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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

1b Three-digit plan number (PN) ▶ 081

1c Effective date of plan 01/01/2022

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)
BAKER BOTTS L.L.P.

910 LOUISIANA STREET
HOUSTON, TX 77002-4916

2b Employer Identification Number (EIN)
74-1195457

2c Plan Sponsor's telephone number
713-229-1234

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	DAVID SCHILLER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

ADMINISTRATIVE COMMITTEE

910 LOUISIANA ST.
HOUSTON, TX 77002-4995

3b Administrator's EIN
74-1892088

3c Administrator's telephone number
713-229-1234

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	119
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)**	118
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	127
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	1
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	128
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f	Total. Add lines **6d** and **6e**.	**6f**	129
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**	
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:

1C

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

9a Plan funding arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- (1) ☐ Insurance
- (2) ☐ Code section 412(e)(3) insurance contracts
- (3) ☒ Trust
- (4) ☐ General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

B Three-digit plan number (PN) ▶ 081

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
BAKER BOTTS L.L.P.

D Employer Identification Number (EIN)
74-1195457

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	19124885
b Actuarial value	**2b**	19124885

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	0	0	0
b For terminated vested participants	1	102897	102897
c For active participants	118	16259764	16259764
d Total	119	16362661	16362661

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**	5.29 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	5606280
b Expected plan-related expenses	**6b**	89850
c Target normal cost	**6c**	5696130

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

10/07/2026
Date

DREW CUMBIE, FSA, EA
Type or print name of actuary

26-08509
Most recent enrollment number

ERNST & YOUNG L.L.P.
Firm name

713-276-4507
Telephone number (including area code)

1401 MCKINNEY ST SUITE 2400
HOUSTON, TX 77010
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	0
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)		
10	Interest on line 9 using prior year's actual return of 7.76 %		
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2589929
	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 5.06 %		131050
	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		2720979
	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	0

Part III Funding Percentages

14	Funding target attainment percentage	14	116.88 %
15	Adjusted funding target attainment percentage	15	116.88 %
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	113.78 %
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
03/18/2026	7383342				
			Totals ► 18(b)	7383342	18(c)

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	6937523

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:	1st segment: 5.00 %	2nd segment: 5.27 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	65

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	5696130
b Excess assets, if applicable, but not greater than line 31a	**31b**	2762224

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
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**	2933906

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

36 Additional cash requirement (line 34 minus line 35)	**36**	2933906
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	6937523
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	**38a**	4003617
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**	

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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

B Three-digit plan number (PN) ▶ 081

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

D Employer Identification Number (EIN)
74-1195457

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

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

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

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

ERNST & YOUNG

34-6565596

(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?
11	ACTUARY	73269	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ALLIANCE BERNSTEIN L.P.

13-4064930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INV MANAGEMENT	26434	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

WEAVER AND TIDWELL, LLP

75-0786316

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDIT/ACCOUNTING	12600	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

FIRST STATE TRUST

13-3124172

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
21	TRUSTEE	5662	Yes [ ] No [X]	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 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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

B Three-digit plan number (PN) ▶ 081

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

D Employer Identification Number (EIN)
74-1195457

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	8334	13884
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	6876587	7383342
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	27	67
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	6396	35340
(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)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	12300174	18736076
(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	19191518	26168709
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		
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	19191518	26168709

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)	7383342	
(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)		7383342
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	881	
(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)		881
(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)	582507	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		582507
(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)		
(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)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1118297
c Other income	2c		14317
d Total income. Add all **income** amounts in column (b) and enter total	2d		9099344
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1991574	
(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)		1991574
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)	12600	
(5) Investment advisory and investment management fees	2i(5)	26434	
(6) Bank or trust company trustee/custodial fees	2i(6)	5662	
(7) Actuarial fees	2i(7)	73269	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	12614	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		130579
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2122153
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		6977191
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) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: WEAVER AND IIDWELL, LLP **(2)** EIN: 75-0786316

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		5000000
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**		X	
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**		X	

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 583169.

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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

B Three-digit plan number (PN) ▶ 081

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

D Employer Identification Number (EIN)
74-1195457

Part I Distributions

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

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

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

EIN(s): _____ _____

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** | 8

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Financial Report
December 31, 2025

weaver
Assurance • Tax • Advisory

C O N T E N T S

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Independent Auditor's Report 1

Financial Statements

Statements of Net Assets Available for Benefits 4

Statements of Changes in Net Assets Available for Benefits 5

Notes to Financial Statements 6

Supplementary Information

Schedule H, Line 4i – Schedule of Assets (Held at End of Year) 13

Schedule H, Line 4j – Schedule of Reportable Transactions 14

All other schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 are omitted because of the absence of the conditions under which they would apply.

4400 Post Oak Parkway, Suite 1100
Houston, Texas 77027
713-850-8787

Independent Auditor's Report

To the Plan Administrator of the
Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
Houston, Texas

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

We have performed audits of the financial statements of Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statements of changes in net assets available for benefits for the year ended December 31, 2025 and 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (US GAAP).
- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with US GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

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

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

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

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 — Supplementary Information Required by ERISA

The supplementary information listed in the table of contents as of 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplementary information, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplementary information that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplementary information, we evaluated whether the supplementary information, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

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

Weaver and Tidwell, L.L.P.

WEAVER AND TIDWELL, L.L.P.

Houston, Texas
October 7, 2026

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
ASSETS		
Investments, at fair value		
Mutual Funds	$ 7,926,347	$ 5,363,471
Exchange Traded Funds	10,809,729	6,936,703
Interest-Bearing Cash	35,340	6,396
Total investments	18,771,416	12,306,570
Receivables		
Employer's contributions	7,383,342	6,876,587
Accrued interest and dividends	67	27
Total receivables	7,383,409	6,876,614
Cash	13,884	8,334
NET ASSETS AVAILABLE FOR BENEFITS	$ 26,168,709	$ 19,191,518

The Notes to Financial Statements are
an integral part of these statements.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

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

	2025	2024
ADDITIONS		
Investment income		
Net appreciation in fair value of investments	$ 1,132,654	$ 529,746
Interest and dividends	583,348	335,000
Net investment income	1,716,002	864,746
Contributions		
Employer	7,383,342	6,876,587
Total additions	9,099,344	7,741,333
DEDUCTIONS		
Benefits paid directly to participants	1,991,574	2,011,409
Administrative expenses	130,579	89,850
Total deductions	2,122,153	2,101,259
Net increase	6,977,191	5,640,074
NET ASSETS AVAILABLE FOR BENEFITS, beginning of year	19,191,518	13,551,444
NET ASSETS AVAILABLE FOR BENEFITS, end of year	$ 26,168,709	$ 19,191,518

The Notes to Financial Statements are
an integral part of these statements.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Notes to Financial Statements

Note 1. Description of the Plan

The following description of the Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions, which is available from Plan management.

General

The Plan, established by Baker Botts L.L.P. (the Firm) on January 1, 2022, is a cash balance defined benefit pension plan. All Partners of the Firm may become participants of the Plan on the January 1st coincident with or next following the date the Partner joins the Firm as an Eligible Partner during a plan year (which is a calendar year). An Eligible Partner is either a U.S. citizen or a U.S resident and identified, as of December 31st, on one of the schedules of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Firm is the plan sponsor of the Plan. The Plan is administered by the Administrative Committee of the Firm (Plan Administrator), which is the ERISA fiduciary that is responsible for oversight of the Plan other than with respect to the Plan assets. The Investment Committee of the Firm is the ERISA fiduciary that determines the appropriate manner for investing the Plan assets held in the Trust Fund, including the appointment of a qualified investment manager under Section 3(38) of ERISA.

