, 85106.977shares		7,558,351
	Putnam Fiduciary ****	PUTNAM STABLE VALUE, 7321765.16shares		7,321,765
	New York Life Insurance Co	Stable Value Account, 6419634.99shares		6,421,760
	SEI Trust Company****	C&S US REALTY CT, 264642.235shares		5,795,665
	PIMCO	PIM REAL RETURN INST, 407324.733shares		4,223,957
	Capital Group****	CG 2020 TD INC TD1, 234672.887shares		3,351,129
	Great Gray Trust Co.****	AB SMALL CAP VALUE 2, 334144.486shares		3,270,406
	Capital Group****	CG 2010 TD INC TD1, 142531.141shares		1,992,585
	Capital Group****	CG 2015 TD INC TD1, 4209.51shares		59,270
		Investments held by FMTC		1,189,215,475
*	Participants	Notes receivable from participants, 3.25% to 9.50% due 2026 to 2040		6,351,673
		Total Investments	\$	1,195,567,148

Note

* Denotes a party-in-interest

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

*** Denotes Participants self-directed brokerage account

**** Denotes a Common Collective Trust

See accompanying Independent Auditor's Report

***Kohlberg Kravis
Roberts & Co. 401(k)
Profit Sharing Plan***

Plan No. 001, EIN: 13-2857105

Independent Auditor's Report

Financial Statements

As of December 31, 2025 and 2024

And for the Year Ended December 31, 2025

Supplemental Schedule

As of December 31, 2025

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

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

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of the
Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information

prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Other Matter — Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2025, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Deloitte & Touche LLP

September 10, 2026

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS:		
Participant-directed investments at fair value	\$ 1,189,215,475	\$ 663,579,703
Total Investments	<u>1,189,215,475</u>	<u>663,579,703</u>
Receivables:		
Notes receivable from participants	6,351,673	2,621,237
Employer contribution receivable	<u>2,248,385</u>	<u>-</u>
Total Receivables	<u>8,600,058</u>	<u>2,621,237</u>
TOTAL ASSETS	<u>1,197,815,533</u>	<u>666,200,940</u>
LIABILITIES - Other liabilities	<u>72,781</u>	<u>44,403</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 1,197,742,752</u>	<u>\$ 666,156,537</u>

See notes to financial statements.

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2025

	2025
Contributions:	
Participant contributions	\$ 33,900,214
Rollover contributions	11,028,977
Employer contributions	<u>13,681,479</u>
Total contributions	<u>58,610,670</u>
Investment income:	
Net appreciation in fair value of investments	118,174,327
Dividend income	5,220,578
Interest income	<u>114,827</u>
Net investment income	<u>123,509,732</u>
Other Income:	
Interest on notes receivable from participants	228,754
Revenue credit	<u>41,604</u>
Total other income	<u>270,358</u>
Deductions:	
Benefits paid to participants	45,903,274
Administrative expenses	<u>(387,698)</u>
Total deductions	<u>45,515,576</u>
Increase in net assets before plan transfers	136,875,184
Transfer of assets from Global Atlantic Financial Company 401(k) Plan, net	<u>394,711,031</u>
INCREASE IN NET ASSETS	<u>531,586,215</u>
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	<u>666,156,537</u>
End of year	<u>\$ 1,197,742,752</u>

See notes to financial statements.

KOHLBERG KRAVIS ROBERTS & CO. 401(k) PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2025 AND 2024, AND FOR THE YEAR ENDED DECEMBER 31, 2025

1. PLAN DESCRIPTION

The following description of the Kohlberg Kravis Roberts & Co. 401(k) Profit Sharing Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan.

- a. **General** - The Plan was established on December 10, 1982 (effective January 1, 1982) as a defined contribution plan for eligible employees of Kohlberg Kravis Roberts & Co. L.P. (the “Partnership” or “Company”). The Partnership is the Plan’s administrator. An eligible employee may elect to participate in the Plan on the Enrollment Date coinciding with or immediately following the date he or she becomes a Covered Employee. Fidelity Management Trust Company (“FMTC”) serves as trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). Capitalized terms used but not defined herein have the same meanings as in the Plan document.

