Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 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.)
- [X] 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:
- [X] 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
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 02/01/1969

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)
WEIL, GOTSHAL & MANGES LLP

PAUL WESSEL

767 FIFTH AVE
NEW YORK, NY 10153-0119

2b Employer Identification Number (EIN)
13-1456110

2c Plan Sponsor's telephone number
212-310-8000

2d Business code (see instructions)
541110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/07/2026	PAUL WESSEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	1956
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	329
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	307
b	Retired or separated participants receiving benefits	**6b**	834
c	Other retired or separated participants entitled to future benefits	**6c**	739
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1880
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	44
f	Total. Add lines **6d** and **6e**.	**6f**	1924
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

1A 1I 3F

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
WEIL, GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	121871601
b Actuarial value	**2b**	121871601

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	864	67314220	67314220
b For terminated vested participants	763	23876528	23876528
c For active participants	329	30970161	31110604
d Total	1956	122160909	122301352

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.35 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	280000
c Target normal cost	**6c**	280000

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

09/03/2026
Date

MARY ANN DWORAK, ASA, MAAA, FCA
Type or print name of actuary

26-05417
Most recent enrollment number

SEGAL
Firm name

609-482-2300
Telephone number (including area code)

100 AMERICAN METRO BOULEVARD
SUITE 110
HAMILTON, NJ 08619
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	40294
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	40294
10	Interest on line 9 using prior year's actual return of 0.98 %	0	395
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		12117
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.14 %		623
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		12740
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	40689

Part III Funding Percentages

14	Funding target attainment percentage	14	99.61 %
15	Adjusted funding target attainment percentage	15	99.61 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	99.85 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2025	300000	0			
11/14/2025	32472	0			
			Totals ► 18(b)	332472	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	326613

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used
b Applicable month (enter code)			**21b**	
22 Weighted average retirement age			**22**	65

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] Prescribed - separate [ ] Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. [X] Yes [ ] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] Yes [ ] No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	280000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	470440	87302
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	367302

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	40689	40689

36 Additional cash requirement (line 34 minus line 35)	**36**	326613
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	326613

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. [ ] 2019 [ ] 2020 [ ] 2021

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
WEIL, GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

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

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

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

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

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

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

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

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

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

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

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

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

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

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

THE NORTHERN TRUST COMPANY

36-1561860

(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?
18 19 50	NONE	57519	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE 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
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
WEIL, GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

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: WGM MASTER TRUST

b Name of sponsor of entity listed in (a): WEIL, GOTSHAL & MANGES LLP

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)
13-1456110-012	M	120831101

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE SHORT TERM INVESTMENT

b Name of sponsor of entity listed in (a): NORTHERN TRUST GLOBAL INVESTMENTS

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)
45-6138589-084	C	3027987

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
WEIL, GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	999694	3027987
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	120871907	120831101
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	121871601	123859088
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	121871601	123859088

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)	332472	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		332472
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	98210	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		98210
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		9466295
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		9896977
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7638660	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		7638660
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	57519	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	213311	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		270830
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		7909490
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1987487
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

(1) [ ] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [X] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: EISNERAMPER LLP **(2)** EIN: 87-1363769

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		15000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] 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.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 590139.

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
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
WEIL, GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

Part I Distributions

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

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

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

EIN(s): 36-3046063

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** 15

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

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

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

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

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

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

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

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

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

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

a Enter the percentage of plan assets held as:
Public Equity: 0.0 % Private Equity: 1.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 95.0 %
High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 4.0 % Other: 0.0 %

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2025 and 2024
(with supplemental information)

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

INDEX
YEARS ENDED DECEMBER 31, 2025 and 2024

	Page
INDEPENDENT AUDITORS' REPORT	1-3
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS – DECEMBER 31, 2025 AND 2024	4
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEARS ENDED DECEMBER 31, 2025 AND 2024	5
NOTES TO FINANCIAL STATEMENTS	6-21
SUPPLEMENTAL INFORMATION	
SCHEDULE OF ASSETS (HELD AT END OF YEAR) – DECEMBER 31, 2025	22
SCHEDULE OF REPORTABLE TRANSACTIONS FOR THE YEAR ENDED DECEMBER 31, 2025	23-24

EisnerAmper LLP
111 Wood Avenue South
Iselin, NJ 08830-2700
T 732.243.7000
F 732.951.7400
www.eisneramper.com

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator, Participants and Beneficiaries
of the Weil, Gotshal & Manges Employees' Pension Plan

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

"EisnerAmper" is the brand name under which EisnerAmper LLP and Eisner Advisory Group LLC and its subsidiary entities provide professional services. EisnerAmper LLP and Eisner Advisory Group LLC are independently owned firms that practice in an alternative practice structure in accordance with the AICPA Code of Professional Conduct and applicable law, regulations and professional standards. EisnerAmper LLP is a licensed CPA firm that provides attest services, and Eisner Advisory Group LLC and its subsidiary entities provide tax and business consulting services. Eisner Advisory Group LLC and its subsidiary entities are not licensed CPA firms.

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

Other Matter

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of assets (held at the end of year) as of December 31, 2025 and of reportable transactions for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

EisnerAmper LLP

EISNERAMPER LLP
Iselin, New Jersey
October 6, 2026

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2025	**2024**
ASSETS		
Investments, at fair value:		
Investment in WGM MASTER TRUST	**$ 120,831,101**	$ 120,871,907
Collective Short-Term Investment Fund	**3,027,987**	999,694
	123,859,088	121,871,601
Net assets available for benefits	**$ 123,859,088**	$ 121,871,601

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Years Ended December 31,	
	2025	**2024**
Additions to/(deductions from) net assets available for benefits:		
Investment income:		
Net realized/unrealized appreciation/(depreciation) in fair value of WGM Master Trust	**$ 3,606,229**	$ (5,037,544)
Interest and dividend income allocated from WGM Master Trust	**6,021,635**	6,587,339
Interest and dividend income	**98,210**	83,123
Investment fees allocated from WGM Master Trust	**(161,569)**	(285,116)
Net investment income	**9,564,505**	1,347,802
Employer's contributions	**332,472**	416,861
Benefits paid to participants and beneficiaries	**(7,638,660)**	(21,076,920)
Pension Benefit Guaranty Corporation premiums	**(213,368)**	(247,753)
Administrative expenses	**(57,519)**	(60,227)
Income tax refund/(expense)	**57**	(2,386)
NET CHANGE IN NET ASSETS AVAILABLE FOR BENEFITS	**1,987,487**	(19,622,623)
NET ASSETS AVAILABLE FOR BENEFITS - BEGINNING OF YEAR	**121,871,601**	141,494,224
NET ASSETS AVAILABLE FOR BENEFITS - END OF YEAR	**$ 123,859,088**	$ 121,871,601

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2025 and 2024

NOTE 1 – DESCRIPTION OF THE PLAN

The Weil, Gotshal & Manges Employees' Pension Plan (the "Plan") was established on February 1, 1969 as a defined benefit pension plan covering all employees employed in a nonlegal position by Weil, Gotshal & Manges LLP (the "Sponsor"). The Plan also includes all employees employed in legal positions who were members of the Plan prior to February 1, 1982, and who are not a partner of the Firm. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The Plan meets the minimum funding requirements of ERISA.

