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
BLOOMBERG L.P. 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 08/15/1995

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)
BLOOMBERG L.P.

731 LEXINGTON AVENUE
NEW YORK, NY 10022

2b Employer Identification Number (EIN)
13-3417984

2c Plan Sponsor's telephone number
212-617-2000

2d Business code (see instructions)
541990

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.	10/08/2026	EMILY EATON
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	20110
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)**	14853
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	15037
b	Retired or separated participants receiving benefits	**6b**	141
c	Other retired or separated participants entitled to future benefits	**6c**	5323
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	20501
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	35
f	Total. Add lines **6d** and **6e**.	**6f**	20536
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)**	19208
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)**	19673
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	240
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE 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 BLOOMBERG L.P. 401(K) PLAN	**B** Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BLOOMBERG L.P.	**D** Employer Identification Number (EIN) 13-3417984

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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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)

EMPOWER ANNUITY INSURANCE COMPANY

84-0467907

(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?
64 15 16 50	NONE	232630	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

EMPOWER FINANCIAL SERVICES, INC.

84-0965407

(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?
59 33 63 72	NONE	11125	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

(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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
BLOOMBERG L.P. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-3417984

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX RETIREMENT NON-LENDA

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3250773-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2030 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3148951-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2035 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3168065-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2040 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3185003-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2045 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3196176-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2050 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3217294-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2055 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
81-3223239-001	C	0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2060 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 81-3239005-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2065 NON-LENDABLE M

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 84-1957801-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA GLOBAL ALL CAP EQUITY EX-US IN

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 90-0337987-456	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 155420763

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA S&P 500 INDEX FUND CLASS K

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 90-0337987-388	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES SMALL MID CAP GRWTH T

b Name of sponsor of entity listed in (a): LOOMIS SAYLES TRUST COMPANY, LLC

c EIN-PN 84-6391546-016	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 144048214

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA RUSSELL SMALL/MID CAP INDEX FU

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 90-0337987-461	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 308769667

a Name of MTIA, CCT, PSA, or 103-12 IE: PRUDENTIAL CORE PLUS BOND FUND 5

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST COMPANY

c EIN-PN 23-6994310-165	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 155242781

a Name of MTIA, CCT, PSA, or 103-12 IE: SSGA S&P 500 INDEX NON LEND M

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 32-6528132-080	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1449764351

a Name of MTIA, CCT, PSA, or 103-12 IE: GALLIARD MANAGED INCOME FUND MC

b Name of sponsor of entity listed in (a): SEI TRUST COMPANY

c EIN-PN 83-6516714-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 71953117

a Name of MTIA, CCT, PSA, or 103-12 IE: HARBOR CAPITAL APPRECIATION CIT 4

b Name of sponsor of entity listed in (a): HARBOR TRUST COMPANY, INC.

c EIN-PN 84-4022934-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 475493272

a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY CONTRAFUND COMMINGLED POOL

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

c EIN-PN 04-3022712-133	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 422199724

a Name of MTIA, CCT, PSA, or 103-12 IE: TS&W INTERNATIONAL LRGCP EQUITY TRU

b Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY - TS&W

c EIN-PN 26-6773274-003	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 127705816

a Name of MTIA, CCT, PSA, or 103-12 IE: AB SMID VALUE P-2 CLASS

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

c EIN-PN 04-6948485-025	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 55512686

a Name of MTIA, CCT, PSA, or 103-12 IE: PARNASSUS SUSTAINABLE CORE EQUITY C

b Name of sponsor of entity listed in (a): PARNASSUS COLLECTIVE INVESTMENT TRUST

c EIN-PN 85-3199856-144	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 55948234

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

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 16-1673805-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 281446543

a Name of MTIA, CCT, PSA, or 103-12 IE: STATE ST REAL ASSET NL CL C

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 90-0337987-280	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8660100

a Name of MTIA, CCT, PSA, or 103-12 IE: STATE ST US BND INDX NL CL M

b Name of sponsor of entity listed in (a): STATE STREET BANK AND TRUST COMPANY

c EIN-PN 90-0337987-495	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 96407637

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX RET NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4590893-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 90840771

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2030 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4462201-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 150598795

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2035 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4480429-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 266824140

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2040 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4496468-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 376629802

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2045 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4514357-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 463085177