Participant Accounts

The Plan establishes a notional cash balance account for each participant in the Plan. As of the last day of the plan year, each participant's account receives a cash balance credit based on the Plan formula and each participant's designated level of participation in the Plan. A participant's account shall also receive an interest credit based on the participant's account balance as of December 31st of the plan year and prior to the participant's account being increased by a cash balance credit for that plan year. The Plan Administrator of the Plan shall determine a basic interest credit and a maximum interest credit, as defined in the Plan document, on behalf of each participant.

For any calendar year in which a Plan distribution is made to a participant or beneficiary, the interest credit shall cease as of the last day of the calendar year immediately preceding the calendar year in which the distribution is made.

Funding Policy

The Firm's formal funding policy is to contribute not less than the minimum required amount and not more than the maximum tax-deductible amount. The Plan has met the minimum funding requirements under ERISA for the years ended December 31, 2025 and 2024.

Although it has not expressed any intention to do so, the Firm has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

Pension Benefits

Participants are entitled to receive Plan benefits in either of these situations (i) termination or (ii) attainment of normal retirement age (age 65). The normal form of benefit payment under the Plan is a life annuity or, in the case of married participant, a qualified joint and 50% survivor annuity (QJSA). Participants are also eligible to take an in-service distribution of their entire account balance at age 59 ½.

Participants with vested benefits less than or equal to $5,000 at termination will automatically receive a single lump-sum payment. Single Participants with vested benefits greater than $5,000 at termination may elect to receive their Plan benefit in the optional form of payment of a single lump sum payment in lieu of the normal form of payment of a life annuity. Married participants with vested benefits greater than $5,000 must receive their Plan benefit in the form of a 50% QJSA unless the participant elects with written spousal consent to receive his or her benefit in the optional form of benefit of a single lump-sum payment or a 75% survivor annuity option.

For participants who die while employed by the Firm but who have not commenced benefit payments, their beneficiaries may elect to receive a single life annuity or a single lump sum payment equal to 100% of the participant's account.

Note 2. Summary of Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared using the accrual basis of accounting.

Use of Estimates

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

Investment Valuation and Income Recognition

Investments are reported 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. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodians, and insurance company. See Note 6 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 at the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Firm and are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statement of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation of fair value of investments presented in the accompanying statement of changes in net assets available for benefits.

Plan Management's Review of Subsequent Events

The Plan has evaluated subsequent events through October 7, 2026, the date the financial statements were available to be issued.

Note 3. Certified Investments

Certain information in the accompanying financial statements and ERISA-required supplementary information, related to investments held at December 31, 2025 and 2024, and net appreciation in fair value of investments and interest and dividends for the years ended December 31, 2025 and 2024, was obtained by management and agreed to or derived from information certified as complete and accurate by First State Trust Company, the trustee of the Plan.

Note 4. Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the services employees have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits under the Plan are accumulated based on employees' compensation during each year of credited service. The accumulated plan benefits for active employees will equal the accumulation, with interest, of the annual benefit accruals as of the benefit information date. Benefits payable under all circumstances (retirement, death, disability, and termination of employment) are included, to the extent they are deemed attributable to employee service rendered prior to the valuation date. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

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

The accumulated plan benefits information at January 1, 2025 was as follows:

Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	$	-
Participants entitled to deferred benefits		22,188
Other participants		19,137,393
		19,159,581
Non-vested benefits		-
Total actuarial present value of accumulated plan benefits	$	19,159,581

The change in the actuarial present value of accumulated plan benefits from January 1, 2024 to January 1, 2025 is attributable to the following:

Actuarial present value of accumulated plan benefits at beginning of year	$	13,551,733
Increase (decrease) during the year attributable to		
Benefit payments		(2,011,499)
Interest accumulation		772,363
Benefits accumulated		6,846,984
Net increase		5,607,848
Actuarial present value of accumulated plan benefits at end of year	$	19,159,581

The significant actuarial assumptions used in the Plan valuations as of January 1, 2025 were as follows:

Assumed rate of return on investments	3.50%
Mortality	2024 IRS Generational Mortality Tables

These actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits. The computations of the actuarial present value of accumulated plan benefits were made as of January 1, 2025. Had the valuations been performed as of December 31, there would be no material differences.

Note 5. Plan Termination

The Employer has the right to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

1. Annuity benefits of former employees or their beneficiaries who have been receiving benefits for at least three years, or who were eligible to receive benefits, three years prior to the Plan's termination.
2. Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC), up to the applicable limitations.
3. All other vested benefits (that is, vested benefits not insured by the PBGC).
4. All nonvested benefits.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivors' 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 for accumulated benefit obligations and may also depend on the level of benefits guaranteed by the PBGC.

Note 6. Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, *Fair Value Measurement,* provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability'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 assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

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

Interest-bearing cash: Valued at cost plus accrued interest.

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

	2025	2024
Level 1		
Mutual funds	$ 7,926,347	$ 5,363,471
Exchange traded funds	10,809,729	6,936,703
Interest-bearing cash	35,340	6,396
Investments at fair value	$ 18,771,416	$ 12,306,570

Note 7. Risks and Uncertainties

The Plan invests in various investment securities that are exposed to various risks such as interest rates, market and credit risks. Market values of investments may decline for a number of reasons, including changes in prevailing market and interest rates, increases in defaults and credit rating downgrades. Market risks include global events, which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that some changes could materially affect the amounts reported in the statement of net assets available for benefits.

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

Note 8. Tax Status

The Plan obtained its determination letter on November 17, 2025, in which the Internal Revenue Service (IRS) stated that the Plan and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter. However, Plan management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and therefore, believe that the Plan is qualified, and the related trust is tax-exempt

US GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 9. Related-Party and Party-in-Interest Transactions

Certain Plan investments are held by First State Trust Company, the trustee for the Plan. Ernst & Young LLP provides actuarial and related services for the Plan. As described in Note 2, the Plan paid certain expenses related to plan operations and investment activity to various services providers. These transactions are party-in-interest transactions under ERISA.

Note 10. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of the changes in net assets available for benefits per the financial statements for the years ended December 31, 2025 and 2024, to Form 5500:

	2025	2024
Increase in net assets available for benefits before transfer per the financial statement	$ 6,977,191	$ 5,640,074
Employer contributions receivable at December 31, 2023	-	6,844,791
Increase in net assets available benefits per Form 5500	$ 6,977,191	$ 12,484,865

Supplementary Information

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
Plan #081 / EIN: 74-1195457
December 31, 2025

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Investments:			
*	FDIC Bank Deposit Fund	Interest-bearing cash	$ 35,340	$ 35,340
	AB Short Duration High Yield ETF	Exchange-traded fund	1,752,971	1,811,267
	AB Income Fund Advisor Class	Exchange-traded fund	2,356,415	2,389,424
	AB Global Strategic Core Equities Fund	Exchange-traded fund	1,940,340	2,463,958
	U.S. Equity Power Buffer ETF	Exchange-traded fund	1,638,511	2,014,696
	iShares Core MSCI Total International Stock ETF	Exchange-traded fund	304,955	388,582
	iShares Core S&P 500 ETF	Exchange-traded fund	1,293,569	1,741,802
	AB Global Bond Fund, Inc.: Advisor Class	Mutual fund	4,247,563	4,326,064
	Intermediate Duration Portfolio	Mutual fund	2,040,036	2,106,758
	AB Emerging Markets Multi-Asset Advisor Class	Mutual fund	313,144	390,772
	AB Global Core Equity Portfolio Advisor Class	Mutual fund	1,023,433	1,102,753
			$ 16,946,277	$ 18,771,416

* Party-in-interest, as defined by ERISA

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Schedule H, Line 4j – Schedule of Reportable Transactions
Plan #081 / EIN: 74-1195457
December 31, 2025

The following category descriptions below explain how to interpret the attached schedule for the necessary elements needed for the Schedule H, Line 4j. The only format available from the Trustee is provided as attached. The description below describes how the provided schedule can be read to satisfy the reporting needs of the Schedule H, Line 4j.