The participating employers of the Plan are the Company (Kohlberg Kravis Roberts & Co. L.P), KKR Capstone Americas LLC, KKR Credit Advisors (US) LLC, KKR Capital Markets Holding L.P., K-Star Asset Management LLC and effective January 1, 2026, KKR Helix LLC

- b. **Merger:** Effective December 31, 2025, the Global Atlantic Financial Company 401(k) Plan was merged with and into the Plan. As a result of this merger, the Plan’s net assets available for benefits increased by \$394,711,031. This amount includes the employer true-up contributions earned by eligible employees during the period from January 1, 2025 through December 31, 2025 and ultimately funded to the Plan in July 2026.
- c. **Contributions** - Eligible employees may contribute no less than one percent and no more than fifty percent of their eligible compensation up to twenty-five percent of which may be treated as pre-tax 401(k) contributions and up to twenty-five percent of which may be treated as Roth 401(k) contributions subject to the IRS regular limit of \$23,500 in 2025. The amount of After-Tax Contributions made by an Eligible Employee by payroll withholding shall be a percentage, expressed in the increments prescribed by the Administrator, of his Compensation of not less than 1% nor more than a maximum percentage prescribed by the Plan for any group of Eligible Employees in compliance with Internal Revenue Code (“Code”) Section 415 limits, including but not limited to (i) 13%, in the case of any Partner or an Associate, Sr. Analyst or Analyst in Investing & Markets, (ii) 10%, in the case of any Managing Director or a Director or Principal in Investing & Markets and (iii) 8%, in the case of all other Eligible Employees. For the year ended December 31, 2025, participants who attained the age of 50 or older as of the end of the calendar year could elect to make additional “catch-up” contributions of up to \$7,500 (or, if age 60-63, \$11,250) in excess of the limits stated above and any other limits prescribed by law.

Each year, the Partnership may make contributions to the Plan. The Partnership’s contributions consist of a discretionary matching contribution and a discretionary profit sharing contribution. Matching contributions are made for each pay period based on regular participant 401(k) contributions. The maximum contribution amount eligible to be matched is 5% of eligible compensation, which is capped at \$175,000 as defined by the Plan. A Partner and an Associate, Sr. Analyst or Analyst in Investing & Markets are not eligible for the Plan matching contributions. Additional profit-sharing amounts of 5% of eligible compensation up to \$175,000 may be contributed

at the discretion of the Partnership. A Partner, any Managing Director, an Associate, Sr. Analyst or Analyst in Investing & Markets and a Director or Principal in Investing & Markets are not eligible for the Plan profit sharing contribution.

Participant catch-up contributions up to \$7,500 in 2025 (or, if age 60-63, \$11,250) are available for employees who will be at least age 50 by the end of the year on a pre-tax 401(k) and/or Roth 401(k) basis. Catch-up contributions are not eligible for matching. In addition to pre-tax and Roth 401(k) contribution, participants may make after-tax contributions to the plan of 8%, 10% or 13% of eligible compensation. After-tax contributions are not eligible for matching. All contributions are subject to the IRS aggregate contribution limit of \$70,000 in 2025 (excluding catch-up contributions).

The Plan offers participants the ability to “convert” any Plan contribution or account to a Roth account within the Plan, without taking an actual withdrawal, by making a Roth in-plan conversion.

During the year-ended December 31, 2025, the Partnership made a \$8,264,971 matching contribution and a \$5,416,508 profit sharing contribution to the Plan.

- d. **Participant Accounts** - Each participant’s account is credited with the participant’s contribution and allocations of (a) the Partnership’s contributions and (b) Plan earnings and charged with an allocation of Plan losses and administrative expenses. Allocations are based on participant earnings or account balances. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.
- e. **Investments** - Participants direct the investment of their contributions into various investment options offered by the Plan. Participants may direct their investments into various registered investment companies, common collective trust, and a self-directed brokerage account option. The self-directed brokerage account includes a variety of mutual funds and money market funds. Partnership contributions are automatically allocated proportionately to the participant directed investments.
- e. **Vesting** - A participant is fully vested in (a) their voluntary contributions and (b) Qualified Nonelective and Qualified Matching contributions (as defined in the Plan document), and any earnings thereon. Vesting for participants with respect to Partnership contributions is based on years of continuous service according to the following schedule:

Years of Service	Cumulative Vesting Percentage
Less than 2	0 %
2	20
3	40
4	60
5	80
6 or more	100

Participants become 100% vested in company matching and profit sharing contribution accounts under the Plan, regardless of years of vesting service, if the participant (1) terminates employment with the Company due to death or becoming disabled or any related employer under IRS rules or (2) are employed with the Company or any related employer under IRS rules on or after the employee’s 65th birthday.

