# 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:
- [ ] Form 5558
- [ ] automatic extension
- [X] 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
FOREST LAWN RETIREMENT PLAN

**1b** Three-digit plan number (PN) ▶ 333

**1c** Effective date of plan 12/31/1953

**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)
FOREST LAWN MEMORIAL-PARK ASSOC

1712 S. GLENDALE AVE.
GLENDALE, CA 91205

**2b** Employer Identification Number (EIN) 95-0743320

**2c** Plan Sponsor's telephone number 323-254-3131

**2d** Business code (see instructions) 812220

**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. | 10/14/2026 | DOUG URBANSKI, COMMITTEE MEMBER |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| **SIGN HERE** | Filed with authorized/valid electronic signature. | 10/14/2026 | DOUG URBANSKI, COMMITTEE MEMBER |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| **SIGN HERE** | | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

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

ADMINISTRATIVE COMMITTEE FOREST LAWN RETIREMENT PLAN

1712 S. GLENDALE AVE.
GLENDALE, CA 91205

**3b** Administrator's EIN: 95-0743320

**3c** Administrator's telephone number: 323-254-3131

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

**4b** EIN

**4d** PN

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 1995 |
| **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)** | 965 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 998 |
| **b** | Retired or separated participants receiving benefits | **6b** | 556 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 442 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 1996 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 74 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 2070 |
| **g(1)** | Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) | **6g(1)** | |
| **g(2)** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g(2)** | |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested. | **6h** | 81 |
| **7** | Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

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

1A

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

**9a** Plan funding arrangement (check all that apply)

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

**9b** Plan benefit arrangement (check all that apply)

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

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

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

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

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

Receipt Confirmation Code_____

# SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

**2025**

**This Form is Open to Public Inspection**

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

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

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

**A** Name of plan
FOREST LAWN RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 333

**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

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

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

## Part I Basic Information

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

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | **2a** | 84730398 |
| **b** Actuarial value | **2b** | 80358889 |

**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 | 561 | 28139933 | 28139933 |
| **b** For terminated vested participants | 418 | 11103610 | 11103610 |
| **c** For active participants | 1028 | 38389735 | 37574284 |
| **d** Total | 2007 | 77633278 | 76817827 |

**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** | 5.36 % |
| **6** Target normal cost | | |
| **a** Present value of current plan year accruals | **6a** | 3364942 |
| **b** Expected plan-related expenses | **6b** | 50000 |
| **c** Target normal cost | **6c** | 3414942 |

**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

09/21/2026
Date

REID EARNHARDT
Type or print name of actuary

26-08739
Most recent enrollment number

MILLIMAN, INC.
Firm name

925-948-1253
Telephone number (including area code)

500 YGNACIO VALLEY ROAD
SUITE 498
WALNUT CREEK, CA 94596
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 _____% | | |
| 11 | Prior year's excess contributions to be added to prefunding balance: | | |
| | a Present value of excess contributions (line 38a from prior year) | | 0 |
| | b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.12 % | | 0 |
| | 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 | | 0 |
| | 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 | 104.60 % |
| 15 | Adjusted funding target attainment percentage | 15 | 104.60 % |
| 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 | 108.92 % |
| 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 |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Totals ► 18(b) | 0 | 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 | 0 |

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: 5.07 % | 2nd segment: 5.31 % | 3rd segment: 5.50 % | ☐ N/A, full yield curve used |

| | | |
|---|---|---|
| **b** Applicable month (enter code) | **21b** | 4 |
| **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** | 3414942 |
| **b** Excess assets, if applicable, but not greater than line 31a | **31b** | 3414942 |

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

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

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

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

**B** Three-digit plan number (PN) ▶ 333

**C** Plan sponsor's name as shown on line 2a of Form 5500
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

## 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)

STRATEGIC INVESTMENT GROUP

52-1540171

| (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? |
|---|---|---|---|---|---|---|
| 20 | INVESTMENT ADVISOR | 145283 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

NORTHERN TRUST COMPANY

36-1561860

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 26 | TRUSTEE | 32040 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