Category 2 – Series of transactions with the same broker exceeds 5% of value.

(a) Identity of party involved – First State Trust Company.
(b) Description of assets – the "Asset Description" section identifies the fund name.
(c) Purchase price – "Current Value" column.
(d) Selling price - "Current Value" column.
(e) Lease Rental – Not applicable.
(f) Expenses incurred with transactions – "Trade Expense" column.
(g) Cost of assets – "Cost of Assets" column.
(h) Current value of assets on transaction date – "Current Value" column.
(i) Net gain or loss – "Net Gain or Loss" column.

Category 3 – Series of transactions in same security exceeds 5% of value.

(a) Identity of party involved – First State Trust Company.
(b) Description of assets – the "Asset Description" section identifies the fund name.
(c) Purchase price – "Current Value" column.
(d) Selling price - "Current Value" column.
(e) Lease Rental – Not applicable.
(f) Expenses incurred with transactions – "Trade Expense" column.
(g) Cost of assets – "Cost of Assets" column.
(h) Current value of assets on transaction date – "Current Value" column.
(i) Net gain or loss – "Net Gain or Loss" column.

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
Ab Collective I/glb Strategic Core Global Str						
5,541.031 Units Bought On 03/20/2025	50.44999700	0.00	279,545.00	279,545.00		2.27%
190.071 Units Bought On 04/08/2025	45.20010900	0.00	8,591.23	8,591.23		0.07%
8,057.497 Units Bought On 04/09/2025	48.35000200	0.00	389,580.00	389,580.00		3.16%
10.573 Units Sold On 04/22/2025	47.97219300	0.00	395.43	507.21	111.78	0.00%
12.108 Units Sold On 07/22/2025	53.63891600	0.00	452.84	649.46	196.62	0.01%
8.051 Units Sold On 01/22/2025	51.72152500	0.00	301.11	416.41	115.30	0.00%
				679,289.31	**423.70**	**5.52%**
Ab Global Bd Fd Inc						
1,432.643 Units Bought On 02/04/2025	6.88999900	0.00	9,870.91	9,870.91		0.08%
1,283.838 Units Bought On 01/03/2025	6.87000200	0.00	8,819.97	8,819.97		0.07%
60,328.467 Units Bought On 04/09/2025	6.85000000	0.00	413,250.00	413,250.00		3.36%
1,402.342 Units Bought On 04/02/2025	6.90000000	0.00	9,676.16	9,676.16		0.08%
1,209.144 Units Bought On 03/04/2025	6.95999800	0.00	8,415.64	8,415.64		0.07%
1,694.48 Units Bought On 08/04/2025	6.93999900	0.00	11,759.69	11,759.69		0.10%
83,749.275 Units Bought On 03/20/2025	6.90000000	0.00	577,870.00	577,870.00		4.69%
2,874.39 Units Bought On 07/09/2025	6.94000100	0.00	19,948.27	19,948.27		0.16%
0.185 Unit Bought On 06/05/2025	6.91891800	0.00	1.28	1.28		0.00%
1,481.555 Units Bought On 06/06/2025	6.90000000	0.00	10,222.73	10,222.73		0.08%
1,762.214 Units Bought On 07/02/2025	6.96000000	0.00	12,265.01	12,265.01		0.10%
1,726.36 Units Bought On 05/02/2025	6.94000000	0.00	11,980.94	11,980.94		0.10%
24.47 Units Bought On 05/05/2025	6.89987700	0.00	168.84	168.84		0.00%
1,486.847 Units Bought On 05/07/2025	6.91999900	0.00	10,288.98	10,288.98		0.08%
1,822.098 Units Bought On 06/03/2025	6.92000100	0.00	12,608.92	12,608.92		0.10%
1,310.206 Units Bought On 09/08/2025	6.99999800	0.00	9,171.44	9,171.44		0.07%
743.107 Units Bought On 09/22/2025	6.99000200	0.00	5,194.32	5,194.32		0.04%

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
1,775.837 Units Bought On 10/02/2025	6.97999800	0.00	12,395.34	12,395.34		0.10%
0.654 Unit Bought On 08/06/2025	6.97247700	0.00	4.56	4.56		0.00%
1,844.159 Units Bought On 09/03/2025	6.96000100	0.00	12,835.35	12,835.35		0.10%
0.984 Unit Bought On 10/06/2025	6.98170700	0.00	6.87	6.87		0.00%
2,002.315 Units Bought On 11/04/2025	7.01000000	0.00	14,036.23	14,036.23		0.11%
1,713.537 Units Bought On 12/02/2025	7.00000000	0.00	11,994.76	11,994.76		0.10%
74.195 Units Bought On 12/04/2025	6.97001100	0.00	517.14	517.14		0.00%
1,277.994 Units Bought On 12/05/2025	6.97000100	0.00	8,907.62	8,907.62		0.07%
14,547.836 Units Bought On 12/17/2025	6.96000000	0.00	101,252.94	101,252.94		0.82%
				1,293,463.91	**0.00**	**10.50%**
Alliancebernstein BD FD Inc Income						
1,333.373 Units Bought On 12/02/2025	6.51000100	0.00	8,680.26	8,680.26		0.07%
1,611.246 Units Bought On 11/04/2025	6.50000000	0.00	10,473.10	10,473.10		0.09%
1,579.2 Units Bought On 09/03/2025	6.45999800	0.00	10,201.63	10,201.63		0.08%
1,416.633 Units Bought On 10/02/2025	6.49000100	0.00	9,193.95	9,193.95		0.07%
1,659.761 Units Bought On 06/03/2025	6.34999800	0.00	10,539.48	10,539.48		0.09%
1,517.09 Units Bought On 05/02/2025	6.42000100	0.00	9,739.72	9,739.72		0.08%
40,390.032 Units Bought On 04/09/2025	6.31999900	0.00	255,265.00	255,265.00		2.07%
4,909.901 Units Bought On 04/11/2025	6.27000000	0.00	30,785.08	30,785.08		0.25%
1,475.814 Units Bought On 07/02/2025	6.43999800	0.00	9,504.24	9,504.24		0.08%
1,551.494 Units Bought On 08/04/2025	6.39999800	0.00	9,929.56	9,929.56		0.08%
1,036.567 Units Bought On 03/04/2025	6.45999700	0.00	6,696.22	6,696.22		0.05%
47,135.093 Units Bought On 03/20/2025	6.44000000	0.00	303,550.00	303,550.00		2.46%
1,156.285 Units Bought On 04/02/2025	6.42999700	0.00	7,434.91	7,434.91		0.06%
1,115.633 Units Bought On 01/03/2025	6.31999900	0.00	7,050.80	7,050.80		0.06%
1,240.656 Units Bought On 02/04/2025	6.34000000	0.00	7,865.76	7,865.76		0.06%