Participants will be 100% vested if they transfer directly from employment prior to January 1, 2026 with the Company or any related employer to employment with Global Atlantic Financial Group Limited or its affiliated employers (“Global Atlantic”). Effective January 1, 2026, participants will be 100% vested in their matching contribution account (but not in their profit sharing contribution account) if they transfer directly from employment during the period from January 1, 2026 through December 31, 2026 with Global Atlantic to employment with the Company or any related employer.

f. **Withdrawals and Payments of Benefits** - Participants are entitled to benefits, withdrawals or payments under the following circumstances:

- 1) **Late Retirement** - If a participant does not retire on the normal retirement date, the participant may continue to participate in the Plan. Contributions made by the Partnership will continue to be allocated to the participant’s Plan account and the participant may elect to receive his or her Plan account balance after the actual date of retirement.
- 2) **Termination of Employment** - A participant who leaves the Partnership for any reason is entitled to receive the full value of his or her voluntary contributions, vested Partnership contributions and any actual earnings thereon.
- 3) **Hardship Withdrawals** - Under the terms of the Plan, a participant may make a withdrawal during employment for reasons of economic hardship. Withdrawals may be made only for immediate and serious financial need, as defined in the Plan document, up to the amount required to meet the immediate need (as increased for applicable taxes or penalties) from the participant’s pre-tax 401(k) contributions (and any Roth in plan conversions thereof) and Roth 401(k) contributions and all earnings thereon.
- 4) **Non-Hardship Withdrawals** – Under the terms of the Plan, a participant who has attained age 59 ½ may make a withdrawal during employment subject to certain limitations and conditions. A withdrawal of rollover contributions may be made without regard to the age of the participant. The Plan also permits various special circumstance withdrawals, including qualified birth or adoption distributions (QBAD), qualified disaster recovery distributions, emergency personal expense withdrawals and domestic abuse withdrawals.
- 5) **Roth Withdrawals and Distributions** – Upon withdrawal or distribution from a participant’s Roth account under the Plan, the Roth 401(k) contribution and Roth conversion amounts will not be taxable for federal and most state income taxes (having already been taxed when converted under the Plan). The earnings in a Roth account will not be taxable, if included in a “qualified distribution,” i.e., as a withdrawal or distribution made from the Plan after both:
 - a. Five tax years beginning with the tax year in which the participant first made:
 - Any Roth 401(k) contributions under the Plan;
 - Any Roth 401(k) contributions to a participant’s previous employer’s 401(k) plan, if the participant made a Roth 401(k) rollover contribution to the Plan; or
 - A Roth in-plan conversion for any contribution or account under the Plan.

AND

- b. The Participant’s age 59 ½, death or disability.

Effective in 2024, all Roth amounts held under the Plan are not subject to required minimum distributions (RMDs) during a participant's lifetime.

- 6) After-Tax Contribution Withdrawals - Participants may withdraw during employment all or any portion of their after-tax contribution Plan account, at any time and for any reason, including their Roth in-plan conversion Plan account attributable to after-tax contributions.
- 7) Required Distribution – The distribution of a participant's vested Plan accounts must be made or begin with annual distributions from a participant's account no later than April 1 following the year the participant attains a required commencement of age 70½, 72, 73 or 75 or, if later, following the year that the participant terminates employment (if not a 5% owner).
- g. Notes receivable from participants - Participants are permitted to borrow from the Plan. Participants may only have two loans outstanding at any time. Participant loans are a minimum of \$1,000 and a maximum of the lesser of (i) \$50,000 reduced by the excess, if any, of the participant's highest outstanding balance of loans from the Plan during the one-year period prior to the date of the loan over the participant's current outstanding balance of loans or (ii) fifty percent of the participant's vested balance. Loans must normally be repaid through payroll deductions over a period of no more than five years. However, if a participant uses the loan to purchase a principal residence, the loan can be repaid over a period of no more than fifteen years.

Loans bear interest at a fixed rate equal to the U.S. prime rate (as reported by Reuters) in effect on the first business day of a month which includes the date a participant applies for a loan +.75%. At December 31, 2025 the interest rates ranged from 3.25% to 9.50% due from 2026 to 2040.