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

## Part I Service Provider Information (continued)

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

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

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

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

## Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

**a** Name:

**b** EIN:

**c** Position:

**d** Address:

**e** Telephone:

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

# DFE/Participating Plan Information

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

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

OMB No. 1210-0110

**2025**

**This Form is Open to Public Inspection.**

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

**A** Name of plan
FOREST LAWN RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 333

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

## 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: LONG CREDIT FUND

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

| **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) |
|---|---|---|
| 88-6547562-003 | C | 740885 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: LONG DURATION TOTAL RETURN BOND FUN

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

| **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) |
|---|---|---|
| 90-6169542-012 | C | 293679 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: LONG CREDIT FUND

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

| **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) |
|---|---|---|
| 23-6994310-222 | C | 743180 |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

**a** Plan name

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

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Financial Information

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

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

OMB No. 1210-0110

**2025**

**This Form is Open to Public Inspection**

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

**A** Name of plan
FOREST LAWN RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 333

**C** Plan sponsor's name as shown on line 2a of Form 5500
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

## Part I Asset and Liability Statement

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

| Assets | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **a** Total noninterest-bearing cash | 1a | | |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | | |
| **(2)** Participant contributions | 1b(2) | | |
| **(3)** Other | 1b(3) | 67345 | 331944 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 1742514 | 2851663 |
| **(2)** U.S. Government securities | 1c(2) | 4286464 | 5896523 |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | | |
| **(B)** All other | 1c(3)(B) | | |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | | |
| **(B)** Common | 1c(4)(B) | | |
| **(5)** Partnership/joint venture interests | 1c(5) | 76978442 | 84716069 |
| **(6)** Real estate (other than employer real property) | 1c(6) | | |
| **(7)** Loans (other than to participants) | 1c(7) | | |
| **(8)** Participant loans | 1c(8) | | |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 1651219 | 1777744 |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | | |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | | |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | | |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | | |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| **(15)** Other | 1c(15) | | |

| | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **1d** Employer-related investments: | | | |
| **(1)** Employer securities | 1d(1) | | |
| **(2)** Employer real property | 1d(2) | | |
| **1e** Buildings and other property used in plan operation | 1e | | |
| **1f** Total assets (add all amounts in lines 1a through 1e) | 1f | 84725984 | 95573943 |
| **Liabilities** | | | |
| **1g** Benefit claims payable | 1g | | |
| **1h** Operating payables | 1h | | |
| **1i** Acquisition indebtedness | 1i | | |
| **1j** Other liabilities | 1j | 129000 | 150900 |
| **1k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 129000 | 150900 |
| **Net Assets** | | | |
| **1l** Net assets (subtract line 1k from line 1f) | 1l | 84596984 | 95423043 |

## 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) | | |
| **(B)** Participants | 2a(1)(B) | | |
| **(C)** Others (including rollovers) | 2a(1)(C) | | |
| **(2)** Noncash contributions | 2a(2) | | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 0 |
| **b Earnings on investments:** | | | |
| **(1)** Interest: | | | |
| **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 288903 | |
| **(B)** U.S. Government securities | 2b(1)(B) | 197356 | |
| **(C)** Corporate debt instruments | 2b(1)(C) | | |
| **(D)** Loans (other than to participants) | 2b(1)(D) | | |
| **(E)** Participant loans | 2b(1)(E) | | |
| **(F)** Other | 2b(1)(F) | | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 486259 |
| **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | | |
| **(B)** Common stock | 2b(2)(B) | | |
| **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 0 |
| **(3)** Rents | 2b(3) | | |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 17751137 | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 9670544 | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | 8080593 |
| **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | | |
| **(B)** Other | 2b(5)(B) | 7374862 | |
| **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | 7374862 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | |
| c Other income | 2c | | |
| d Total income. Add all **income** amounts in column (b) and enter total | 2d | | 15941714 |
| **Expenses** | | | |
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 4936641 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | | |
| (3) Other | 2e(3) | | |
| (4) Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 4936641 |
| f Corrective distributions (see instructions) | 2f | | |
| g Certain deemed distributions of participant loans (see instructions) | 2g | | |
| h Interest expense | 2h | | |
| i Administrative expenses: | | | |
| (1) Salaries and allowances | 2i(1) | | |
| (2) Contract administrator fees | 2i(2) | 32040 | |
| (3) Recordkeeping fees | 2i(3) | | |
| (4) IQPA audit fees | 2i(4) | | |
| (5) Investment advisory and investment management fees | 2i(5) | 145283 | |
| (6) Bank or trust company trustee/custodial fees | 2i(6) | | |
| (7) Actuarial fees | 2i(7) | | |
| (8) Legal fees | 2i(8) | | |
| (9) Valuation/appraisal fees | 2i(9) | | |
| (10) Other trustee fees and expenses | 2i(10) | 1691 | |
| (11) Other expenses | 2i(11) | | |
| (12) Total administrative expenses. Add lines **2i(1)** through **(11)** | 2i(12) | | 179014 |
| j Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 5115655 |
| **Net Income and Reconciliation** | | | |
| k Net income (loss). Subtract line **2j** from line **2d** | 2k | | 10826059 |
| l Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | |
| (2) From this plan | 2l(2) | | |