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
746.338 Units Bought On 02/07/2025	6.36000000	0.00	4,746.71	4,746.71		0.04%
				701,656.42	**0.00**	**5.70%**
FDIC Bank Deposit Fund FST						
1,501,997.55 Units Bought In 21 Transactions	100.00000000		1,501,997.55	1,501,997.55		12.20%
1,473,052.73 Units Sold In 14 Transactions	100.00000000		1,473,052.73	1,473,052.73	0.00	11.96%
				2,975,050.28	**0.00**	**24.16%**

NOTE : TURNOVER % BASED ON THE 01/01/2025 MARKET VALUE (EXCLUDING ACCRUALS AND PENDING TRANSACTIONS) OF 12,314,903.87

(5 % = 615,745.19)

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
*** No Broker Specified ***						
FDIC Bank Deposit Fund FST						
1,501,997.55 Units Bought In 21 Transactions	100.00000000		1,501,997.55	1,501,997.55		12.20%
1,473,052.73 Units Sold In 14 Transactions	100.00000000		1,473,052.73	1,473,052.73	0.00	11.96%
				2,975,050.28	**0.00**	**24.16%**
				2,975,050.28	**0.00**	**24.16%**
Data Aggregation Broker for Alliance Bernstein						
Ab Collective I/glb Strategic Core Global Str						
5,541.031 Units Bought On 03/20/2025	50.44999700	0.00	279,545.00	279,545.00		2.27%
190.071 Units Bought On 04/08/2025	45.20010900	0.00	8,591.23	8,591.23		0.07%
8,057.497 Units Bought On 04/09/2025	48.35000200	0.00	389,580.00	389,580.00		3.16%
10.573 Units Sold On 04/22/2025	47.97219300	0.00	395.43	507.21	111.78	0.00%
12.108 Units Sold On 07/22/2025	53.63891600	0.00	452.84	649.46	196.62	0.01%
8.051 Units Sold On 01/22/2025	51.72152500	0.00	301.11	416.41	115.30	0.00%
				679,289.31	**423.70**	**5.52%**
Ab Global Bd Fd Inc						
1,283.838 Units Bought On 01/03/2025	6.87000200	0.00	8,819.97	8,819.97		0.07%
1,432.643 Units Bought On 02/04/2025	6.88999900	0.00	9,870.91	9,870.91		0.08%
1,209.144 Units Bought On 03/04/2025	6.95999800	0.00	8,415.64	8,415.64		0.07%
83,749.275 Units Bought On 03/20/2025	6.90000000	0.00	577,870.00	577,870.00		4.69%
1,402.342 Units Bought On 04/02/2025	6.90000000	0.00	9,676.16	9,676.16		0.08%
60,328.467 Units Bought On 04/09/2025	6.85000000	0.00	413,250.00	413,250.00		3.36%
1,726.36 Units Bought On 05/02/2025	6.94000000	0.00	11,980.94	11,980.94		0.10%
24.47 Units Bought On 05/05/2025	6.89987700	0.00	168.84	168.84		0.00%
1,486.847 Units Bought On 05/07/2025	6.91999900	0.00	10,288.98	10,288.98		0.08%
1,822.098 Units Bought On 06/03/2025	6.92000100	0.00	12,608.92	12,608.92		0.10%
0.185 Unit Bought On 06/05/2025	6.91891800	0.00	1.28	1.28		0.00%
1,481.555 Units Bought On 06/06/2025	6.90000000	0.00	10,222.73	10,222.73		0.08%
1,762.214 Units Bought On 07/02/2025	6.96000000	0.00	12,265.01	12,265.01		0.10%

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
2,874.39 Units Bought On 07/09/2025	6.94000100	0.00	19,948.27	19,948.27		0.16%
1,694.48 Units Bought On 08/04/2025	6.93999900	0.00	11,759.69	11,759.69		0.10%
0.654 Unit Bought On 08/06/2025	6.97247700	0.00	4.56	4.56		0.00%
1,844.159 Units Bought On 09/03/2025	6.96000100	0.00	12,835.35	12,835.35		0.10%
1,310.206 Units Bought On 09/08/2025	6.99999800	0.00	9,171.44	9,171.44		0.07%
743.107 Units Bought On 09/22/2025	6.99000200	0.00	5,194.32	5,194.32		0.04%
1,775.837 Units Bought On 10/02/2025	6.97999800	0.00	12,395.34	12,395.34		0.10%
0.984 Unit Bought On 10/06/2025	6.98170700	0.00	6.87	6.87		0.00%
2,002.315 Units Bought On 11/04/2025	7.01000000	0.00	14,036.23	14,036.23		0.11%
1,713.537 Units Bought On 12/02/2025	7.00000000	0.00	11,994.76	11,994.76		0.10%
74.195 Units Bought On 12/04/2025	6.97001100	0.00	517.14	517.14		0.00%
1,277.994 Units Bought On 12/05/2025	6.97000100	0.00	8,907.62	8,907.62		0.07%
14,547.836 Units Bought On 12/17/2025	6.96000000	0.00	101,252.94	101,252.94		0.82%
				1,293,463.91	**0.00**	**10.50%**
Allianceberstein BD FD Inc Income						
1,115.633 Units Bought On 01/03/2025	6.31999900	0.00	7,050.80	7,050.80		0.06%
1,240.656 Units Bought On 02/04/2025	6.34000000	0.00	7,865.76	7,865.76		0.06%
746.338 Units Bought On 02/07/2025	6.36000000	0.00	4,746.71	4,746.71		0.04%
1,036.567 Units Bought On 03/04/2025	6.45999700	0.00	6,696.22	6,696.22		0.05%
47,135.093 Units Bought On 03/20/2025	6.44000000	0.00	303,550.00	303,550.00		2.46%
1,156.285 Units Bought On 04/02/2025	6.42999700	0.00	7,434.91	7,434.91		0.06%
40,390.032 Units Bought On 04/09/2025	6.31999900	0.00	255,265.00	255,265.00		2.07%
4,909.901 Units Bought On 04/11/2025	6.27000000	0.00	30,785.08	30,785.08		0.25%
1,517.09 Units Bought On 05/02/2025	6.42000100	0.00	9,739.72	9,739.72		0.08%
1,659.761 Units Bought On 06/03/2025	6.34999800	0.00	10,539.48	10,539.48		0.09%
1,475.814 Units Bought On 07/02/2025	6.43999800	0.00	9,504.24	9,504.24		0.08%
1,551.494 Units Bought On 08/04/2025	6.39999800	0.00	9,929.56	9,929.56		0.08%
1,579.2 Units Bought On 09/03/2025	6.45999800	0.00	10,201.63	10,201.63		0.08%
1,416.633 Units Bought On 10/02/2025	6.49000100	0.00	9,193.95	9,193.95		0.07%
1,611.246 Units Bought On 11/04/2025	6.50000000	0.00	10,473.10	10,473.10		0.09%

Consolidation: Baker Botts LLP Plan B - Cons

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
1,333.373 Units Bought On 12/02/2025	6.51000100	0.00	8,680.26	8,680.26		0.07%
				701,656.42	**0.00**	**5.70%**
				2,674,409.64	**423.70**	**21.71%**

NOTE : TURNOVER % BASED ON THE 01/01/2025 MARKET VALUE (EXCLUDING ACCRUALS AND PENDING TRANSACTIONS) OF 12,314,903.87

(5 % = 615,745.19)