The Plan's assets, except for the Collective Short-Term Investment Fund, are held in the WGM Master Trust (the "Master Trust"). See Note 3 for details of the Master Trust.

The Plan is funded through contributions received from the Sponsor. Effective December 31, 2011, the Plan was frozen for participation and benefit accrual. Specifically, the Plan was amended effective December 31, 2011 to provide that employees who were not Participants in the Plan prior to December 31, 2011 will not be eligible to participate in the Plan. The amendment further provided that for employees who were Participants in the Plan prior to December 31, 2011, except for Participants who incurred a disability prior to December 31, 2011, no year of benefit service and no change in average annual compensation will be taken into account under the Plan after December 31, 2011.

Prior to December 31, 2011, employees who reached the age of 21 and have 12 months of service with 1,000 hours in the first employment year were eligible to join the Plan on the next entry date. Entry dates were January 1st and July 1st each year.

The Plan provides for an annual benefit at normal retirement (defined to be the later of the first day of the month coincident with or following age 65 or the fifth anniversary in the Plan and, effective on or after January 1, 2002, not later than age 68) equal to 1% of average annual compensation, as defined, for each year of benefit service with a maximum of 42.5% of the average annual compensation, as defined. In addition, the Plan provides for early retirement, deferred retirement, disability and death benefits. A Participant is 100% vested after completing five years of service. The normal form of payment is a Life Annuity; other options are also available at retirement. Death benefit may be paid out as a lump-sum. The Plan also provides for a mandatory cash-out in a form of a lump-sum, if Participant's actuarial equivalent value of the benefit is $5,000 or less, as defined.

The Plan was amended to allow for a special limited-time distribution window in 2024 where certain eligible participants can elect an immediate commencement of their benefits, including a full lump sum.

The foregoing description of the Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES

(a) Basis of Accounting

The financial statements have been presented on the accrual basis of accounting.

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES (Continued)

(b) Use of Estimates

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

(c) Valuation of Investments and Income Recognition

Investments and investment holdings in the Master Trust are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation/ (depreciation) in fair value of WGM Master Trust includes the Plan's share of the Master Trust's gains and losses on investments bought and sold as well as held during each of the years ended December 31, 2025 and 2024.

(d) Payment of Benefits

Benefits are recorded when paid.

(e) Administrative Expenses

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

(f) Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits (Note 5) are those estimated future periodic payments that are attributable under the Plan's provisions to services rendered by the Participants to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated Participants or their beneficiaries and (b) beneficiaries of Participants who have died, and (c) present Participants or their beneficiaries. Benefits are determined by use of certain formula set forth in the Plan. Benefits payable under all circumstances - retirement, death, disability and termination of employment - are included, to the extent they are deemed attributable to Participant service rendered to the valuation date.

NOTE 2 – SIGNIFICANT ACCOUNTING POLICIES (Continued)

(g) Subsequent Events

The Plan has evaluated subsequent events through October 6, 2026, the date that the financial statements were available to be issued.

NOTE 3 – INVESTMENTS – MASTER TRUST

The Master Trust holds the investment assets of the Plan, the Weil, Gotshal & Manges Partners' Defined Benefit Plan, the Weil, Gotshal & Manges Partners' Target Pension Plan, the Weil, Gotshal & Manges Partners' Variable Defined Benefit Plan, the Weil, Gotshal & Manges Partners' Variable Annuity Plan, the Weil, Gotshal & Manges LLP Cash Balance Plan, and the Weil, Gotshal & Manges Closed Partners' Target Pension Plan. Each participating plan has an interest in specific assets in the Master Trust (a divided interest).

Investments and the income therefrom, are allocated to participating plans based on each plan's participation in the investment options within the Master Trust. Accordingly, the Plan's investment gain for the year ended December 31, 2025 includes its allocable share of the Master Trust's interest and dividends and net appreciation/ (depreciation) in fair value of investments.

The following table represents the fair value of assets, including investments, held by the Master Trust at December 31, 2025 and 2024:

	2025		2024	
	Master Trust	Plan's Interest in Master Trust	Master Trust	Plan's Interest in Master Trust
Collective Short-Term Investment Fund	$ 10,885,211	$ 1,113,701	$ 2,742,753	$ 119,258
Mutual Funds	11,940,048	-	4,815,334	-
Collective Trusts	-	-	121,759,946	-
103-12 Investment Entities	-	-	14,110,948	-
Debt Instruments	527,909,578	116,586,836	584,792,310	115,498,217
Common Stocks	-	-	15,686,135	-
Pooled Separate Funds	-	-	7,804,285	-
Private Equity Funds	53,800,277	1,568,870	65,798,375	1,897,269
Hedge Funds	776,027	46,408	25,283,999	1,797,611
Total Investments at Fair Value	**605,311,141**	**119,315,815**	**$ 842,794,085**	**119,312,355**
Plus:				
Due from broker for securities sold	58,769	(1,015)	31,351	2,501
Accrued interest and dividends	6,812,530	1,516,301	7,393,296	1,559,434
Less:				
Due to broker for securities purchased	(39,440)	-	(37,999)	(2,383)
Accrued expenses	-	-	(6,338)	-
Total	**$ 612,143,000**	**$ 120,831,101**	**850,174,395**	**$ 120,871,907**

NOTE 3 – INVESTMENTS – MASTER TRUST (Continued)

The table below sets forth investment income of the Master Trust for the years ended December 31, 2025 and 2024:

	December 31 2025	December 31 2024
Investment income:		
Net appreciation in fair value of investments	$ 44,963,485	$ 3,261,204
Interest and dividend income	33,954,037	31,943,398
Management fees	(799,269)	(1,450,160)
Net investment income	$ 78,118,253	$ 33,754,442

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS

The Financial Accounting Standards Board ("FASB") Accounting Standards Codification ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The Plan utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs. Based on the observability of the inputs used in the valuation techniques, the Plan is required to provide the following information according to the fair value hierarchy. The fair value hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets (Level 1) and the lowest priority to unobservable inputs (Level 3). Financial assets and liabilities carried at fair value will be classified and disclosed in one of the following three categories:

Level 1

Valuation is based upon quoted prices for identical instruments traded in active markets.

