Form 5500-SF

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed 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-SF.**

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: [X] a single-employer plan [ ] a multiple-employer plan (not multiemployer) (Pension Plan filers checking this box must attach Schedule MEP. Other plans must attach a list of participating employer information in accordance with the form instructions.)

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 Check box if filing under: [X] Form 5558 [ ] automatic extension [ ] DFVC program
[ ] special extension (enter description)

D If the plan is a collectively-bargained plan, check here ▶ [ ]

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
BFKN CASH BALANCE RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 009

1c Effective date of plan 01/01/2011

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)
BARACK FERRAZZANO KIRSCHBAUM & NAGELBERG LLP

200 WEST MADISON STREET, SUITE 3900
CHICAGO, IL 60606-3465

2b Employer Identification Number (EIN) 36-3330098

2c Sponsor's telephone number 312-984-3100

2d Business code (see instructions) 541110

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.
a Sponsor's name
c Plan Name

4b EIN

4d PN

5a Total number of participants at the beginning of the plan year	**5a**	70
b Total number of participants at the end of the plan year	**5b**	64
c(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**5c(1)**	
c(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**5c(2)**	
d(1) Total number of active participants at the beginning of the plan year	**5d(1)**	69
d(2) Total number of active participants at the end of the plan year	**5d(2)**	57
e Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**5e**	0

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, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, 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.	10/12/2026	ROBERTA SALAS
	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

6a Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.) [X] Yes [ ] No

b Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.) [X] Yes [ ] No

If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.

c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 591396. (See instructions.)

Part III Financial Information

7 Plan Assets and Liabilities		(a) Beginning of Year	(b) End of Year
a Total plan assets	7a	50823636	58519525
b Total plan liabilities	7b	0	0
c Net plan assets (subtract line 7b from line 7a)	7c	50823636	58519525
8 Income, Expenses, and Transfers for this Plan Year		**(a) Amount**	**(b) Total**
a Contributions received or receivable from: (1) Employers	8a(1)	6850553	
(2) Participants	8a(2)	0	
(3) Others (including rollovers)	8a(3)	0	
b Other income (loss)	8b	6051616	
c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b)	8c		12902169
d Benefits paid (including direct rollovers and insurance premiums to provide benefits)	8d	5206280	
e Certain deemed and/or corrective distributions (see instructions)	8e	0	
f Administrative service providers (salaries, fees, commissions)	8f	0	
g Other expenses	8g	0	
h Total expenses (add lines 8d, 8e, 8f, and 8g)	8h		5206280
i Net income (loss) (subtract line 8h from line 8c)	8i		7695889
j Transfers to (from) the plan (see instructions)	8j	0	

Part IV Plan Characteristic Codes

9a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
1A 1C 3B

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

Part V Compliance Questions

10 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)	10a		X	
b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.)	10b		X	
c Was the plan covered by a fidelity bond?	10c	X		500000
d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	10d		X	
e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service, or other organization that provides some or all of the benefits under the plan? (See instructions.)	10e		X	
f Has the plan failed to provide any benefit when due under the plan?	10f		X	
g Did the plan have any participant loans? (If "Yes," enter amount as of year-end.)	10g		X	
h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	10h			
i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	10i			

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and lines 11a and b below.) If this is a defined contribution pension plan, leave line 11 blank and complete line 12 below. [X] Yes [ ] No

a Enter the unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 | **11a** | 0

b **PBGC missed contribution reporting requirements.** If the plan is covered by PBGC and the amount reported on line 11a is greater than $0, 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 _____

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? (If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.) If this is a defined benefit pension plan, leave line 12 blank and complete line 11 above. [ ] Yes [X] No

a 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 letter ruling granting the waiver. Month _____ Day _____ Year _____

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year	**12b**	
c Enter the amount contributed by the employer to the plan for this plan year	**12c**	
d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount)	**12d**	
e Will the minimum funding amount reported on line 12d be met by the funding deadline?		[ ] Yes [ ] No [ ] N/A

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year?		[ ] Yes [X] No
a If "Yes," enter the amount of any plan assets that reverted to the employer this year	**13a**	
b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		[ ] Yes [X] No

c 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.)