END OF REPORT

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Summary of plan provisions

Original Effective date	1 January 2022
Plan Year	January 1 to December 31
Employees covered	Partners of Baker Botts L.L.P.
Eligibility requirements	Covered Employees become Participants on January 1 following the date they become a Partner. A Partner who joins the Firm as a Partner during a Plan Year and is identified on Schedules A, B, or C for that Plan Year will participate on January 1 of that Plan Year.
Year of Service	The number of calendar years during which a participant has earned 1,000 hours of service.
Annual earnings	All non-deferred compensation (before withholdings and deductions for taxes or other purposes). Annual Earnings are currently limited according to IRC Section 401(a)(17).
Cash Balance Account	The notional account equal to the lesser of a Participant's Basic Account and Maximum Account, but not less than the Participant's Preservation Account.
Basic Account	The sum of a Participant's Cash Balance Credits and Basic Interest Credits.
Maximum Account	The sum of a Participant's Cash Balance Credits and Maximum Interest Credits.
Preservation Account	The sum of a Participant's Cash Balance Credits.
Cash Balance Credit	The lesser of the Formula Credit Amount and the Maximum Credit Amount, credited on the last day of the Plan Year for each Participant who (i) is providing service as a Partner on the last day of the Plan Year, (ii) meets the eligibility requirements, and (iii) is identified, as of the last day of the relevant Plan Year, on Schedule A, B, or C to the Plan
Formula Credit Amount	

Schedule	Formula Credit Amount
A	$10,000
B	$30,000
C	10% of the Participant's Net Income in excess of $300,000

Maximum Credit Amount

10% of the actuarial present value of the Code Section 415(b) dollar limitation applicable to the Participant for the Plan Year based on the Participant's age as of the last day of the Plan Year. The actuarial present value of the Code Section 415(b) dollar limit at a Participant's attained age shall be determined using a 7% interest assumption, truncated to the nearest $1,000. In no event shall the Maximum Credit Amounts for any age preceding age 65 exceed the amount determined at age 65.

Age	Amount	Age	Amount
34	$36,500	50	$83,500
35	38,500	51	88,000
36	40,500	52	92,500
37	42,500	53	97,500
38	45,000	54	102,000
39	47,000	55	102,000
40	49,500	56	102,000
41	52,000	57	102,000
42	55,000	58	102,000
43	58,000	59	102,000
44	61,000	60	102,000
45	64,500	61	102,000
46	67,500	62	102,000
47	71,500	63	102,000
48	75,000	64	102,000
49	79,000	65	102,000

Basic Interest Credit

The Basic Interest Credit shall be based upon a market rate of return. For purposes of the Plan, the market rate of return shall be based upon the Rate of Return (defined below). The Basic Interest Credit shall be determined by applying the Rate of Return to the Basic Account as of the beginning of the Plan Year prior to the Cash Balance Credit accrued for the current Plan Year. For any Plan Year in which a distribution is made to a Participant or Beneficiary, the Basic Interest Credit shall cease as of the last day of the Plan Year immediately preceding the Plan Year in which the distribution is made.

Rate of Return for any Plan Year shall be equal to the Change in Net Asset Value divided by the Adjusted Assets. The Change in Net Asset Value means the market value of assets at the end of the Plan Year, reduced by the market value of assets at the end of the prior Plan Year and the contributions made during the Plan Year, and increased by the benefit payments made during the Plan Year.

Adjusted Assets means the market value of the assets at the end of the prior Plan Year, increased by the value of any contributions made during the Plan Year, and reduced by the value of benefit payments made during the Plan Year.

Maximum Interest Credit

The Maximum Interest Credit shall be the amount determined by applying a 5% annualized rate of return to the Participant's Maximum Account as of the beginning of the Plan Year prior to the Cash Balance Credit accrued for the current Plan Year. For any Plan Year in which a Plan distribution is made to a Participant or Beneficiary, the Maximum Interest Credit shall cease as of the last day of the Plan Year immediately preceding the Plan Year in which the distribution is made.

Normal retirement

Eligibility

A Participant's Normal Retirement Date is the last day of the Plan Year in which the Participant attains age 65. Participants are 100% vested in their benefit at all times.

Benefit

Cash Balance Account

Termination

Eligibility

Participants are 100% vested in their benefit at all times.

Benefit

Cash Balance Account

Pre-retirement death

Eligibility

A Beneficiary, if designated by the Participant, shall be entitled to a death benefit based on the Participant's Cash Balance Account.

Benefit

If the Beneficiary is not the Participant's surviving spouse, the death benefit shall be a lump sum payment equal to the Participant's Cash Balance Account. If the Beneficiary is the Participant's surviving spouse, the death benefit shall be an annuity actuarially equivalent to the Participant's Cash Balance Account, unless an election is made to receive the benefit as a lump sum.

Actuarial equivalence

Annuities of equal value to the Cash Balance Account are converted using the following actuarial assumptions:

Interest rate:	5%
Pre-retirement mortality:	None
Post-retirement mortality:	Applicable mortality under IRC 417(e)

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Summary of plan provisions

Normal form of payment

Married participants	50% joint and survivor annuity.
Non-married participants	Single life annuity.

Optional forms	75% joint and survivor annuity Lump sum

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
Plan #081 / EIN: 74-1195457
December 31, 2025

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Investments:			
*	FDIC Bank Deposit Fund	Interest-bearing cash	$ 35,340	$ 35,340
	AB Short Duration High Yield ETF	Exchange-traded fund	1,752,971	1,811,267
	AB Income Fund Advisor Class	Exchange-traded fund	2,356,415	2,389,424
	AB Global Strategic Core Equities Fund	Exchange-traded fund	1,940,340	2,463,958
	U.S. Equity Power Buffer ETF	Exchange-traded fund	1,638,511	2,014,696
	iShares Core MSCI Total International Stock ETF	Exchange-traded fund	304,955	388,582
	iShares Core S&P 500 ETF	Exchange-traded fund	1,293,569	1,741,802
	AB Global Bond Fund, Inc.: Advisor Class	Mutual fund	4,247,563	4,326,064
	Intermediate Duration Portfolio	Mutual fund	2,040,036	2,106,758
	AB Emerging Markets Multi-Asset Advisor Class	Mutual fund	313,144	390,772
	AB Global Core Equity Portfolio Advisor Class	Mutual fund	1,023,433	1,102,753
			$ 16,946,277	$ 18,771,416

* Party-in-interest, as defined by ERISA

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Line 26 – Schedule of active participant data

Years of plan participation											
Attained age	0 to 1	1 to 4	5 to 9	10 to 14	15 to 19	20 to 24	25 to 29	30 to 34	35 to 39	40 & up	Total
Under 25											
25 to 29											
30 to 34											
35 to 39		8									8
40 to 44		11									11
45 to 49		22									22
50 to 54		30									30
55 to 59		26									26
60 to 64		15									15
65 to 69		6									6
70 & up											
Total		118									118

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Statement of actuarial assumptions/methods

Prescribed funding assumptions

Mortality	IRS Generational Mortality Table, as noted in IRS Regulation Section 1.430(h)(3)-1

IRS mandated segment rates	24-month average segment rates specified in IRC §430(h)(2) absent §430(h)(2)(C)(iv)	Adjusted 24-month average segment rates, based on the IIJA applicable percentage of the 25-year average rates
1st segment rate	5.00% per year	5.00% per year
2nd segment rate	5.27% per year	5.27% per year
3rd segment rate	5.40% per year	5.50% per year
Effective interest rate[1]	5.28% per year	5.29% per year