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2050 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4532215-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 463434850

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2055 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4552063-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 335886477

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2060 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 82-4575448-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 229938812

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2065 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 84-1944762-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 95868355

a Name of MTIA, CCT, PSA, or 103-12 IE: LIFEPATH INDEX 2070 NON-LENDABLE J

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO, N.A.

c EIN-PN 99-4117143-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4532067

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

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

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

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

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

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

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

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

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

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
BLOOMBERG L.P. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-3417984

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	25600864	25256375
(9) Value of interest in common/collective trusts	1c(9)	5283132336	6286212151
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	399059078	447654020
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	25446500	33453747

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	5733238778	6792576293
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h	0	0
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	5733238778	6792576293

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)	94347506	
(B) Participants	2a(1)(B)	280652046	
(C) Others (including rollovers)	2a(1)(C)	35888991	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		410888543
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	2007137	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2007137
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	34307198	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		34307198
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		899164084
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		28965754
c Other income	2c		4610867
d Total income. Add all **income** amounts in column (b) and enter total	2d		1379943583
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	320065484	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		320065484
f Corrective distributions (see instructions)	2f		19746
g Certain deemed distributions of participant loans (see instructions)	2g		287713
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	233125	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	0	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		233125
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		320606068
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1059337515
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

(1) [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: EISNER AMPER LLP **(2)** EIN: 87-1363769

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		10000000
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**			

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.) ..... ☐ Yes ☐ No ☐ Not determined

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
BLOOMBERG L.P. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

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

D Employer Identification Number (EIN)
13-3417984

Part I Distributions

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

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

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

EIN(s): 84-1455663

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

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

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

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

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

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

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

6	a	Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
	b	Enter the amount contributed by the employer to the plan for this plan year	6b	
	c	Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c	

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

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

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

Part III Amendments

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

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

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

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

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

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

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_____.

EISNERAMPER

BLOOMBERG L.P. 401(k) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2025 and 2024
(with supplemental information)

BLOOMBERG L.P. 401(k) PLAN

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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator, Participants and Beneficiaries of the
Bloomberg L.P. 401(k) Plan

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

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

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

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024 and for the year ended December 31, 2025, stating that the certified investment information, as described in Note H 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 Auditors' Responsibilities for the Audit of the Financial Statements section:

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

- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter

Supplemental Schedule Required by ERISA

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

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

In our opinion:

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



EISNERAMPER LLP
New York, New York
October 6, 2026

EISNERAMPER LLP

BLOOMBERG L.P. 401(k) PLAN

Statements of Net Assets Available for Plan Benefits

	December 31,	
	2025	**2024**
ASSETS		
Investments at fair value	**$ 6,767,319,917**	$ 5,707,637,914
Notes receivable from participants	**25,256,376**	25,600,864
Net assets available for plan benefits	**$ 6,792,576,293**	$ 5,733,238,778

See accompanying notes to financial statements

BLOOMBERG L.P. 401(k) PLAN

Statement of Changes in Net Assets Available for Plan Benefits
Year Ended December 31, 2025

Additions:	
Investment income:	
Interest and dividends	**$ 34,307,198**
Net realized/unrealized appreciation in fair value of investments	**932,740,706**
Total investment income	**967,047,904**
Interest income on notes receivable from participants	**2,007,137**
Contributions:	
Participants	**280,652,046**
Participants' rollovers	**35,888,990**
Employer, net of forfeitures	**94,347,506**
Total contributions	**410,888,542**
Total additions	**1,379,943,583**
Deductions:	
Benefits paid to participants inclusive of loans deemed distributed and corrective distributions	**(320,372,943)**
Administrative expenses	**(233,125)**
Total deductions	**(320,606,068)**
Net increase in net assets available for plan benefits	**1,059,337,515**
Net assets available for plan benefits – beginning of year	**5,733,238,778**
Net assets available for plan benefits – end of year	**$ 6,792,576,293**

See accompanying notes to financial statements

NOTE A - DESCRIPTION OF THE PLAN

Effective August 15, 1995, Bloomberg L.P. (the "Company") established the Bloomberg L.P. 401(k) Plan (the "Plan"), which covers eligible employees of the Company and certain affiliated entities who elect to participate in the Plan.