Level 2

Observable inputs other than Level 1 including quoted prices for similar assets or liabilities, quoted prices in less active markets, or other observable inputs that can be corroborated by observable market data.

Level 3

Unobservable inputs supported by little or no market activity for financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value requires significant management judgment or estimation.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

The asset's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for investment assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Collective Short-Term Investment Funds

Valued at net asset value ("NAV"). The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the Plan will sell the investment for an amount different than the reported NAV. Underlying investments are valued based upon the latest published market quotations, when available. When not available, fair values are determined by the fund manager by reference to quoted market values or other financial data pertaining to investments of similar nature, quality, and yield.

Admissions to and withdrawals from the fund are made daily. Interest is accrued daily and distributed monthly. The collective short-term investment fund held by the Plan at December 31, 2025 invests in high-grade money market instruments with short-term maturities to provide an investment vehicle for cash reserves while offering a competitive rate of return.

Mutual Funds

Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common Stocks

At December 31, 2024, the Master Trust held investments in common stock which were valued at the closing price reported on the active market on which the individual securities are traded. During 2025, common stock was redeemed as part of a change in the Master Trust’s investment strategy, and no such investments were held at December 31, 2025.

Debt Instruments

Debt instruments include corporate bonds and government securities. The fair value of corporate bonds is estimated using various techniques, which may consider recently executed transactions in securities of the issuer or comparable issuers, market price quotations (when observable), bond spreads, fundamental data relating to the issuer and credit default swap spreads adjusted for differences between cash and derivative instruments. Credit ratings range from AAA to B. Government securities are valued using a model that incorporates market observable data, such as reported sales of similar securities, broker quotes, yields, bids, offers, and reference data. Certain securities are valued principally using dealer quotations.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

Investments Held by Master Trust measured at NAV

At December 31, 2024, the Master Trust held investments in pooled separate account funds, collective trust funds, and 103-12 investment entities that were measured at net asset value ("NAV"), as a practical expedient, and therefore were not classified within the fair value hierarchy. During 2025, these investments were redeemed as part of a change in the Master Trust's investment strategy, and no such investments were held at December 31, 2025.

Pooled Separate Account Funds

At December 31, 2024, pooled separate account funds were valued at NAV, as a practical expedient, based on the market value of the underlying investments. The NAV was not a publicly-quoted price in an active market. The Pooled Separate Account Funds sought to achieve a long-term total return greater than public bond portfolios of comparable credit quality and duration primarily by investing in privately placed corporate debt securities, with credit qualities ranging from AAA to CCC.

Collective Trust Funds and 103-12 Investment Entities

At December 31, 2024, collective trust funds and 103-12 investment entities were valued at NAV, as practical expedient, based on the fair value of the underlying investments. Underlying investments were valued based upon the latest published market quotations, when available. When not available, fair values were determined by the fund manager by reference to quoted market values or other financial data pertaining to investments of similar nature, quality, and yield.

Primary investment strategies of Collective Trust Funds held by the Master Trust at December 31, 2024 were as follows:

- to invest in a diversified portfolio of common stocks of US and Non-US companies to seek long-term capital appreciation.

- to invest in S&P common stock to provide results that approximate returns of the S&P 500 Composite Stock Price Index.

- to invest in S&P common stock to provide results that approximate returns of the S&P 400 Composite Stock Price Index.

- to invest in growth-oriented small cap US companies to seek long-term capital growth using a bottom-up investment process.

- to approximate the risk and return characteristics of the MSCI All Country World ex-US Index. This index represents the large and medium cap segments of the Non-US equity developed and emerging markets. The Fund employs a replication technique which generally seeks to hold each index constituent in its proportional index weight. The Fund may make limited use of futures and/or options for the purpose of maintaining equity exposure.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

103-12 Investment Entities held by the Master Trust at December 31, 2024 had investment strategies as follows:

- to seek long-term capital by investing in equity securities without limitation among geographic regions and individual countries throughout the world based on analysis of global economic, political and financial conditions.

Hedge Funds

The hedge fund investments were fully redeemed prior to December 31, 2025. The remaining balance of $776,027 represents a holdback receivable expected to be distributed in 2026 following the completion of the respective funds' final audits.

At December 31, 2024, hedge funds were valued based on NAV per unit as a practical expedient, without further adjustment. NAV was based upon the fair value of the underlying investments as determined by the hedge funds.

Primary investment strategies of Hedge Funds held by the Master Trust at December 31, 2024 were as follows:

- to invest in funds whose investment objective is to seek long-term capital appreciation and current income through investing in a combination of equity securities, fixed-income securities and derivatives including, but not limited to, options, credit default swaps, total return swaps, futures and forwards.

- to achieve net of fee returns in excess of traditional high yield credit through high income and credit loss-avoidance. The strategy focuses on investing and trading primarily in structured finance securities including collateralized debt obligations, collateralized loan obligations, mortgage-backed securities, asset-backed securities, bank debt, special situations, high-yield bonds and special situation equity securities, credit loss-avoidance.

- to achieve risk-adjusted total returns by buying and selling investments that are anticipated to have a primarily bank loan focus. Investments will be primarily in debt securities of midsize and large capitalizations

Private Equity

Valued based on the NAV per unit as practical expedient, without further adjustment. NAV is based upon the fair value of the underlying investments as determined by the private equity and hedge funds.

Primary investment strategies of Private Equity Funds held by the Master Trust are as follows:

- to hold investments in partnerships that make investments as limited partners in the funds that hold investments in other limited partnerships and pooled investment vehicles and also hold direct

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

Private Equity (Continued)

investments such as common and preferred equity securities, debt, warrants, privately issued securities as well as investments in operating companies.

- to acquire, improve, lease, maintain, own, operate, manage, finance, refinance, mortgage, hold, divide, sell, reposition, exchange or otherwise deal in and with real estate investments, real estate assets, securities and instruments.

- to engage in the business of investing in portfolio companies that own, operate, develop, manage or support infrastructure assets.

- to generate current income and long-term capital appreciation through investments in a range of distressed and undervalued credit investments in North America and other parts of the world on an opportunistic basis.

- to generate current income and long-term capital appreciation through investments in technology companies located in North America.