[1] The effective interest rate is the single equivalent rate based on the above January 2025 IRS mandated segment rates and expected future benefit payments.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Statement of actuarial assumptions/methods

Non-prescribed assumptions

Administrative expenses included in Funding Target Normal Cost	$89,850 *Rationale: The administrative expenses are based on actual expenses paid by the plan in the prior year.*
Interest crediting rate	3.50% *Rationale: Based on weighted average long-term historical returns for each asset class within the trust.*
Retirement	Current Age / Retirement Age Under 65 / 65 65 or older / One year from the valuation date *Rationale: The cash balance is always fully vested and therefore the benefit value is not significantly affected by the assumed benefit commencement.*
Turnover	None *Rationale: The cash balance is always fully vested and therefore the benefit value is not significantly affected by the assumed benefit commencement.*
Disability	None *Rationale: The cash balance is always fully vested and therefore the benefit value is not significantly affected by the assumed benefit commencement.*
Marital status	80% of participants are assumed to be married. *Rationale: Assumption was selected based on discussions with employer representatives.*
Spouse age	Husbands are assumed to be 4 years older than their wives. *Rationale: Assumption was selected based on discussions with employer representatives.*
Deferred commencement age	100% at age 65 *Rationale: The cash balance is always fully vested and therefore the benefit value is not significantly affected by the assumed benefit commencement.*
Form of benefit election	Lump sum *Rationale: Assumption was selected based on discussions with employer representatives.*

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Statement of actuarial assumptions/methods

Actuarial methods

Measurement date	1 January 2025
Census date	1 January 2025
Asset Method	The Actuarial Value of Assets is set equal to the Market Value of Assets.
Mandated interest rates for Funding Target	Segment rates representing the 24-month average of corporate bond yields, adjusted as necessary to fall within a specified range that is determined based on a percentage of the average of the corresponding segment rates for the 25-year period ending on September 30 preceding the calendar year that includes the first day of that plan year in accordance with §430(h)(2)(c)(iv). These rates reflect interest rate relief as defined by IIJA. The applicable month for the determination of the segment rates is January.
Events and trends not included	We are not aware of any event or trend which has occurred that would have a material impact on this valuation.
Actuarial Cost Method	Unit Credit Cost Method--This is the prescribed method under PPA. Under this method a projected benefit is determined at every age at which a participant could receive a benefit. This benefit is based on accrued service and current pay. Different benefits will be calculated in accordance with the plan provisions for the different decrements. The accrued liability is determined by discounting the benefits to which the employee is expected to become eligible with interest from the valuation date to the payment date. The normal cost is the difference between the accrued liability determined as if the participant had an additional year of service and the otherwise calculated accrued liability.
Employees valued	All active and inactive participants eligible as of the measurement dates are included in this valuation.
Benefits valued	To the best of our knowledge, all benefits have been included in the liabilities, in accordance with the actuarial assumptions.
Section 415 limits	Benefits were limited in accordance with IRC Section 415(b).

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Part V – Statement of actuarial assumptions/methods

Disclosures related to modeling	EY uses ProVal, a licensed actuarial modeling software developed by Winklevoss Technologies, to generate actuarial liabilities and normal costs using standard actuarial cost methods, the documented valuation assumptions, and the client's census data. We are not aware of any material limitations that would prevent ProVal from being suitable for generating these liabilities and costs. The signing actuaries have reviewed model results to ensure they reflect the applicable data, assumptions, methods and plan provisions. The signing actuaries have reviewed model results to ensure they are consistent with the prescribed calculation methods.
Other considerations	The financial data submitted by the plan sponsor is being used without further audit. The census data submitted appears to be consistent with the data used for the prior valuation.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Line 24 – Changes in actuarial assumptions

Administrative expenses included in the Funding Target Normal Cost were updated from $97,000 in 2024 to $89,850 in 2025.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB – Statement by Enrolled Actuary

In preparing this Schedule SB, the actuary relied on other parties for, and applied reasonability tests to, information on assets, contributions, plan provisions and data on people covered by the plan.

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the economic and demographic assumptions, increases or decreases expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions or applicable law. Because of limited scope, EY performed no analysis of the potential range of such future differences.

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B
[EIN# 74-1195457 / Plan# 081]
Schedule SB, Line 22 – Description of weighted average retirement age

The calculated weighted average age of 65 is determined using the proportion of employees expected to retire at each potential retirement age.

(1) Age	(2) Retirement Rate	(3) Employees	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	0%	1,000	0	0
56	0%	1,000	0	0
57	0%	1,000	0	0
58	0%	1,000	0	0
59	0%	1,000	0	0
60	0%	1,000	0	0
61	0%	1,000	0	0
62	0%	1,000	0	0
63	0%	1,000	0	0
64	0%	1,000	0	0
65	100%	1,000	1,000	65,000
Total			1,000	65,000
Average				65

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.)
- ☒ a single-employer plan
- ☐ a DFE (specify) _____

B This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here ▶ ☐

D Check box if filing under:
- ☒ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ▶ ☐

Part II Basic Plan Information - enter all requested information

1a Name of plan
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN-B

1b Three-digit plan number (PN) ▶ 081

1c Effective date of plan 01/01/2022

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)
BAKER BOTTS L.L.P.

910 LOUISIANA STREET

HOUSTON TX 77002-4916

2b Employer Identification Number (EIN) 74-1195457

2c Plan Sponsor's telephone number 713-229-1234

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	David Schiller	10/7/26	DAVID SCHILLER
	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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2025)
v. 250312

Baker Botts L.L.P. Partner Cash Balance Retirement Plan – Plan B

Schedule H, Line 4j – Schedule of Reportable Transactions
Plan #081 / EIN: 74-1195457
December 31, 2025

The following category descriptions below explain how to interpret the attached schedule for the necessary elements needed for the Schedule H, Line 4j. The only format available from the Trustee is provided as attached. The description below describes how the provided schedule can be read to satisfy the reporting needs of the Schedule H, Line 4j.

Category 2 – Series of transactions with the same broker exceeds 5% of value.

(a) Identity of party involved – First State Trust Company.
(b) Description of assets – the "Asset Description" section identifies the fund name.
(c) Purchase price – "Current Value" column.
(d) Selling price - "Current Value" column.
(e) Lease Rental – Not applicable.
(f) Expenses incurred with transactions – "Trade Expense" column.
(g) Cost of assets – "Cost of Assets" column.
(h) Current value of assets on transaction date – "Current Value" column.
(i) Net gain or loss – "Net Gain or Loss" column.

Category 3 – Series of transactions in same security exceeds 5% of value.

(a) Identity of party involved – First State Trust Company.
(b) Description of assets – the "Asset Description" section identifies the fund name.
(c) Purchase price – "Current Value" column.
(d) Selling price - "Current Value" column.
(e) Lease Rental – Not applicable.
(f) Expenses incurred with transactions – "Trade Expense" column.
(g) Cost of assets – "Cost of Assets" column.
(h) Current value of assets on transaction date – "Current Value" column.
(i) Net gain or loss – "Net Gain or Loss" column.