On March 27, 2020, the Coronavirus Aid Relief and Economic Security, or CARES Act, was passed into law. The CARES Act provided immediate and temporary relief for eligible plan participants impacted by the coronavirus (COVID-19) with respect to loans. Under the CARES Act, the limitation on loans was increased to the lesser of \$100,000 or 100% of eligible participant's vested account balance, and loan payments and the loan repayment due dates may be delayed for up to one year. Both of these expired on December 31, 2020. Plan amendments related to CARES Act provisions will be completed by the last date of the 2026 plan year.
- h. Forfeited Accounts - Partnership contributions, which have been forfeited by employees upon termination, are used to offset Plan administrative expenses and/or reduce future Partnership contributions. As of December 31, 2025 and 2024, forfeited nonvested accounts available for Plan use totaled \$185,699 and \$67,059, respectively. During the year ended December 31, 2025, the Plan paid \$349,324 of administrative expenses from forfeited nonvested accounts and \$1,623,217 was used to reduce Partnership contributions.
- i. Administrative Expenses - Administrative expenses of the Plan may be deducted from the participants Plan accounts or paid by the Plan sponsor, as provided in the Plan document. Recordkeeping fees are charged directly to a participant's Plan accounts. Investment management fees for investments are included as a reduction of investment return and are not reflected separately in the statement of changes in net assets available for benefits. The remaining expenses are paid by the Plan and through credits provided by the recordkeeper. The Plan has a revenue-sharing agreement whereby certain investment managers return a portion of the investment fees to the recordkeeper, which are allocated to attributable participant accounts based on the investment option of the investment fees and any remaining amounts are used to offset the Plan's administrative expenses.

- j. **Revenue Credit Account** - FMTC, the Plan trustee, funds quarterly in arrears a calculated Revenue Credit to a suspense account in the Plan (the “Revenue Credit Account”), consisting of principally of net float earnings of the plan for the quarter. The Plan’s administrator may direct the Trustee to use amounts held in the Revenue Credit Account to reimburse the Partnership for or directly pay fees and expenses associated with services provided to the Plan for which payments or allocations are permissible under the Plan and meet the requirements and applicable laws, including ERISA and the Code. Amounts unused for expenses may be allocated to Participant accounts. During the year ended December 31, 2025, revenue credits available for Plan use including dividends of \$205 in the Revenue Credit Account totaled \$43,548. During the year ended December 31, 2025, the Plan paid \$27,604 of expenses from the Revenue Credit Account and allocated \$0 to Participation accounts. As of December 31, 2025 and 2024, the balance remaining in the Revenue Credit Account totaled \$159,864 and \$1,739, respectively.

Beginning July 1, 2024, the quarterly administrative expenses per participant accounts were reduced from \$20.00 to \$17.75 each calendar quarter in arrears. Participants also pay administrative costs for loans, distributions and qualified domestic relation orders. Quarterly revenue credits are also allocated to the Participants depending on the investment options in which they are invested. During the year ended December 31, 2025, FMTC allocated \$207,355 of expenses and \$1,054,183 of revenue credits to Participant accounts.

- k. **Distribution of “Excess Deferrals”** - Amounts payable to participants for contributions in excess of amounts allowed by the Code are recorded as a liability with a corresponding reduction to contributions. At December 31, 2025 and 2024, \$19,157 and \$403 of excess deferrals are included in other liabilities in the statements of net assets available for benefits. The Plan distributed the 2024 excess deferrals of \$403 to the respective participants before April 15, 2025. The Plan distributed the 2025 excess deferrals of \$19,157 to the respective participants before April 15, 2026.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of the Plan’s significant accounting policies is as follows:

Basis of Accounting - The financial statements of the Plan are prepared in accordance with accounting principles generally accepted in the United States of America (GAAP).

Investments Valuation and Income Recognition - The Plan’s investments are stated at fair value. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value of the shares held by the Plan at year end. Money held in a short-term money market account is valued at cost plus accrued interest. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned. Dividends are recorded on the ex-dividend date. Net appreciation/(depreciation) includes the Plan’s gains and losses on investments bought and sold as well as held during the year.

Notes receivable from participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participants loans are recorded as distributions based on the terms of the Plan document. As of December 31, 2025, participants loans have maturities through 2040 at interest rates ranging from 3.25 to 9.50 percent.

Payment of Benefits - Benefits are recorded when paid. There were no amounts allocated to participants who withdrew from the Plan, but have not yet been paid at December 31, 2025 and 2024.

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

changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan provides for various investment options in common stocks, a money market fund, a guaranteed interest account, common collective trust, and in registered investment companies which invest in combinations of stocks, bonds, fixed income securities, mutual funds, and other investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that such changes could materially affect participants' account balances and the amounts reported in the financial statements.

Subsequent Events - Subsequent events were evaluated through September 10, 2026, the date the financial statements were available to be issued. No events occurred that require additional disclosure or adjustments to the Plan's financial statements.