- to generate attractive, risk-adjusted returns by investing primarily in residential and commercial whole loans, mortgage-backed securities and other credit sensitive financial instruments and by focusing on the acquisition and through its affiliates, the management and servicing of credit-sensitive loans and real estate owned, asset-backed securities and related derivative instruments.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

The following tables summarize the Master Trust's and the Plan's investment assets at fair value as of December 31, 2025 and 2024, based on the inputs used to value them:

Investment Assets at Fair Value at December 31, 2025

Type of Security	Level 1	Level 2	Level 3	Total
Held by Plan:				
Collective Short-Term Investment Fund	$ -	-	-	$ 3,027,987
Total Investments Held By Plan	$ -	-	-	$ 3,027,987
Held by Master Trust:				
Mutual funds	$ 11,940,048			$ 11,940,048
Debt Instruments		527,909,578		527,909,578
Total Master Trust investments in the fair value hierarchy	11,940,048	527,909,578		539,849,626
Investments held by Master Trust measured at NAV (a):				
Collective Short-Term Investment Fund				10,885,211
Private equity funds				53,800,277
Hedge funds				776,027
Total investments held by Master Trust measured at NAV				65,461,515
Total investments Assets at Fair Value Held by Master Trust	$ 11,940,048	527,909,578	-	$ 605,311,141

(a) Certain investments that are measured at fair value using the NAV per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in Note 3.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

Investment Assets at Fair Value at December 31, 2024				
Type of Security	**Level 1**	**Level 2**	**Level 3**	**Total**
Held by Plan:				
Collective Short-Term Investment Fund	$ -	-	-	$ 999,694
Total Investments Held By Plan	$ -	-	-	$ 999,694
Held by Master Trust:				
Mutual funds	$ 4,815,334			$ 4,815,334
Common stocks	15,686,135			$ 15,686,135
Debt Instruments		584,792,310		$ 584,792,310
Total Master Trust investments in the fair value hierarchy	20,501,469	584,792,310		605,293,779
Investments held by Master Trust measured at NAV (a):				
Collective Short-Term Investment Fund				2,742,753
Collective Trusts				121,759,946
103-12 investment entities				14,110,948
Pooled separate funds				7,804,285
Private equity funds				65,798,375
Hedge funds				25,283,999
Total investments held by Master Trust measured at NAV				237,500,306
Total investments Assets at Fair Value Held by Master Trust	$ 20,501,469	$ 584,792,310	$ -	$ 842,794,085

a) Certain investments that are measured at fair value using the NAV per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in Note 3.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while 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.

Changes in Fair Value Levels

The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

The following tables summarize the Master Trust's investments measured at fair value based on NAVs per share as of December 31, 2025 and 2024:

	December 31, 2025			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Hedge funds (a)	776,027		(a)	(a)
Private equity funds (b)	53,800,277	$ 19,043,217 (c)	N/A	N/A
Collective Short-Term Investment Fund	10,885,211		Daily	0 days
	$ 65,461,515	$ 19,043,217		

	December 31, 2024			
	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Collective trusts	$ 121,759,946		Daily	0-30 days
Hedge funds (a)	25,283,999		Monthly, quarterly	30-180 days
Private equity funds (b)	65,798,375	$ 21,138,928 (c)	N/A	N/A
Pooled Separate Funds	7,804,285		Monthly	30 days
103-12 investment entities	14,110,948		Weekly	7 days
Collective Short-Term Investment Fund	2,742,753		Daily	0 days
	$ 237,500,306	$ 21,138,928		

(a) At December 31, 2025, the Master Trust had a receivable of $776,027 related to a holdback from a redeemed hedge fund investment. Receipt of the remaining holdback is expected in 2026 following completion of the respective funds' final audits.

(b) The Master Trust's private equity fund investments with a fair value of $53,800,277 and $65,798,375 at December 31, 2025 and 2024, respectively, may not be redeemed prior to the liquidation of the fund investment, unless the Board of Directors of the funds, or the general partner, at its sole discretion, approves redemption.

NOTE 4 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Continued)

(c) As of December 31, 2025 and 2024, the plans participating in the Master Trust, excluding the terminating plans that do not have obligations under the subscription agreements, have committed to invest $131,050,000 and $132,850,000, respectively, under subscription agreements. As of December 31, 2025 and 2024, approximately $112,006,783 and $111,711,072, respectively, have been invested pursuant to those commitments.

Certain collective trusts and hedge fund held by the Master Trust could impose withdrawal fees as a percentage of withdrawal amount if amount withdrawn exceeds specified threshold, and occurred within a specified time after subscription date, respectively. There were no withdrawal fees charged for the years ended December 31, 2025 and 2024.

NOTE 5 – ACCUMULATED PLAN BENEFITS

Independent consulting actuaries estimate the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by the Participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Significant assumptions underlying the actuarial computations as of December 31, 2024 were as follows:

Interest rate for determination of accumulated benefits under FASB ASC 960	5.50%
Mortality basis	RP-2014 Mortality Tables (adjusted back to 2006 - sex-specific) projected generationally with the MP-2021 projections scale.
Employee turnover	15.62% for age 20, 12.52% for age 25, 11.47% for age 30, 10.62% for age 35, 9.12% for age 40, 7.64% for age 45, 3.62% for age 50, 0.79% for age 55, 0% for age 60. The withdrawal rates are multiplied by 3.0 in the first year of employment, 2.5 in the second, 2.0 in the third, and 1.5 in the fourth.
Retirement	Age 65

These actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. Effective December 31, 2011, the Plan was frozen for participation and benefit accrual. See Note 1 for further discussion.

NOTE 5 – ACCUMULATED PLAN BENEFITS (Continued)

The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2025. Had the valuation been performed at December 31, 2024, there would be no material differences.

Accumulated plan benefits information, as estimated by consulting actuaries, as of December 31, 2024 is as follows:

Actuarial present value of accumulated plan benefits	
Vested benefits:	
Participants currently receiving benefits	$ 67,242,864
Other participants	55,109,260
Total vested benefits	122,352,124
Nonvested benefits	-
Total actuarial present value of accumulated plan benefits	$ 122,352,124

Changes in accumulated plan benefits for the year ended December 31, 2024 are as follows:

Actuarial present value of accumulated plan benefits as of December 31, 2023	$ 138,255,851
Increase (decrease) during the year attributable to:	
Benefits accumulated and actuarial experience	(2,430,879)
Increase for interest due to the decrease in the discount period	7,604,072
Benefits paid	(21,076,920)
Changes in actuarial assumptions	-
Net Decrease	(15,903,727)
Actuarial present value of accumulated plan benefits as of December 31, 2024	$ 122,352,124

The Plan's funding policy is for the Sponsor to contribute an amount that will meet or exceed the annual ERISA minimum funding requirement. The Sponsor made contributions of $332,472 and $416,861 for the years ended December 31, 2025 and 2024, respectively.