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
Ab Collective I/glb Strategic Core Global Str						
5,541.031 Units Bought On 03/20/2025	50.44999700	0.00	279,545.00	279,545.00		2.27%
190.071 Units Bought On 04/08/2025	45.20010900	0.00	8,591.23	8,591.23		0.07%
8,057.497 Units Bought On 04/09/2025	48.35000200	0.00	389,580.00	389,580.00		3.16%
10.573 Units Sold On 04/22/2025	47.97219300	0.00	395.43	507.21	111.78	0.00%
12.108 Units Sold On 07/22/2025	53.63891600	0.00	452.84	649.46	196.62	0.01%
8.051 Units Sold On 01/22/2025	51.72152500	0.00	301.11	416.41	115.30	0.00%
				679,289.31	**423.70**	**5.52%**
Ab Global Bd Fd Inc						
1,432.643 Units Bought On 02/04/2025	6.88999900	0.00	9,870.91	9,870.91		0.08%
1,283.838 Units Bought On 01/03/2025	6.87000200	0.00	8,819.97	8,819.97		0.07%
60,328.467 Units Bought On 04/09/2025	6.85000000	0.00	413,250.00	413,250.00		3.36%
1,402.342 Units Bought On 04/02/2025	6.90000000	0.00	9,676.16	9,676.16		0.08%
1,209.144 Units Bought On 03/04/2025	6.95999800	0.00	8,415.64	8,415.64		0.07%
1,694.48 Units Bought On 08/04/2025	6.93999900	0.00	11,759.69	11,759.69		0.10%
83,749.275 Units Bought On 03/20/2025	6.90000000	0.00	577,870.00	577,870.00		4.69%
2,874.39 Units Bought On 07/09/2025	6.94000100	0.00	19,948.27	19,948.27		0.16%
0.185 Unit Bought On 06/05/2025	6.91891800	0.00	1.28	1.28		0.00%
1,481.555 Units Bought On 06/06/2025	6.90000000	0.00	10,222.73	10,222.73		0.08%
1,762.214 Units Bought On 07/02/2025	6.96000000	0.00	12,265.01	12,265.01		0.10%
1,726.36 Units Bought On 05/02/2025	6.94000000	0.00	11,980.94	11,980.94		0.10%
24.47 Units Bought On 05/05/2025	6.89987700	0.00	168.84	168.84		0.00%
1,486.847 Units Bought On 05/07/2025	6.91999900	0.00	10,288.98	10,288.98		0.08%
1,822.098 Units Bought On 06/03/2025	6.92000100	0.00	12,608.92	12,608.92		0.10%
1,310.206 Units Bought On 09/08/2025	6.99999800	0.00	9,171.44	9,171.44		0.07%
743.107 Units Bought On 09/22/2025	6.99000200	0.00	5,194.32	5,194.32		0.04%

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
1,775.837 Units Bought On 10/02/2025	6.97999800	0.00	12,395.34	12,395.34		0.10%
0.654 Unit Bought On 08/06/2025	6.97247700	0.00	4.56	4.56		0.00%
1,844.159 Units Bought On 09/03/2025	6.96000100	0.00	12,835.35	12,835.35		0.10%
0.984 Unit Bought On 10/06/2025	6.98170700	0.00	6.87	6.87		0.00%
2,002.315 Units Bought On 11/04/2025	7.01000000	0.00	14,036.23	14,036.23		0.11%
1,713.537 Units Bought On 12/02/2025	7.00000000	0.00	11,994.76	11,994.76		0.10%
74.195 Units Bought On 12/04/2025	6.97001100	0.00	517.14	517.14		0.00%
1,277.994 Units Bought On 12/05/2025	6.97000100	0.00	8,907.62	8,907.62		0.07%
14,547.836 Units Bought On 12/17/2025	6.96000000	0.00	101,252.94	101,252.94		0.82%
				1,293,463.91	**0.00**	**10.50%**
Alliancebernstein BD FD Inc Income						
1,333.373 Units Bought On 12/02/2025	6.51000100	0.00	8,680.26	8,680.26		0.07%
1,611.246 Units Bought On 11/04/2025	6.50000000	0.00	10,473.10	10,473.10		0.09%
1,579.2 Units Bought On 09/03/2025	6.45999800	0.00	10,201.63	10,201.63		0.08%
1,416.633 Units Bought On 10/02/2025	6.49000100	0.00	9,193.95	9,193.95		0.07%
1,659.761 Units Bought On 06/03/2025	6.34999800	0.00	10,539.48	10,539.48		0.09%
1,517.09 Units Bought On 05/02/2025	6.42000100	0.00	9,739.72	9,739.72		0.08%
40,390.032 Units Bought On 04/09/2025	6.31999900	0.00	255,265.00	255,265.00		2.07%
4,909.901 Units Bought On 04/11/2025	6.27000000	0.00	30,785.08	30,785.08		0.25%
1,475.814 Units Bought On 07/02/2025	6.43999800	0.00	9,504.24	9,504.24		0.08%
1,551.494 Units Bought On 08/04/2025	6.39999800	0.00	9,929.56	9,929.56		0.08%
1,036.567 Units Bought On 03/04/2025	6.45999700	0.00	6,696.22	6,696.22		0.05%
47,135.093 Units Bought On 03/20/2025	6.44000000	0.00	303,550.00	303,550.00		2.46%
1,156.285 Units Bought On 04/02/2025	6.42999700	0.00	7,434.91	7,434.91		0.06%
1,115.633 Units Bought On 01/03/2025	6.31999900	0.00	7,050.80	7,050.80		0.06%
1,240.656 Units Bought On 02/04/2025	6.34000000	0.00	7,865.76	7,865.76		0.06%

Schedule of Reportable 5% Transactions

Reported By Issue

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
746.338 Units Bought On 02/07/2025	6.36000000	0.00	4,746.71	4,746.71		0.04%
				701,656.42	**0.00**	**5.70%**
FDIC Bank Deposit Fund FST						
1,501,997.55 Units Bought In 21 Transactions	100.00000000		1,501,997.55	1,501,997.55		12.20%
1,473,052.73 Units Sold In 14 Transactions	100.00000000		1,473,052.73	1,473,052.73	0.00	11.96%
				2,975,050.28	**0.00**	**24.16%**

NOTE : TURNOVER % BASED ON THE 01/01/2025 MARKET VALUE (EXCLUDING ACCRUALS AND PENDING TRANSACTIONS) OF 12,314,903.87

(5 % = 615,745.19)