13c(1) Name of plan(s):	**13c(2)** EIN(s)	**13c(3)** PN(s)

Part VIII IRS Compliance Questions

14a 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? [X] Yes [ ] No

14b 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
- [X] N/A

15 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_____.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

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

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

A Name of plan
BFKN CASH BALANCE RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
BARACK FERRAZZANO KIRSCHBAUM & NAGELBERG LLP

D Employer Identification Number (EIN)
36-3330098

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	50763994
b Actuarial value	**2b**	50763994

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	0	0	0
b For terminated vested participants	1	756790	756790
c For active participants	69	42254296	42254296
d Total	70	43011086	43011086

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

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

5 Effective interest rate	**5**	5.25 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	2246372
b Expected plan-related expenses	**6b**	0
c Target normal cost	**6c**	2246372

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

09/28/2026
Date

CAROLINE CAMPBELL
Type or print name of actuary

26-08659
Most recent enrollment number

PWC US CONSULTING LLP
Firm name

206-398-3000
Telephone number (including area code)

1420 5TH AVE #2800
SEATTLE, WA 98101
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 14.92 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		2566459
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 4.97 %		127553
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		2694012
d	Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	118.02 %
15	Adjusted funding target attainment percentage	15	118.02 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	116.63 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/30/2026	371943	0			
04/27/2026	503217	0			
05/29/2026	897039	0			
06/17/2026	415701	0			
07/24/2026	2653	0			
08/13/2026	4660000	0			
			Totals ► 18(b)	6850553	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
a	Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b	Contributions made to avoid restrictions adjusted to valuation date	19b	0
c	Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	6333550

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

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

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	2246372
b Excess assets, if applicable, but not greater than line 31a	**31b**	2246372

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

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____)_and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	6333550

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

a Total (excess, if any, of line 37 over line 36)	**38a**	6333550
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

Barack Ferrazzano Kirschbaum & Nagelberg LLP
BFKN Cash Balance Retirement Plan
EIN: 36-3330098; Plan Number: 009
2025 Schedule SB, Line 26 - Schedule of Active Participant Data

Age and Service Distribution of Active Members

Completed Years of Service on January 1, 2025[1] [2]

Attained Age	Under 1 year	1 to 4 years	5 to 9 years	10 to 14 years	15 to 19 years	20 to 24 years	25 to 29 years	30 to 34 years	35 to 39 years	Over 40 years	Total
	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.	No.
<25											
25-29											
30-34											
35-39	2			1							3
40-44		7	4								11
45-49		1	4	5							10
50-54	1	2	3	14							20
55-59		1		5							6
60-64		1		5							6
65-69				7							7
70&Up				6							6
Total	3	12	11	43							69

[1] Credited Service based on Plan Participation.
[2] Because fewer than 1,000 employees are being reported, no average compensation data needs to be reported.

A. Actuarial Assumptions for Funding Purposes

Valuation Interest Rates	January 2025 ARPA segment rates under Section 430(h)(2)(C) (Minimum Funding Purposes) 1st Rate: 5.00% 2nd Rate: 5.27% 3rd Rate: 5.50% January 2025 pre MAP-21 segment rates under Section 430(h)(2)(C) (Maximum Deductible Contribution Purposes) 1st Rate: 5.00% 2nd Rate: 5.27% 3rd Rate: 5.40%
Cash Balance Interest Crediting Rate	3.50% per annum.
Expenses	$0 for 2025; $0 for 2024.
Mortality	IRS 2025 Mortality Table prescribed under Section 430(h)(3).
Retirement (Not-at-risk funding target)	Active participants are assumed to retire on the Annuity Starting Date (January 1) coincident with or next following attainment of age 62. If older than age 62, participants are assumed to retire on the following January 1. Alternate Payees are assumed to commence benefits on the following January 1.
Withdrawal	None.
Disability	None.
Salary Scale	3.00% per annum.
New Entrants	No new entrants are assumed to enter the Plan after the valuation date.
IRS Section 415(b) Limit	For 2025, the maximum benefit limitation is $280,000.
Form of Payment	It has been assumed that benefits will be paid in the form of a single lump sum at Retirement Age.
Maximum Compensation	Compensation was limited to $350,000 for 2025 for the purposes of calculating benefits.

B. Assumptions Rationale

Valuation Interest Rates	The interest rate assumption used is prescribed by IRC section 430(h) subject to specified elections by the plan sponsor.
Cash Balance Interest Crediting Rate / ASC 960 Interest Rate	This interest rate of 3.50% is intended to represent the net yield after investment expenses on plan assets over an extended period of time in the future, reflecting the investment policy established by the plan sponsor.
Mortality	The mortality assumption used is prescribed by IRC section 430(h) subject to specified elections by the plan sponsor.
Expenses	This assumption is set based on the plan sponsor's historical experience and expectations for future expenses to be paid from the trust.
Salary	Salary scale rates are based on the plan sponsor's historical experience and expectations for the future with periodic monitoring of observed gains and losses caused by salary patterns different than assumed.
Withdrawal	No withdrawal is assumed. This assumption is not expected to generate material actuarial gains or losses as there is no forfeiture upon termination (unless not fully vested; note participants are not anticipated to terminate prior to becoming fully vested).
Disability	No disability is assumed due to a low historical incidence of disability. This assumption is not expected to generate material actuarial gains or losses as there is no forfeiture upon disability and no additional disability benefit is provided under the Plan.
Form of Payment	100% of participants are assumed to elect a lump sum. This assumption was based on best expectations given plan provisions. Alternative forms of payment are not expected to generate material gains or losses.
Retirement	Retirement rates are based on the plan sponsor's historical experience and expectations for the future with periodic monitoring of observed gains and losses caused by retirement patterns different than assumed.