NOTE 6 – ADJUSTED FUNDING TARGET ATTAINMENT PERCENTAGE ("AFTAP")

The Pension Protection Act (the "Act") included many provisions and numerous revisions to rules surrounding defined benefit plans, including rules that govern Plan funding. The Act established minimum funding standards for defined benefit plans and limited benefit increases and accruals for underfunded plans. Pursuant to the Act, each year the actuaries are required to certify to the Plan's funded percentage. The Plan received such certification for the 2025 Plan year for the AFTAP, which is one way of measuring the funded status of a plan using actuarial assumptions mandated by the IRS, and the actuary determined that the 2025 AFTAP for the Plan is 99.61%.

NOTE 7 – RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS

Northern Trust Corporation ("Northern Trust") is the custodian of the Plan's investments; therefore, transactions related to these investments qualify as party-in-interest transactions. Administrative expenses paid to Northern Trust and charged to the Plan for the years ended December 31, 2025 and 2024 were $57,519 and $60,227, respectively.

NOTE 8 – INCOME TAX STATUS

The Plan obtained its latest determination letter on December 20, 2016, in which the Internal Revenue Service ("IRS") stated that the Plan is qualified under the Internal Revenue Code ("IRC"), and therefore, the related trust is exempt from taxation. The Plan has been amended since receiving the tax determination letter. However, the Plan administrator and the Plan's counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and therefore, believe the Plan is qualified, and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by a government authority. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan holds certain investments subject to IRS filings. To date, all filings have been made. The Plan is subject to routine examinations by taxing jurisdictions; however, there are currently no examinations for any tax periods in progress.

NOTE 9 – PLAN TERMINATION

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

a. Benefits attributable to employee contributions, taking into account those paid out before termination.

NOTE 9 – PLAN TERMINATION (Continued)

b. Annuity benefits that former employees or their beneficiaries have been receiving for at least three years, or that employees eligible to retire for that three-year period would have been receiving if they had retired with benefits in the normal form of annuity under the Plan. The priority amount is limited to the lowest benefit that was payable (or would have been payable) during those three years. The amount is further limited to the lowest benefit that would be payable under Plan provisions in effect at any time during the five years preceding Plan termination.

c. Other vested benefits insured by the Pension Benefit Guaranty Corporation (the "PBGC") (a U.S. government agency) up to the applicable limitations (discussed subsequently).

d. All other vested benefits (that is, vested benefits not insured by the PBGC).

e. All nonvested benefits.

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

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

NOTE 10 – INVESTMENTS WITH OFF-BALANCE-SHEET RISK OR CONCENTRATION OF CREDIT RISK

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

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

Volatility in the financial markets may significantly impact the subsequent valuation of the Plan's investments. Accordingly, the valuation of investments at December 31, 2025 may not necessarily be indicative of amounts that could be realized in a current market exchange.

NOTE 10 – INVESTMENTS WITH OFF-BALANCE-SHEET RISK OR CONCENTRATION OF CREDIT RISK (Continued)

The Master Trust invests in foreign currency and foreign securities investments through some of its investments in private equity funds. The securities exchanges of certain foreign markets are substantially smaller, less liquid and more volatile than the major securities markets in the United States of America. Consequently, acquisition and disposition of securities by the private equity funds may be inhibited. This may limit the number of shares available for acquisition or disposition by the private equity funds. Some countries in which the private equity funds may invest require governmental approval for the repatriation of investment income, capital or the proceeds of sales of securities by foreign investors. In addition, if there is deterioration in a country's balance of payments or for other reasons, a country may impose temporary restrictions on foreign capital remittances abroad.

The Master Trust invests in emerging markets investments through some of its investments in private equity funds. Investing in emerging markets may involve special risks and considerations not typically associated with investing in the United States of America. These risks include revaluation of currencies, high rates of inflation, repatriation restrictions on income and capital, and future adverse political, social and economic developments. Moreover, securities issued in these markets may be less liquid, subject to government ownership control, delayed settlements and their prices more volatile than those of comparable securities in the United States of America.

The Master Trust's investments in some of its private equity funds are also subject to the risk of restrictions being imposed by foreign governments on the repatriation of cash and to political or economic uncertainties.

SUPPLEMENTAL INFORMATION

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H of Form 5500
Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	**Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value**	**Cost**	**Current Value**
*	Northern Trust	Collective Short-Term Investment Fund	$ 3,027,987	$ 3,027,987

* Party-in-interest, as defined by ERISA.

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H, Part IV, Line 4(j) of Form 5500
Schedule of Reportable Transactions
Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Sales Price	(g) Cost of Asset	(h) Current value of Asset on Transaction Date	(i) Net Gain (Loss)
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		68,177	68,177	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		347,291	347,291	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		900,187	900,187	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		91,138	91,138	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		2,400,000	2,400,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		300,000	300,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		376,550	376,550	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		1,000,000	1,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		50,570	50,570	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		374,523	374,523	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		489,270	489,270	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		2,000,000	2,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		1,000,000	1,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	605,011	605,011	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	54,830	54,830	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	56,818	56,818	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	51,521	51,521	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	552,394	552,394	-

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H of Form 5500
Schedule of Reportable Transactions
December 31, 2025

(Continued)

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Sales Price	(g) Cost of Asset	(h) Current value of Asset on Transaction Date	(i) Net Gain (Loss)
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	531,922	531,922	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	597,909	597,909	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	581,666	581,666	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	611,025	611,025	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	585,200	585,200	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	557,044	557,044	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	663,853	663,853	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	213,368	213,368	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	562,452	562,452	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	162,939	162,939	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	730,365	730,365	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	573,486	573,486	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	86,998	86,998	-

Schedule SB, line 26a – Schedule of Active Participant Data
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

YEARS OF CREDITED SERVICE

Age	Under 1	1 - 4	5 - 9	10 - 14	15 - 19	20 - 24	25 - 29	30 - 34	35 - 39	40 & up
Under 25	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
25 - 29	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
30 - 34	—	—	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
35 - 39	—	2	—	—	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
40 - 44	—	6	6	1	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
45 - 49	—	24	19	10	—	—	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
50 - 54	—	10	23	16	8	2	—	—	—	—
	—	—	—	—	—	—	—	—	—	—
55 - 59	—	15	27	15	4	8	3	—	—	—
	—	—	—	—	—	—	—	—	—	—
60 - 64	—	5	12	19	6	15	6	9	1	—
	—	—	—	—	—	—	—	—	—	—
65 - 69	—	8	10	5	2	10	3	2	—	—
	—	—	—	—	—	—	—	—	—	—
70 & up	—	—	5	5	2	1	2	1	1	—
	—	—	—	—	—	—	—	—	—	—

Summary of Actuarial Assumptions and Methods

Certain assumptions are prescribed as noted below. The other assumptions are estimates derived from historical and recent experience as well as market observations, combined with professional judgment about future expectations.