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
*** No Broker Specified ***						
FDIC Bank Deposit Fund FST						
1,501,997.55 Units Bought In 21 Transactions	100.00000000		1,501,997.55	1,501,997.55		12.20%
1,473,052.73 Units Sold In 14 Transactions	100.00000000		1,473,052.73	1,473,052.73	0.00	11.96%
				2,975,050.28	**0.00**	**24.16%**
				2,975,050.28	**0.00**	**24.16%**
Data Aggregation Broker for Alliance Bernstein						
Ab Collective I/glb Strategic Core Global Str						
5,541.031 Units Bought On 03/20/2025	50.44999700	0.00	279,545.00	279,545.00		2.27%
190.071 Units Bought On 04/08/2025	45.20010900	0.00	8,591.23	8,591.23		0.07%
8,057.497 Units Bought On 04/09/2025	48.35000200	0.00	389,580.00	389,580.00		3.16%
10.573 Units Sold On 04/22/2025	47.97219300	0.00	395.43	507.21	111.78	0.00%
12.108 Units Sold On 07/22/2025	53.63891600	0.00	452.84	649.46	196.62	0.01%
8.051 Units Sold On 01/22/2025	51.72152500	0.00	301.11	416.41	115.30	0.00%
				679,289.31	**423.70**	**5.52%**
Ab Global Bd Fd Inc						
1,283.838 Units Bought On 01/03/2025	6.87000200	0.00	8,819.97	8,819.97		0.07%
1,432.643 Units Bought On 02/04/2025	6.88999900	0.00	9,870.91	9,870.91		0.08%
1,209.144 Units Bought On 03/04/2025	6.95999800	0.00	8,415.64	8,415.64		0.07%
83,749.275 Units Bought On 03/20/2025	6.90000000	0.00	577,870.00	577,870.00		4.69%
1,402.342 Units Bought On 04/02/2025	6.90000000	0.00	9,676.16	9,676.16		0.08%
60,328.467 Units Bought On 04/09/2025	6.85000000	0.00	413,250.00	413,250.00		3.36%
1,726.36 Units Bought On 05/02/2025	6.94000000	0.00	11,980.94	11,980.94		0.10%
24.47 Units Bought On 05/05/2025	6.89987700	0.00	168.84	168.84		0.00%
1,486.847 Units Bought On 05/07/2025	6.91999900	0.00	10,288.98	10,288.98		0.08%
1,822.098 Units Bought On 06/03/2025	6.92000100	0.00	12,608.92	12,608.92		0.10%
0.185 Unit Bought On 06/05/2025	6.91891800	0.00	1.28	1.28		0.00%
1,481.555 Units Bought On 06/06/2025	6.90000000	0.00	10,222.73	10,222.73		0.08%
1,762.214 Units Bought On 07/02/2025	6.96000000	0.00	12,265.01	12,265.01		0.10%

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
2,874.39 Units Bought On 07/09/2025	6.94000100	0.00	19,948.27	19,948.27		0.16%
1,694.48 Units Bought On 08/04/2025	6.93999900	0.00	11,759.69	11,759.69		0.10%
0.654 Unit Bought On 08/06/2025	6.97247700	0.00	4.56	4.56		0.00%
1,844.159 Units Bought On 09/03/2025	6.96000100	0.00	12,835.35	12,835.35		0.10%
1,310.206 Units Bought On 09/08/2025	6.99999800	0.00	9,171.44	9,171.44		0.07%
743.107 Units Bought On 09/22/2025	6.99000200	0.00	5,194.32	5,194.32		0.04%
1,775.837 Units Bought On 10/02/2025	6.97999800	0.00	12,395.34	12,395.34		0.10%
0.984 Unit Bought On 10/06/2025	6.98170700	0.00	6.87	6.87		0.00%
2,002.315 Units Bought On 11/04/2025	7.01000000	0.00	14,036.23	14,036.23		0.11%
1,713.537 Units Bought On 12/02/2025	7.00000000	0.00	11,994.76	11,994.76		0.10%
74.195 Units Bought On 12/04/2025	6.97001100	0.00	517.14	517.14		0.00%
1,277.994 Units Bought On 12/05/2025	6.97000100	0.00	8,907.62	8,907.62		0.07%
14,547.836 Units Bought On 12/17/2025	6.96000000	0.00	101,252.94	101,252.94		0.82%
				1,293,463.91	**0.00**	**10.50%**
Allianceberstein BD FD Inc Income						
1,115.633 Units Bought On 01/03/2025	6.31999900	0.00	7,050.80	7,050.80		0.06%
1,240.656 Units Bought On 02/04/2025	6.34000000	0.00	7,865.76	7,865.76		0.06%
746.338 Units Bought On 02/07/2025	6.36000000	0.00	4,746.71	4,746.71		0.04%
1,036.567 Units Bought On 03/04/2025	6.45999700	0.00	6,696.22	6,696.22		0.05%
47,135.093 Units Bought On 03/20/2025	6.44000000	0.00	303,550.00	303,550.00		2.46%
1,156.285 Units Bought On 04/02/2025	6.42999700	0.00	7,434.91	7,434.91		0.06%
40,390.032 Units Bought On 04/09/2025	6.31999900	0.00	255,265.00	255,265.00		2.07%
4,909.901 Units Bought On 04/11/2025	6.27000000	0.00	30,785.08	30,785.08		0.25%
1,517.09 Units Bought On 05/02/2025	6.42000100	0.00	9,739.72	9,739.72		0.08%
1,659.761 Units Bought On 06/03/2025	6.34999800	0.00	10,539.48	10,539.48		0.09%
1,475.814 Units Bought On 07/02/2025	6.43999800	0.00	9,504.24	9,504.24		0.08%
1,551.494 Units Bought On 08/04/2025	6.39999800	0.00	9,929.56	9,929.56		0.08%
1,579.2 Units Bought On 09/03/2025	6.45999800	0.00	10,201.63	10,201.63		0.08%
1,416.633 Units Bought On 10/02/2025	6.49000100	0.00	9,193.95	9,193.95		0.07%
1,611.246 Units Bought On 11/04/2025	6.50000000	0.00	10,473.10	10,473.10		0.09%

Consolidation: Baker Botts LLP Plan B - Cons

Schedule of Reportable 5% Transactions

Reported By Broker

Asset Description	Buy or Sell Price	Trade Expense	Cost of Asset	Current Value	Net Gain or Loss	% Turnover
1,333.373 Units Bought On 12/02/2025	6.51000100	0.00	8,680.26	8,680.26		0.07%
				701,656.42	**0.00**	**5.70%**
				2,674,409.64	**423.70**	**21.71%**

NOTE : TURNOVER % BASED ON THE 01/01/2025 MARKET VALUE (EXCLUDING ACCRUALS AND PENDING TRANSACTIONS) OF 12,314,903.87

(5 % = 615,745.19)

END OF REPORT

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
BAKER BOTTS L.L.P. PARTNER CASH BALANCE RETIREMENT PLAN - PLAN B

B Three-digit plan number (PN) ▶ 081

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
BAKER BOTTS L.L.P.

D Employer Identification Number (EIN)
74-1195457

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	19124885
b Actuarial value	**2b**	19124885

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	0	0	0
b For terminated vested participants	1	102897	102897
c For active participants	118	16259764	16259764
d Total	119	16362661	16362661

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**	5.29 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	5606280
b Expected plan-related expenses	**6b**	89850
c Target normal cost	**6c**	5696130

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

DC DREW CUMBIE
Signature of actuary

10/7/2026
Date

DREW CUMBIE, FSA, EA
Type or print name of actuary

26-08509
Most recent enrollment number

ERNST & YOUNG L.L.P.
Firm name

713-276-4507
Telephone number (including area code)

1401 MCKINNEY ST SUITE 2400
HOUSTON, TX 77010
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	0
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	0
10	Interest on line 9 using prior year's actual return of 7.76 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2589929
	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 5.06 %		131050
	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		2720979
	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	0

Part III Funding Percentages

14	Funding target attainment percentage	14	116.88%
15	Adjusted funding target attainment percentage	15	116.88%
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	113.78%
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
03/18/2026	7383342	0			
			Totals ▶ 18(b)	7383342	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	6937523

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	☐ N/A, full yield curve used
5.00%	5.27%	5.50 %	

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	65

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

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

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	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**	5696130
b Excess assets, if applicable, but not greater than line 31a	**31b**	2762224

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
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**	2933906

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

36 Additional cash requirement (line 34 minus line 35)	**36**	2933906
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	6937523

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

a Total (excess, if any, of line 37 over line 36)	**38a**	4003617
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