C. Actuarial Methods for Funding Purposes

1. Actuarial Cost Method

   The actuarial cost method is the Unit Credit Actuarial Cost Method.

   Under this cost method, the target liability is defined as the present value of the accrued benefits on the valuation date. The funding shortfall is the excess, if any, of the amount by which the target liability exceeds the actuarial value of Plan Assets.

   The target normal cost, determined on the valuation date, is the amount required to fund the benefit expected to be earned in the current year plus expected expenses.

2. Asset Valuation Method

   Market Value.

3. Changes in Actuarial Assumptions and Methods

   None.

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

OMB No. 1210-0110

2025

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

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

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

A Name of plan
BFKN Cash Balance Retirement Plan

B Three-digit plan number (PN) ▶ 009

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
Barack Ferrazzano Kirschbaum & Nagelberg LLP

D Employer Identification Number (EIN)
36-3330098

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

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

Part I Basic Information

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

2 Assets:

a Market value	**2a**	50,763,994
b Actuarial value	**2b**	50,763,994

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	0	0	0
b For terminated vested participants	1	756,790	756,790
c For active participants	69	42,254,296	42,254,296
d Total	70	43,011,086	43,011,086

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

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

5 Effective interest rate	**5**	5.25%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	2,246,372
b Expected plan-related expenses	**6b**	0
c Target normal cost	**6c**	2,246,372

Statement by Enrolled Actuary

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

SIGN HERE

CBC
Signature of actuary

09/28/2026
Date

Caroline Campbell
Type or print name of actuary

2608659
Most recent enrollment number

PwC US Consulting LLP
Firm name

206-398-3000
Telephone number (including area code)

1420 5th Ave #2800
Seattle WA 98101
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	0
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	0
10	Interest on line 9 using prior year's actual return of 14.92 %	0	0
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2,566,459
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 4.97 %		127,553
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		2,694,012
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	0

Part III Funding Percentages

14	Funding target attainment percentage	14	118.02 %
15	Adjusted funding target attainment percentage	15	118.02 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	116.63 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/30/2026	371,943	0			
04/27/2026	503,217	0			
05/29/2026	897,039	0			
06/17/2026	415,701	0			
07/24/2026	2,653	0			
08/13/2026	4,660,000	0			
			Totals ► 18(b)	6,850,553	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date.	19c	6,333,550

20 Quarterly contributions and liquidity shortfalls:

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

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

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

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

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

Part VI Miscellaneous Items

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

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

26 Demographic and benefit information

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

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

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	2,246,372
b Excess assets, if applicable, but not greater than line 31a	**31b**	2,246,372

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

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

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	6,333,550

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

a Total (excess, if any, of line 37 over line 36)	**38a**	6,333,550
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

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

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

Barack Ferrazzano Kirschbaum & Nagelberg LLP
BFKN Cash Balance Retirement Plan
EIN: 36-3330098; Plan Number: 009
2025 Schedule SB, Line 22 - Description of Weighted Average Retirement Age

The normal retirement age in the Plan is defined as age 62. For purposes of the actuarial valuation as of January 1, 2025, all participants are assumed to retire on the January 1 coincident with or next following attainment of age 62. If older than age 62, participants are assumed to retire on the following January 1. For purposes of calculating the weighted average retirement age, an average retirement age was calculated based on assumed retirement age.

Retirement Age	Rate of Retirement	Weighted Average Retirement Age
62, or next January 1 if older	100%	63.84

Plan Name

BFKN Cash Balance Retirement Plan

Amendments Included

Amended and Restated Plan effective January 1, 2013. Amendment 1 to Amended and Restated Plan effective January 1, 2011. Amendment 2 to Amended and Restated Plan effective January 1, 2016. Amendment 3 to Amended and Restated Plan effective January 1, 2018. Amendment 4 to Amended and Restated Plan effective January 1, 2023. Amendment 5 to Amended and Restated Plan effective January 1, 2024.

Effective Date

January 1, 2011. (Adopted December 29, 2011.)

Eligible Employees

Employees of the Employer who are in Group 1 through Group 5.

Employer

Barack Ferrazzano Kirschbaum & Nagelberg LLP and any Participating Employer. A Participating Employer that withdraws from the Plan shall cease to be an Employer as of the effective date of its withdrawal.