The Plan administrator is the Retirement Plan Committee (the "Committee") of the Company. Information concerning the Plan and its provisions can be found in the Plan agreement, a copy of which can be obtained from the Plan administrator at Bloomberg L.P., 731 Lexington Avenue, New York, New York 10022. Empower Trust Company, LLC ("Empower Trust"), serves as the Plan's trustee.

The Plan provides that all employees are eligible to participate in the Plan as of the first day after the completion of an hour of service, provided such individual qualifies as an employee on such date. Employees paid on an hourly basis, as determined by their employment categorization with the Company, and nonresident aliens who receive no U.S. income from the Company, are not eligible to participate.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

[1] Basis of presentation:

The financial statements of the Plan are prepared under the accrual method of accounting, in accordance with accounting principles generally accepted in the United States of America. Investments held by a defined-contribution plan are reported at fair value.

[2] Investment valuation and income:

The value of the account balance of each active participant is determined on each valuation date. Interest income is recorded on the accrual basis, and dividends are recorded on the ex-dividend date. Purchases and sales of securities are recorded on a trade-date basis. Investments are valued 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. Quoted market prices are used to value mutual fund and self-directed brokerage account investments, and shares of common/collective trust funds are based on the net asset value ("NAV") of shares held by the Plan at year end.

Collective trust funds:

The fair value of the collective trust funds utilizes the funds' NAV, as provided by the trustees, as a practical expedient. The NAV is based upon the fair value of the underlying investments held by the fund less its liabilities. The practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. The redemption frequency for participant transactions is daily upon receipt of an authorized request on or prior to the valuation date of the fund. The Plan invests in the following collective trust funds for which there are no unfunded commitments:

BlackRock Short-Term Investment W Fund ("WFund") is managed by BlackRock Institutional Trust Company, N.A. ("BTC"). The fund is invested in one or more other collective investment funds to meet investment objectives.

BlackRock Life Path Non-Lendable J Funds ("JFunds") are managed by BTC and are invested in one or more other collective investment funds. The JFunds are invested in underlying BTC collective trust funds. Effective in January 2025, the Class J fund replaced the Class M fund.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

[2] Investment valuation and income: (continued)

Collective trust funds: (continued)

For the WFund and JFunds, were the Plan to initiate a full redemption of the collective trusts, the investment advisor reserves the right, subject to applicable laws, to suspend or delay withdrawals in order to ensure that securities liquidations are not seriously prejudicial to the collective trust funds. The collective trust funds contain several redemption restrictions including a notice of intention three business days before the valuation date. The trustee can accept a lesser number of days for such notice, as well as suspend withdrawals for varying or different periods of time at its sole discretion.

Galliard Managed Income Fund Core MC is a collective trust fund trusted by SEI Trust Company as advised by Galliard Capital Management, Inc. The Galliard fund invests in investment contracts including guaranteed investment contracts ("GICs") and security-backed contracts and seeks to provide a moderate level of stable income without principal volatility. The collective trust fund contains several redemption restrictions to withdraw, including the right to require a 12-month advance notice period for fund withdrawals initiated by the Plan sponsor. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in circumstances where such withdrawal would make securities liquidation not reasonably practicable.

State Street Global All Cap Equity Ex-U.S. Index Non-Lending Series Fund Class K is managed by State Street Global Advisors Trust Company ("SSGA"). The fund is invested in other collective investment funds with the objective of approximating the MSCI ACWI ex USA IMI Index over the long-term.

State Street Russell Small/Mid Cap Index Securities Non-Lending Series Fund Class K is managed by SSGA. The fund is invested in common stocks with the objective of approximating the Russell Small Cap Completeness Index over the long term.

State Street S&P 500 Index Non-Lending Series Fund Class M is managed by SSGA. The fund is invested in common stocks with the objective of approximating the S&P 500 Index over the long term. Effective in January 2025, the Class M fund replaced the Class K fund.

State Street U.S. Bond Index Non-Lending Series Fund Class M is managed by SSGA. The fund seeks an investment return that approximates the performance of the Bloomberg Barclays U.S. Aggregate Bond Index over the long term.

State Street Real Asset NL Cl C is managed by SSGA. The fund seeks an investment return that approximates as closely as practicable, before expenses, the performance of a custom index (the "Index") over the long term. The Index the fund seeks to approximate is comprised of 10% Dow Jones U.S. Select REIT Index, 25% Bloomberg Roll Select Commodity Index, 25% S&P Global Large MidCap Commodity and Resources Index, 20% Bloomberg US Government Inflation-Linked 1-10 Year Bond Index, and 20% S&P Global Infrastructure Index.