Interest for IRS funding purposes

The interest rates used for the 2025 plan year are the corporate bond yield curve for January coinciding with the valuation date. These discount rates translate to an effective interest rate of 5.35%.

Previously, the interest rates used for the 2024 plan year were the corporate bond yield curve for January coinciding with the 2024 valuation date. Those discount rates translated to an effective interest rate of 5.14%.

Interest for PBGC premium purposes

Under the Standard Method, the interest rates used to determine the PBGC variable-rate premium for the 2025 plan year are the average corporate bond segment rates for December 2024, as follows:

Year	Method	Payments in the First 5 Years	Payments in Years 6 – 20	Payments Thereafter
Current Year	Standard	4.65%	5.28%	5.63%
Prior Year	Alternative	*	*	*

* The interest rates used to determine the PBGC variable-rate premium for the 2024 plan year were the corporate bond yield curve for January coinciding with the 2024 valuation date.

These current year interest rates are based on the plan sponsor's election for the 2025 plan year (an election that can next be changed for the 2030 plan year) and are subject to the constraints established by law.

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Mortality Rates

Pri-2012 separate employee and annuitant healthy mortality tables, projected generationally using the Adjusted MP-2021 scale as described in the final IRS mortality regulations released in October 2023.

This assumption is required by the regulations. This reflects an update to the mandated mortality projection assumption.

Salary Increases

Not applicable.

Benefit Election

The life annuity form of payment is valued for unmarried active and terminated vested participants and the unreduced qualified joint and survivor annuity (50% survivor annuity) is valued for married active and terminated vested participants in accordance with the percent married assumption. Retired participants are valued using the form of payment elected.

This assumption is based on historical and current data, adjusted to reflect estimated future experience and professional judgment.

Termination Rates

Age	Rates
20	15.62%
25	12.52%
30	11.47%
35	10.62%
40	9.12%
45	7.64%
50	3.62%
55	0.79%
60	0.00%

The withdrawal rates are multiplied by 3.0 in the first year of employment, 2.5 in the second, 2.0 in the third, and 1.5 in the fourth.

This assumption is based on historical and current data, adjusted to reflect estimated future experience and professional judgment.

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Disability Rates

No assumption; recognized as experience.

Retirement (From Active Status) Rates

100% at age 65

This assumption is based on historical and current data, adjusted to reflect estimated future experience and professional judgment.

Retirement From Inactive Status

Age 65

Percent Married

80% for males; 40% for females. Spouse is assumed to be the opposite gender.

For inactive participants for whom a spouse's date of birth was not provided, and for active participants, it was assumed that husbands were 4 years older than their wives.

Administrative Expenses

An expense assumption is required under the funding rules. Plan-related expenses of $280,000 are expected to be paid by the plan during the year (previously, $340,000).

This assumption is based on recent historical data, adjusted to reflect PBGC premium changes, input from the plan sponsor, and estimated future experience and professional judgment.

Asset Method

As selected by the plan sponsor, assets are valued at market value.

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Funding Method and Contribution Requirement

Funding method is unit credit actuarial cost method, as prescribed by law. The liability is measured on an accrual-to-date basis using mandated mortality tables and interest rates with no salary projection past the end of the year.

Plan sponsors are required under Internal Revenue Code Section 430 to make a minimum level of contributions to qualified pension plans. Available credit balances can be used to satisfy this required contribution. In general, the minimum required contribution is the sum of the target normal cost and an installment that amortizes the plan's funding shortfall, offset by any plan overfunding, if applicable. If all assumptions are met (including the investment earnings implicitly assumed by the interest rate), funding the plan at the minimum required contribution level is generally designed to achieve a 100% funded status within fifteen years. Once that is achieved, or for overfunded plans, the minimum required contribution will generally equal the target normal cost reduced by any overfunding.

Non-Prescribed Assumption Changes Since Prior Valuation

- Assumption Type: Administrative Expenses
- Current Assumptions: $280,000
- Prior Assumptions: $340,000
- Reason for Change: Plan Experience

Actuarial Models

Segal valuation results are based on proprietary actuarial modeling software. The actuarial valuation models generate a comprehensive set of liability and cost calculations that are presented to meet regulatory, legislative and client requirements. Our Actuarial Technology and Systems unit, comprising both actuaries and programmers, is responsible for the initial development and maintenance of these models. The models have a modular structure that allows for a high degree of accuracy, flexibility and user control. The client team programs the assumptions and the plan provisions, validates the models, and reviews test lives and results, under the supervision of the responsible actuaries.

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H, Part IV, Line 4(j) of Form 5500
Schedule of Reportable Transactions
Year Ended December 31, 2025

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Sales Price	(g) Cost of Asset	(h) Current value of Asset on Transaction Date	(i) Net Gain (Loss)
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		68,177	68,177	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		347,291	347,291	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		900,187	900,187	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		91,138	91,138	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		2,400,000	2,400,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		300,000	300,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		376,550	376,550	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		1,000,000	1,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		50,570	50,570	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		374,523	374,523	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		489,270	489,270	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		2,000,000	2,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT	1		1,000,000	1,000,000	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	605,011	605,011	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	54,830	54,830	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	56,818	56,818	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	51,521	51,521	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	552,394	552,394	-

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H of Form 5500
Schedule of Reportable Transactions
December 31, 2025

(Continued)

(a) Identity of Party Involved	(b) Description of Assets	(c) Purchase Price	(d) Sales Price	(g) Cost of Asset	(h) Current value of Asset on Transaction Date	(i) Net Gain (Loss)
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	531,922	531,922	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	597,909	597,909	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	581,666	581,666	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	611,025	611,025	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	585,200	585,200	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	557,044	557,044	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	663,853	663,853	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	213,368	213,368	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	562,452	562,452	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	162,939	162,939	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	730,365	730,365	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	573,486	573,486	-
Northern Trust Asset Management	NT COLLECTIVE SHORT TERM INVT FD		1	86,998	86,998	-

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
WEIL, GOTSHAL & MANGES EMPLOYEES' PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
WEIL GOTSHAL & MANGES LLP

D Employer Identification Number (EIN)
13-1456110

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	121,871,601
b Actuarial value	**2b**	121,871,601