3. FAIR VALUE MEASUREMENTS

ASC 820, *Fair Value Measurement*, established a single authoritative definition of fair value, set a framework for measuring fair value, and requires additional disclosures about fair value measurements. In accordance with ASC 820, the Plan classifies its investments into Level 1, which refers to securities valued using quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to securities valued based on significant unobservable inputs. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement. The following tables set forth by level within the fair value hierarchy a summary of the Plan's investments measured at fair value on a recurring basis at December 31, 2025 and 2024.

	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2025 Total
Registered Investment Companies				
Equity Funds	\$ 80,243,876	\$ -	\$ -	\$ 80,243,876
Fixed Income Funds	24,243,743	-	-	24,243,743
Total Registered Investment Companies	\$ 104,487,619	\$ -	\$ -	\$ 104,487,619
Brokerage Link	15,777,140	-	-	15,777,140
Common Collective Trust				1,062,528,956
Insurance Company General Account				6,421,760
Total Investments				\$ 1,189,215,475

	Active Markets for Identical Assets (Level 1)	Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	2024 Total
Registered Investment Companies				
Equity Funds	\$ 239,043,992	\$ -	\$ -	\$ 239,043,992
Fixed Income Funds	25,413,752	-	-	25,413,752
Total Registered Investment Companies	\$ 264,457,744	\$ -	\$ -	\$ 264,457,744
Brokerage Link	10,287,311	-	-	10,287,311
Common Collective Trust				388,834,648
Insurance Company General Account				-
Total Investments				\$ 663,579,703

The valuation methods described in Note 2 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Common Collective Trust and Insurance Company Separate Account amounts in the table above include stable value funds, all of which invest in benefit-responsive investment contracts ("Stable Value Contract") and are valued at the net asset value of units of the collective trust or separate account. The net asset value is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported net asset value. Participant transactions (purchases and sales) may occur daily. If the Plan initiates a full redemption of the collective trust, the issuer reserves the right to require 12 months' notification in order to confirm that securities liquidations will be carried out in an orderly business manner. The fund permits redemptions on a daily basis, and there are no restrictions on participant directed redemptions. As of December 31, 2025 and 2024, there were no unfunded commitments.

4. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of registered investment companies or interests in a collective investment trust managed by FMTC, the Plan trustee, or one or more affiliates thereof; and; therefore, transactions of these shares or interests constitutes party-in-interest transactions. Investments in such party-in-interest transactions as of December 31, 2025 and 2024, totaled \$193,142,147 and \$124,081,814, respectively. During the year ended December 31, 2025, these investments recorded net appreciation of investments and dividend and interest income of \$29,205,855. Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund.

FMTC funds quarterly in arrears a calculated Revenue Credit to a suspense account in the Plan (the "Revenue Credit Account"). As disclosed in Note 1, during the year ended December 31, 2025, revenue credits available for Plan use in the Revenue Credit Account totaled \$43,548.

The Plan issues loans to participants, which are secured by vested balances in the participants' accounts. Certain administrative functions are performed by the officers and employees of the Partnership (who may also be participants in the Plan) at no cost to the Plan. These transactions are not deemed prohibited party-in-interest transactions, because they are covered by statutory or administrative exemptions from the Code and ERISA's rules on prohibited transactions.

5. CERTIFIED INVESTMENT INFORMATION

The following is a summary of the information regarding the Plan as of December 31, 2025 and 2024, and for the year ended December 31, 2025, included in the Plan's financial statements and supplemental schedule, that was derived from information prepared by FMTC, and furnished to the Plan administrator. The Plan administrator has obtained certifications from FMTC that such information is complete and accurate.

	2025	2024
Statements of Net Assets Available for Benefits		
Investments:		
Participant-directed investments at fair value	\$ 1,189,215,475	\$ 663,579,703
Notes receivable from participants	\$ 6,351,673	\$ 2,621,237

Statement of Changes in Net Assets Available for Benefits

Investment income:	
Dividend income	\$ 5,220,578
Interest income	\$ 114,827
Net appreciation in fair value of investments	\$ 118,174,327
Interest on notes receivable from participants	\$ 228,754

All investment balances and information are included in the supplemental schedule of assets (held at end of year) and in Note 3 with the exception of the designation of such investments as Level 1, Level 2 or Level 3, which is included in Note 3, Fair Value Measurements.