TS&W International Large Cap Equity Trust Class M ("TSW") is managed by Thompson, Siegel & Walmsley LLC. The fund is invested in common stocks with the objective of outperforming the Morgan Stanley Capital International Index of Europe, Australia and the Far East over multiple years.

AB US Small & Mid Cap Value P-2 Class ("AB") is managed by AllianceBernstein, L.P. The fund invests primarily in a diversified portfolio of equity securities, including depositary receipts and securities of non-U.S. issuers listed or traded on U.S. exchanges, of small- to mid-capitalization U.S. companies.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

[2] Investment valuation and income: (continued)

Collective trust funds: (continued)

Loomis Small/Mid Cap Growth Trust ("Loomis") is managed by Loomis Sayles Company, LLC. The fund is invested in common stocks or equity securities of small- to mid-capitalization U.S. companies with the objective of long-term growth of capital and to outperform the Russell 2500 Growth Index over a full market cycle.

Prudential Core Plus Bond Fund 5 ("PCP") is managed by The Prudential Insurance Company of America. The fund is invested in privately placed corporate debt securities with credit qualities ranging from AAA to CCC.

Fidelity Contrafund Commingled Pool D ("Fidelity") is managed by The Fidelity Management Trust Company. The fund seeks to provide capital appreciation over a market cycle relative to the S&P 500 Index, through the active management of equities with a focus on companies having strong long-term growth prospects. Effective in April 2025, the Pool D fund replaced the Pool A fund.

Harbor Capital Appreciation CIT Class R ("Harbor") is managed by the Harbor Trust Company. The fund invests primarily in equity securities, principally common and preferred stocks, of U.S. companies with a large-cap growth strategy that seeks long-term growth of capital.

Parnassus Sustainable Core Equity CIT 1 ("Parnassus") is managed by SEI Trust Company. The fund seeks to provide long-term capital appreciation through investing a majority of its assets into U.S. large-cap companies that pay dividends. The Fund's investment strategy is considered primarily a U.S. large-cap equity strategy.

The State Street funds, TSW, AB, Loomis, PCP, Fidelity, Harbor and Parnassus may be subject to several redemption restrictions to withdraw including 5- to 30-day notice. Redemptions can be suspended or delayed if deemed in the best interest of the fund, including a suspension of valuations, or a 1-year notice may be required if holdings are not in readily marketable assets.

[3] Use of estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect the reported amounts of net assets available for plan benefits at the dates of the financial statements and changes therein during the reporting period and, when applicable, disclosures of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

[4] Payment of benefits:

Benefits are recorded when paid.

NOTE C - FUNDING POLICY

The Company forwards contributions withheld from the compensation of participants to the Plan. Pre-tax contributions are voluntary and are limited to 75% of the cash compensation of participants, subject to certain limitations imposed by the Internal Revenue Code ("IRC"). The total amount of a participant's elective contribution, including Roth contributions, shall not exceed 75% of compensation, as defined, for the Plan year. The Company forwards contributions withheld from the compensation of participants to the Plan within the Department of Labor specified time-frame following the pay period in which wages were paid.

NOTE D - PARTICIPANTS' ACCOUNTS AND VESTING

Each participant's account is credited with the participant's contributions, an allocation of Plan earnings or losses, and charged with participant loan fees, Qualified Domestic Relations Order ("QDRO") fees, if applicable, and an allocation of administrative expenses. Allocations are based on the participant's respective pro-rata share in each investment. Participants may designate part or all of their elective contributions as Roth contributions. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

All participant contributions and earnings or losses thereon are 100% vested and not forfeitable at all times. Upon retirement at age 65, in the event of disability as defined in the Plan, or other termination of employment, distributions may be made in whole or in part, generally at the election of the participant. In-service withdrawals of vested balances are permitted at age 59-1/2 and for reasons of hardship, as defined in the Plan. Upon death, distributions may be made in whole or in part at the election of the participant's beneficiary.