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	864	67,314,220	67,314,220
b For terminated vested participants	763	23,876,528	23,876,528
c For active participants	329	30,970,161	31,110,604
d Total	1,956	122,160,909	122,301,352

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.35%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	0
b Expected plan-related expenses	**6b**	280,000
c Target normal cost	**6c**	280,000

Statement by Enrolled Actuary

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

SIGN HERE

MARY ANN DWORAK — Signature of actuary

09/03/2026 — Date

MARY ANN DWORAK, ASA, MAAA, FCA — Type or print name of actuary

2605417 — Most recent enrollment number

SEGAL — Firm name

609-482-2300 — Telephone number (including area code)

100 AMERICAN METRO BOULEVARD
SUITE 110
HAMILTON NJ 08619
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	40,294
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	40,294
10	Interest on line 9 using prior year's actual return of 0.98 %	0	395
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		12,117
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.14 %		623
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		12,740
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	40,689

Part III Funding Percentages

14	Funding target attainment percentage	14	99.61 %
15	Adjusted funding target attainment percentage	15	99.61 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	99.85 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
04/15/2025	300,000	0			
11/14/2025	32,472	0			
			Totals ► 18(b)	332,472	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	326,613

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

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

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment: %	2nd segment: %	3rd segment: %	[X] N/A, full yield curve used

b Applicable month (enter code) **21b**

22 Weighted average retirement age	**22**	65

23 Mortality table(s) (see instructions) [ ] Prescribed - combined [X] Prescribed - separate [ ] Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. [X] Yes [ ] No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. [ ] Yes [X] No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. [X] Yes [ ] No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment [X] Yes [ ] No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	**31a**	280,000
b Excess assets, if applicable, but not greater than line 31a	**31b**	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	470,440	87,302
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	367,302

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	40,689	40,689

36 Additional cash requirement (line 34 minus line 35)	**36**	326,613
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	326,613

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. [ ] 2019 [ ] 2020 [ ] 2021

Schedule SB, line 22 – Description of Weighted Average Retirement Age
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Weighted Average Retirement Age

Participants of the Weil, Gotshal & Manges Employees' Pension Plan are assumed to retire at "Normal Retirement Age," which is defined by the Plan to mean "If hired before 2002: the later of age 65 and the fifth anniversary of participation in the plan. If hired in 2002 and later: the earliest of age 68 and the later of age 65 and 5 years of participation."

Schedule SB, line 26b - Schedule of Projection of Expected Benefit Payments

Weil, Gotshal & Manges Employees' Pension Plan

EIN / PN: 13-1456110 / 001

Schedule SB, line 26b - Schedule of Projection of Expected Benefit Payments				
Plan Year	**Active Participants**	**Terminated Vested Participants**	**Retired Participants and Beneficiaries Receiving Payments**	**Total**
2025	797,157	373,533	6,747,690	7,918,380
2026	955,687	622,834	6,561,042	8,139,563
2027	1,168,666	826,722	6,386,471	8,381,859
2028	1,465,354	955,099	6,217,974	8,638,428
2029	1,605,669	1,069,124	6,005,886	8,680,678
2030	1,777,009	1,245,272	5,824,887	8,847,169
2031	1,860,866	1,357,879	5,573,936	8,792,680
2032	2,074,797	1,504,867	5,361,197	8,940,861
2033	2,132,115	1,599,633	5,119,393	8,851,140
2034	2,274,206	1,698,826	4,719,013	8,692,045
2035	2,411,974	1,822,083	4,493,857	8,727,914
2036	2,447,568	1,924,371	4,259,948	8,631,887
2037	2,505,888	1,977,673	4,023,267	8,506,829
2038	2,506,606	2,080,822	3,755,351	8,342,779
2039	2,524,746	2,095,670	3,510,437	8,130,854
2040	2,570,544	2,094,666	3,263,660	7,928,869
2041	2,547,850	2,082,593	3,016,727	7,647,169
2042	2,555,225	2,061,293	2,771,452	7,387,970
2043	2,513,124	2,035,447	2,529,700	7,078,272
2044	2,501,022	1,990,739	2,293,324	6,785,085
2045	2,447,065	1,970,079	2,064,136	6,481,279
2046	2,375,971	1,928,386	1,843,865	6,148,221
2047	2,290,750	1,876,334	1,634,153	5,801,238
2048	2,205,870	1,819,535	1,436,492	5,461,897
2049	2,107,338	1,755,938	1,252,192	5,115,468
2050	2,008,295	1,684,104	1,082,342	4,774,741
2051	1,904,188	1,609,730	927,691	4,441,609

Schedule SB, line 26b - Schedule of Projection of Expected Benefit Payments

Weil, Gotshal & Manges Employees' Pension Plan

EIN / PN: 13-1456110 / 001

Schedule SB, line 26b - Schedule of Projection of Expected Benefit Payments				
Plan Year	**Active Participants**	**Terminated Vested Participants**	**Retired Participants and Beneficiaries Receiving Payments**	**Total**
2052	1,796,013	1,526,618	788,627	4,111,258
2053	1,686,859	1,440,048	665,154	3,792,061
2054	1,575,507	1,351,466	556,905	3,483,877
2055	1,463,849	1,261,562	463,195	3,188,606
2056	1,352,797	1,171,104	383,064	2,906,964
2057	1,243,271	1,080,894	315,354	2,639,519
2058	1,136,160	991,741	258,776	2,386,677
2059	1,032,308	904,419	211,987	2,148,714
2060	932,465	819,641	173,663	1,925,769
2061	837,288	738,064	142,531	1,717,884
2062	747,304	660,277	117,410	1,524,991
2063	662,899	586,775	97,236	1,346,910
2064	584,349	517,966	81,070	1,183,384
2065	511,793	454,148	68,115	1,034,057
2066	445,283	395,500	57,708	898,491
2067	384,764	342,098	49,300	776,162
2068	330,097	293,909	42,453	666,459
2069	281,082	250,798	36,820	568,700
2070	237,474	212,556	32,127	482,156
2071	198,989	178,908	28,164	406,061
2072	165,307	149,536	24,774	339,617
2073	136,086	124,092	21,834	282,012
2074	110,964	102,219	19,257	232,440

Summary of Plan Provisions

This subsection summarizes the major provisions of the Plan as included in the valuation. It is not intended to be, nor should it be interpreted as, a complete statement of all plan provisions.