Entry Date

The date that an Eligible Employee commences to be a Participant in the Plan. The Entry Date is the first day of January during a Plan Year.

Participation Date

An Eligible Employee shall become a Participant on the Entry Date preceding, or coincident with, the date on which he attains age twenty-one (21) and is credited with one (1) Year of Service for Eligibility.

Vesting

If a Participant terminates employment prior to attaining Normal Retirement Age, other than as a result of death or Disability, then his interest in his Cash Balance Account shall be vested and nonforfeitable, as follows:

Years of Service for Vesting	Vested Percentage
Less than 3	0%
3 or more	100%

Normal Retirement Age

Age 62.

Normal Retirement

January 1 coincident with or next following the date on which the participant attains Normal Retirement Age.

Late Retirement

January 1 coincident with, or next following, the date upon which a participant terminates employment from the Employer after his Normal Retirement Date.

Cash Balance Account

For each Participant, his Cash Balance Account is his Plan Year Allocations, as increased or decreased in accordance with Investment Experience.

Plan Year Allocation

In order to be credited with a Plan Year Allocation for a Plan Year, a Participant must be credited with at least 1,000 Hours of Service while he is a Participant during such Plan Year; provided, however that (i) Hours of Service after a Participant ceases to be an Eligible Employee shall not be credited and (ii) for the Plan Year during which a Participant terminates employment with the Employer, subject to being credited with at least 1,000 Hours of Service, his Plan Year Allocation shall be pro rated in proportion to the number of calendar months during that Plan Year during which he is both a Participant and an Eligible Employee during at least one day during the month.

The amount of a Participant's Plan Year Allocation for a Plan Year shall be determined by his Group for such Plan Year, and Plan Year Allocations shall be in the following amounts:

Group 1	$106,667
Group 2	$80,000
Group 3	$40,000
Group 4	$16,000
Group 5	The lesser of 2% of Compensation or $5,000

The Plan Year Allocations for Groups 1-4 for Plan Years beginning after 2016 change by the ratio of the IRC 415(b)(1)(A) limit for a given Plan Year to the IRC 415(b)(1)(A) limit for the 2016 Plan Year. The Plan Year Allocations shown above include this indexing from the amounts specified in Amendment 2.

Investment Experience

A credit for earnings, or a debit for losses, based on the actual rate of return on the Plan's aggregate assets held in the Trust since the immediately preceding Computation Date and taking into account the timing of any Contributions to, and payments from, the Plan.

Computation Date

Any day within the current Plan Year, as of which the amount of a Participant's Cash Balance Account is determined, as follows:

(I) As of his Entry Date, an initial Cash Balance Account, in the amount of $0 shall be established.

(II) A Plan year Allocation is credited to a Participant's Cash Balance Account as of December 31 during the Plan Year for which it is credited.

(III) On any day during a Plan Year other than on a Computation Date, the amount of a Participant's Cash Balance Account shall equal its amount on the immediately preceding Computation Date.

(IV) On each Computation Date, the amount of a Participant's Cash Balance Account shall equal its amount on the immediately preceding Computation Date increased or decreased to reflect Investment Experience since the immediately preceding Computation Date; provided, however, that (i) a Plan Year Allocation for a Plan Year shall be credited after the adjustment for Investment Experience for such Plan Year and (ii) the adjustment for Investment Experience on a payment from a Cash Balance Account shall include the period from the immediately preceding Computation Date to the Annuity Starting Date and exclude the period from the Annuity Starting Date to the immediately following Computation Date.

(V) As of a Participant's Annuity Starting Date, the amount of a Participant's Cash Balance Account shall not be less than the sum of his Plan Year Allocations to such Annuity Starting Date; provided, however, that upon payment the amount of his Cash Balance Account shall be reduced to $0, including if payment is made in the form of an annuity.

Compensation Points

A pre-existing structure used by the Employer to classify its Members, as such term is defined in its governing documents.

Group

Group 1 through Group 4 are based on a Partner's Compensation Points credited by the Employer as of December 31st of the immediately preceding Plan Year based on the following chart:

Group	Compensation Points as of Dec. 31 of Immediately Preceding Plan Year
1	≥ 750
2	≥ 401 & < 750
3	≥ 331 & < 401
4	< 331

Group 5 consists of participants as described under Section 2.20 of the Plan Document, as amended under Amendment 5.

Termination Benefit

Accumulated benefit as adjusted for investment return (including losses, if any) on the assets of the Plan.

Changes in Plan Provisions

The provisions of Amendment 5 were incorporated into the January 1, 2025 valuation. The definition of Group 5 was updated effective January 1, 2024. The Compensation Points included in the Group 1 through Group 4 definitions were updated effective January 1, 2025.