Distributions upon retirement or death are to be made in a single lump sum if the value of the participant's account does not exceed $1,000. Upon disability, as defined in the Plan, or termination of employment, a participant can elect to receive distributions in a single lump sum or request distributions, no more than once during the Plan year, with the balance that remains at the retirement age to be paid in a single lump sum.

The employer has agreed to make a matching contribution of every dollar contributed by a participant not to exceed 15% of the participant's compensation, as defined in the Plan, at a rate of 50%, not to exceed a maximum of $7,750 per year. Vesting in the employer's contribution, plus actual earnings thereon, is as follows:

Years of Service	Vesting
Less than 1 year	0%
1 year but less than 2 years	34%
2 years but less than 3 years	67%
3 years or more	100%

NOTE E - NOTES RECEIVABLE FROM PARTICIPANTS

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. A participant may be eligible to borrow from the Plan, depending on the participant's ability to repay the loan and certain other factors. However, the total participant's outstanding loans may never be more than the lesser of:

- $50,000 (reduced by a participant's highest outstanding loan balance during the previous 12-month period); or

- 50% of the balance of a participant's vested account (calculated as of the valuation date of the loan request).

The interest rate charged is commensurate with the prevailing interest rate charged by institutions in the business of lending money under similar circumstances. Payments of principal and interest are credited directly to the borrowing participant's account. A participant must repay the loan within five years through monthly payroll deductions or within ten years if the loan proceeds are used to acquire a principal residence. The loans are secured by the balance in the participant's account and bear interest at a rate of prime + 1%. Interest rates on outstanding loan balances ranged from 4.25% to 9.50% at December 31, 2025 and 2024, respectively. Loans can be prepaid at any time. Loans may be paid outside of payroll deductions for active employees or on a fixed schedule after termination of employment. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the Plan document.

NOTE F - FORFEITED ACCOUNTS

Non-vested employer contributions are maintained in the forfeiture account. During the year ended December 31, 2025, forfeitures of $3,740,149 were utilized to reduce the employer's matching contributions. As of December 31, 2025 and 2024, $1,836,749 and $2,199,180, respectively, are in the forfeiture account, and reflected in investments at fair value on the statements of net assets available for plan benefits.

During the year ended December 31, 2025, additions to the forfeited non-vested accounts totaled $3,377,718, including forfeiture additions of $3,170,420, and investment income and other miscellaneous items aggregating $207,298.

NOTE G - ADMINISTRATIVE EXPENSES

Plan administrative expenses paid by the Plan include maintenance fees and administrative expenses paid by terminated participants. All other administrative expenses, including trustee fees, are paid by the Company.

NOTE H - INVESTMENT CERTIFICATION

The Plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the U.S. Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, as permitted under such election, Empower Trust, the trustee of the Plan, has certified to the completeness and accuracy of all investments and related investment activity and notes receivable from participants and related activity in the accompanying statements of net assets available for plan benefits as of December 31, 2025 and 2024, the accompanying statement of changes in net assets available for plan benefits for the year ended December 31, 2025 and the accompanying supplemental schedule of assets (held at end of year) as of December 31, 2025.

NOTE I - INVESTMENTS

The Plan currently offers various investment options. Upon enrollment in the Plan, a participant may direct contributions to any available investment option. Life Path funds are target date funds made up of multiple asset classes (stocks, bonds and cash alternatives) and offer a professionally managed, diversified asset mix. The date in the Life Path fund's name corresponds to an anticipated year of retirement at age 65 and the assumed date the investors plan to start withdrawing their money. Self-directed brokerage accounts ("Empower SDB") provide investment options that allow participants to select investments outside the Plan's core options. Empower SDB primarily consist of mutual funds that are valued on the basis of readily determinable market prices. The investments as of December 31, 2025 and 2024 are presented, at fair value, in the following table:

	December 31,	
	2025	**2024**
Mutual funds:		
DFA Emerging Markets Core Equity I	**$ 69,063,177**	$ 50,496,928
Dodge & Cox Balanced Fund X	**148,875,821**	132,697,085
Dodge & Cox Stock Fund X	**229,715,021**	215,865,065
Subtotal mutual funds carried forward	**447,654,019**	399,059,078

NOTE I - INVESTMENTS (CONTINUED)