Plan Status

BENEFITS FROZEN EFFECTIVE 12/31/2011 EXCEPT FOR PARTICIPANTS WHO WERE DISABLED PRIOR TO 12/31/2011

Normal Retirement

- Eligibility: If hired before 2002: the later of age 65 and the fifth anniversary of participation in the plan.
  If hired in 2002 and later: the earliest of age 68 and the later of age 65 and 5 years of participation.
- Amount: Greater of the accrued benefit and the minimum accrued benefit (if applicable).

Accrued Benefit

- Amount: The greater of:
  1. 1% of average compensation, multiplied by credited service (up to 42.5 years), and
  2. The participant's accrued benefit as of December 31, 1993, plus 1% of average compensation, multiplied by credited service after 1993.

No benefits will accrue after December 31, 2011 for participants who were not disabled prior to December 31, 2011.

Minimum Accrued Benefit

- Eligibility: For participants on December 31, 1988 who then satisfied any of the following conditions:
  a) 10 years of service
  b) Age 50 and 5 years of service
  c) Age 55

- Amount: 50% of average compensation reduced by 46% of the primary Social Security benefit, all reduced proportionately for less than 25 years of service at normal retirement reduced by the Actuarial Equivalent value of the participant's account balance attributable to Employer defined contributions. No benefits will accrue after December 31, 2011 for participants who were not disabled prior to December 31, 2011.
- Average Compensation: Annual compensation for the highest 5 consecutive full calendar years of employment in the last 10 years of employment.

Early Retirement

- Eligibility: Age 55 with 10 years of service or age 62 with 6 years of service
- Amount: Accrued benefit reduced by 5/9% for each of the first 60 months and 5/18% for each of the next 60 months that payment commences prior to Normal Retirement Date.

Disability

- Eligibility: If receiving Social Security disability benefits and disabled prior to December 31, 2011.
- Amount: Continued receipt of benefit accrual credit while disabled, until participant elects to retire if disabled prior to December 31, 2011. Then the accrued benefit is paid (with a reduction if payment begins before Normal Retirement Date).

Vesting

- Age Requirement: None
- Service Requirement: 100% after 5 years of vesting service, if service began after 1994; otherwise, 20% after 2 years of vesting service, increasing by 20% for each additional year, until 100% vested.
- Amount: The vested portion of the accrued benefit, payable at Normal Retirement Date; or a reduced amount beginning at age 55. The reduction is an actuarial equivalent reduction using the 1983 Table "a" for male lives for Individual Annuity Valuation as published by the Society of Actuaries and an interest rate of 8.0%.

Pre-Retirement Death Benefits

- Age Requirement: None
- Service Requirement: 5 years of service, if service began after 1994; otherwise, 20% after 2 years of vesting service, increasing 20% for each additional year, until 100% vested.
- Amount: The present value of the participant's vested accrued benefit. If a surviving spouse so elects the lump sum may be converted to a life annuity commencing at early retirement age.

Deferred Retirement

- Additional accruals to actual retirement date. No accruals after December 31, 2011 will be provided to participants who were not disabled prior to December 31, 2011.

Participation

- Age Requirement: 21 years
- Service Requirement: 1 year. Employee becomes a participant on the January 1 or July 1 coincident with or next following completion of the age and service requirements. No employees are allowed to become participants after December 31, 2011.

Service

- Benefit Credit: Based on the completion of 1,000 hours of service within a plan year from service commencement until date of determination. No benefit credit after December 31, 2011 will be provided to participants who were not disabled prior to December 31, 2011.
- Vesting Credit: Based on the time elapsed from service commencement until date of determination, excluding service before 5 consecutive breaks in service.

Forms of Benefit

- Normal Form: For single participants, a life annuity is payable. For married participants, an unreduced Joint and 50% Survivor form of benefit is automatic.
- Optional Forms: Available with spouse's consent.
  - Life annuity
  - Life and 5-Year Certain Annuity
  - Life and 10-Year Certain Annuity
  - 50% Joint and Survivor Annuity
  - 75% Joint and Survivor Annuity
  - 100% Joint and Survivor Annuity
  - 50% Joint and Survivor Annuity with a Guaranteed Period of 10 Years Certain
  - 75% Joint and Survivor Annuity with a Guaranteed Period of 10 Years Certain
  - 100% Joint and Survivor Annuity with a Guaranteed Period of 10 Years Certain
  - 10 annual installments
  - 15 annual installments
- Actuarial basis for optional benefit forms: For the 10 or 15 annual installments option, the actuarial basis is the yield curve segment rates for the month before the previous calendar quarter and the Applicable Mortality Table required by the IRS.

  For all other optional forms of benefit, the actuarial basis is the 1951 Group Annuity Mortality Table (Male) projected to 1990 set back 4 years and a 9% interest rate.

Recent Plan Amendments

- Plan Amendment: Plan Restatement
- Effective Date: 01/01/2015
- Reflected in 2025 Actuarial Valuation: Yes

- Plan Amendment: Allow Participant to commence benefits if not accruing benefits or is not expected to earn 1,000 hours in the year of separation from service
- Effective Date: 01/01/2016
- Reflected in 2025 Actuarial Valuation: Yes

- Plan Amendment: Allow for a special limited-time distribution window in 2024 where certain terminated vested participants can elect to receive their benefits in a lump sum payment.
- Effective Date: September 1, 2024
- Reflected in 2025 Actuarial Valuation: Yes

WEIL, GOTSHAL & MANGES
EMPLOYEES' PENSION PLAN

Employer Identification #13-1456110, Plan No. 001
Schedule H of Form 5500
Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor or Similar Party	**Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value**	**Cost**	**Current Value**
*	Northern Trust	Collective Short-Term Investment Fund	$ 3,027,987	$ 3,027,987

* Party-in-interest, as defined by ERISA.

Schedule SB, line 32 – Schedule of Amortization Bases
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Schedule of Shortfall Amortization Bases as of January 1, 2025

Year Established	Original Base	Present Value of Remaining Installments	Years Remaining	Shortfall Amortization Installment
2025	$308,778	$308,778	15	$28,509
2024	(8,944,026)	(8,527,588)	14	(823,651)
2023	9,566,577	8,689,250	13	882,444
Total		**$470,440**		**$87,302**

Schedule SB, line 24 – Change in Actuarial Assumptions
Weil, Gotshal & Manges Employees' Pension Plan
EIN: 13-1456110
PN: 001

Non-Prescribed Assumption Changes Since Prior Valuation

- Assumption Type: Administrative Expenses
- Current Assumptions: $280,000
- Prior Assumptions: $340,000
- Reason for Change: Plan Experience

The above change was based on review of administrative expenses paid by the plan to better reflect anticipated plan experience and PBGC variable-rate premium changes. The assumption change did not result in a decrease in the ERISA funding shortfall for the current plan year that would require IRS approval.