6. FEDERAL INCOME TAX STATUS OF THE PLAN

The Internal Revenue Service (“IRS”) has determined and informed the Partnership by letter dated September 21, 2022, that the Plan and related trust were designed in accordance with the applicable sections of the Code. The Plan has been amended since receiving the determination letter. However, the Plan Administrator and the Plan’s tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code. Therefore, no provision for income taxes has been included in the Plan’s financial statements.

7. PLAN TERMINATION

Although it has not expressed an intent to do so, the Partnership has the right under the Plan to terminate the Plan or to discontinue contributions at any time, subject to the provisions set forth in ERISA. In the event of termination, partial termination or complete discontinuance of contributions under the Plan, the interests of all affected participants shall be fully vested and nonforfeitable to the extent then funded.

* * * * *

SUPPLEMENTAL SCHEDULE

KOHLBERG KRAVIS ROBERTS & CO. 401(k)
PROFIT SHARING PLAN

Plan Number: 001

Employer Tax Identification Number: 13-2857105

FORM 5500, SCHEDULE H, PART IV, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
as of December 31, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, and Par or Maturity Value	Cost **	Current Value
Investments:				
*	Spartan****	SP 500 Index PL CL C, 707970.935shares	\$	229,991,436
*	Fidelity****	FID GROWTH CO POOL A, 2092215.412shares		185,558,585
	Capital Group****	CG 2055 TD TD1, 6140391.712shares		99,535,750
	Capital Group****	CG 2045 TD TD1, 5130739.751shares		82,553,603
	Capital Group****	CG 2040 TD TD1, 4969429.124shares		79,013,923
	Capital Group****	CG 2050 TD TD1, 4814591.689shares		77,707,510
	Capital Group****	CG 2035 TD TD1, 3176934.521shares		48,511,790
	Capital Group****	CG 2030 TD TD1, 2988522.278shares		44,200,244
	Ameriprise****	COL DIV INCOME CAP, 3632791.549shares		42,685,301
	Hartford Mutual Funds	HTFD S INTL STK SDR, 1609356.638shares		34,810,384
	Capital Group****	CG 2060 TD TD1, 1348174.114shares		21,867,384
	John Hancock	John Hancock Disciplined Value Mid Cap I Fund R6, 780532.37shares		21,433,419
*	Spartan****	SP Mid Cap Index CL C, 155888.852shares		21,411,334
	Capital Group****	CG 2025 TD INC TD1, 1349733.147shares		19,409,163
*	Spartan****	SP EM MKT IDX CL C, 107260.21shares		17,326,814
*	Spartan****	SP Small Cap Index CL C, 99357.627shares		17,176,947
	Janus Henderson	J H ENTERPRISE N, 113941.25shares		16,441,722
	Capital Group****	CG 2065 TD INC TD1, 980696.802shares		15,906,902
*	Fidelity***	Fidelity Brokeragelink, 15777129.99shares		15,777,140
*	Fidelity****	FIAM CORE PLUS CL F, 612768.036shares		15,104,732
*	Spartan****	SP GLB EXUS IDX CL C, 75121.929shares		13,972,679
	BlackRock	BLK RK HIGH YLD K, 1720086.298shares		12,436,224
	Goldman Sachs****	Goldman Sachs Stable Value Inst3 Funds, 8804038.7shares		8,804,039
*	Fidelity	FID US BOND IDX, 718140.331shares		7,583,562
	Janus Henderson	J H Venture N, 85106.977shares		7,558,351
	Putnam Fiduciary ****	PUTNAM STABLE VALUE, 7321765.16shares		7,321,765
	New York Life Insurance Co	Stable Value Account, 6419634.99shares		6,421,760
	SEI Trust Company****	C&S US REALTY CT, 264642.235shares		5,795,665
	PIMCO	PIM REAL RETURN INST, 407324.733shares		4,223,957
	Capital Group****	CG 2020 TD INC TD1, 234672.887shares		3,351,129
	Great Gray Trust Co.****	AB SMALL CAP VALUE 2, 334144.486shares		3,270,406
	Capital Group****	CG 2010 TD INC TD1, 142531.141shares		1,992,585
	Capital Group****	CG 2015 TD INC TD1, 4209.51shares		59,270
		Investments held by FMTC		1,189,215,475
*	Participants	Notes receivable from participants, 3.25% to 9.50% due 2026 to 2040		6,351,673
		Total Investments	\$	1,195,567,148

Note

* Denotes a party-in-interest

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

*** Denotes Participants self-directed brokerage account

**** Denotes a Common Collective Trust

See accompanying Independent Auditor's Report