	December 31, 2025	December 31, 2024
Subtotal mutual funds brought forward	**$ 447,654,019**	$ 399,059,078
Self-directed brokerage account:		
Empower SDB	**33,453,747**	25,446,500
Subtotal self-directed brokerage account	**33,453,747**	25,446,500
Common/collective trusts:		
AB US Small & Mid Cap Value P-2 Class	**55,512,686**	59,531,175
BlackRock Life Path Index 2030 Non-Lendable M	**-**	134,702,964
BlackRock Life Path Index 2030 Non-Lendable J	**150,598,796**	-
BlackRock Life Path Index 2035 Non-Lendable M	**-**	225,664,852
BlackRock Life Path Index 2035 Non-Lendable J	**266,824,139**	-
BlackRock Life Path Index 2040 Non-Lendable M	**-**	322,234,046
BlackRock Life Path Index 2040 Non-Lendable J	**376,629,802**	-
BlackRock Life Path Index 2045 Non-Lendable M	**-**	376,510,273
BlackRock Life Path Index 2045 Non-Lendable J	**463,085,178**	-
BlackRock Life Path Index 2050 Non-Lendable M	**-**	373,536,448
BlackRock Life Path Index 2050 Non-Lendable J	**463,434,850**	-
BlackRock Life Path Index 2055 Non-Lendable M	**-**	255,329,762
BlackRock Life Path Index 2055 Non-Lendable J	**335,886,477**	-
BlackRock Life Path Index 2060 Non-Lendable M	**-**	164,961,065
BlackRock Life Path Index 2060 Non-Lendable J	**229,938,812**	-
BlackRock Life Path Index 2065 Non-Lendable M	**-**	60,433,295
BlackRock Life Path Index 2065 Non-Lendable J	**95,868,355**	-
BlackRock Life Path Index 2070 Non-Lendable J	**4,532,067**	-
BlackRock Life Path Index Retirement Non-Lendable M	**-**	96,185,463
BlackRock Life Path Index Retirement Non-Lendable J	**90,840,771**	-
BlackRock Short-Term Investment Fund W	**281,446,543**	238,329,724
Fidelity Contrafund Commingled Pool	**-**	328,898,419
Fidelity Contrafund Commingled PL D	**422,199,724**	-
Galliard Managed Income Fund Core MC	**71,953,117**	70,050,066
Harbor Capital Appreciation CIT R	**475,493,272**	437,966,942
Loomis Sayles Small/Mid Cap Growth Trust	**144,048,214**	149,221,924
Parnassus Sustainable Core Equity CIT 1	**55,948,234**	59,322,779
Prudential Core Plus Bond Fund 5	**155,242,781**	134,620,294
State Street Global All Cap Equity EX-US Index Fund CL K	**155,420,763**	102,894,302
State Street Russell Small/Mid Cap Index Fund Class K	**308,769,667**	298,345,040
State Street S&P 500 Index Fund Class K	**-**	1,218,353,170
State Street S&P 500 Index Non-Lend M	**1,449,764,351**	-
State Street Real Asset NL Cl C	**8,660,100**	2,467,741
State Street US Bond Index NL Fund Class M	**96,407,637**	80,402,094
TS&W International Large Cap Equity Class M	**127,705,815**	93,170,498
Subtotal common/collective trusts	**6,286,212,151**	5,283,132,336
Total investments at fair value	**$ 6,767,319,917**	$ 5,707,637,914

NOTE J - FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board's Accounting Standards Codification ("ASC") 820, *Fair Value Measurement*, establishes a 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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described below:

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; or 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's 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.

The valuation methodologies used for assets measured at fair value are described in Note B[2]. There have been no changes in methodologies used as of December 31, 2025 and 2024.

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

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

The following tables summarize the Plan's investments measured at fair value:

	December 31, 2025	
	Fair Value	**Level 1**
Mutual funds	**$ 447,654,019**	**$ 447,654,019**
Self-directed brokerage accounts	**33,453,747**	**33,453,747**
Total investments in the fair value hierarchy	**481,107,766**	**$ 481,107,766**
Common/collective trusts measured at NAV *	**6,286,212,151**	
Total investments, at fair value	**$ 6,767,319,917**	

NOTE J - FAIR VALUE MEASUREMENTS (CONTINUED)

	December 31, 2024	
	Fair Value	Level 1
Mutual funds	$ 399,059,078	$ 399,059,078
Self-directed brokerage accounts	25,446,500	25,466,500
Total investments in the fair value hierarchy	424,505,578	$ 424,505,578
Common/collective trusts measured at NAV *	5,283,132,336	
Total investments, at fair value	$ 5,707,637,914	

* In accordance with ASC Subtopic 820-10, certain investments that are measured at fair value using the NAV per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for plan benefits.

NOTE K - INCOME TAX STATUS

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated July 19, 2016 that the Plan is qualified under the IRC and, consequently, its related trust is exempt from taxation. The Plan has been amended and restated since receiving the tax determination letter, and was most recently restated January 1, 2022 to incorporate all previous amendments. However, the Plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax-exempt.

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

NOTE L - TERMINATION

The Company reserves the right, at any time, to amend or terminate the Plan subject to the provisions of ERISA. The Company has not expressed any intent to discontinue or terminate the Plan. In the event of Plan termination, participants would become 100% vested in their employer contributions.

NOTE M - RISKS AND UNCERTAINTIES

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

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

NOTE N - RELATED PARTY TRANSACTIONS

Fees paid by the Plan for the services of Empower Trust amounted to $226,230 for the year ended December 31, 2025. This amount is included in administrative expenses in the statement of changes in net assets available for plan benefits.

NOTE O - SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through October 6, 2026, the date the financial statements were available to be issued. The Plan has not identified any events or transactions which require disclosure in or adjustments to the financial statements.

BLOOMBERG L.P. 401(k) PLAN

Employer Identification No. 13-3417984, Plan No. 001
Schedule H of Form 5500, Part IV, Line 4(i)
Schedule of Assets (Held at End of Year)
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	(e) Current Value
	Mutual funds:		
	DFA	Emerging Markets Core Equity I	**$ 69,063,177**
	Dodge & Cox	Balanced Fund X	**148,875,821**
	Dodge & Cox	Stock Fund X	**229,715,021**
	Self-directed brokerage account:		
	Empower	Self-directed Brokerage	**33,453,747**
	Common collective trust:		
	Alliance Bernstein	US Small & Mid Cap Value P-2 Class	**55,512,686**
	BlackRock	Life Path Index 2030 Non-Lendable J	**150,598,796**
	BlackRock	Life Path Index 2035 Non-Lendable J	**266,824,139**
	BlackRock	Life Path Index 2040 Non-Lendable J	**376,629,802**
	BlackRock	Life Path Index 2045 Non-Lendable J	**463,085,178**
	BlackRock	Life Path Index 2050 Non-Lendable J	**463,434,850**
	BlackRock	Life Path Index 2055 Non-Lendable J	**335,886,477**
	BlackRock	Life Path Index 2060 Non-Lendable J	**229,938,812**
	BlackRock	Life Path Index 2065 Non-Lendable J	**95,868,355**
	BlackRock	Life Path Index 2070 Non-Lendable J	**4,532,067**
	BlackRock	Life Path Index Retirement Non-Lendable J	**90,840,771**
	BlackRock	Short-Term Investment Fund W	**281,446,543**
	Fidelity	Contrafund Commingled PL D	**422,199,724**
	Galliard	Managed Income Fund Core MC	**71,953,117**
	Harbor Trust Company	Capital Appreciation CIT R	**475,493,272**
	Loomis Sayles	Small/Mid Cap Growth Trust	**144,048,214**
	Parnassus	Sustainable Core Equity CIT 1	**55,948,234**
	Prudential	Core Plus Bond Fund 5	**155,242,781**
	State Street Global Advisors	Global All Cap Equity EX-US Index Fund K	**155,420,763**
	State Street Global Advisors	Russell Small/Mid Cap Index Fund K	**308,769,667**
	State Street Global Advisors	S&P 500 Index Non-Lend M	**1,449,764,351**
	State Street Global Advisors	Real Asset Non-Lending Class C	**8,660,100**
	State Street Global Advisors	US Bond Index Non-Lending Fund Class M	**96,407,637**
	TSW	International Large Cap Equity Class M	**127,705,815**
*	**Notes receivable from participants**	Participant loans, interest rates ranging from 4.25% to 9.50% and maturing through December 2035	**25,256,376**
			$ 6,792,576,293

Cost information is not provided since the Plan is an individual plan with participant-directed transactions.

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

BLOOMBERG L.P. 401(k) PLAN

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