## Part III Accountant's Opinion

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

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

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

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

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

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

**(1)** Name: BAKER TILLY US, LLP **(2)** EIN: 30-1413443

**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 | | 2000000 |
| **f** Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | **4f** | | X | |
| **g** Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4g** | | X | |
| **h** Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | **4h** | | X | |
| **i** Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | **4i** | X | | |
| **j** Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | **4j** | X | | |
| **k** Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | **4k** | | X | |
| **l** Has the plan failed to provide any benefit when due under the plan? | **4l** | | X | |
| **m** If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | **4m** | | | |
| **n** If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | **4n** | | | |

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 1216053.

# 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
FOREST LAWN RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 333

**C** Plan sponsor's name as shown on line 2a of Form 5500
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

## Part I Distributions

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

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

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

EIN(s): 36-1561860

**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 | 42

## 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: 55.3 % Private Equity: 9.8 % Investment-Grade Debt and Interest Rate Hedging Assets: 9.2 %
High-Yield Debt: 3.9 % Real Assets: 0.0 % Cash or Cash Equivalents: 3.1 % Other: 18.7 %

**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_____.

Financial Statements with Supplemental Schedules

# Forest Lawn Retirement Plan

December 31, 2025 and 2024



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# Report of Independent Auditor's

To Administrative Committee and Participants
Forest Lawn Retirement Plan

**Opinion**

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

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

**Basis for Opinion**

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

**Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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 Forest Lawn Retirement Plan's ability to continue as a going concern within 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.

Baker Tilly Advisory Group, LP and Baker Tilly US, LLP, trading as Baker Tilly, are members of the global network of Baker Tilly International Ltd., the members of which are separate and independent legal entities. Baker Tilly US, LLP is a licensed CPA firm that provides assurance services to its clients. Baker Tilly Advisory Group, LP and its subsidiary entities provide tax and consulting services to their clients and are not licensed CPA firms.

**Auditor's Responsibilities for the Audit of the Financial Statements**

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

In performing an audit in accordance with GAAS, we:

- exercise professional judgment and maintain professional skepticism throughout the audit.
- identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Forest Lawn Retirement 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 Forest Lawn Retirement Plan's ability to continue as a going concern for a reasonable period of time.

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

**Supplemental Schedules Required by ERISA**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) and Schedule H, Line 4(j) – Schedule of Reportable Transactions as of and for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

Baker Tilly US, LLP

Los Angeles, California
October 13, 2026

# Forest Lawn Retirement Plan
## Statements of Net Assets Available for Benefits

| | December 31, 2025 | December 31, 2024 |
|---|---|---|
| ASSETS | | |
| Investments, at fair value | | |
| U.S. government bonds | $ 5,896,523 | $ 4,286,464 |
| Money market fund | 3,099,318 | 1,756,996 |
| Common collective trust fund | 1,777,744 | 1,651,219 |
| Partnerships | 64,836,014 | 58,209,309 |
| Hedge fund of funds | 19,880,055 | 18,769,133 |
| Total investments | 95,489,654 | 84,673,121 |
| Receivables | | |
| Due from broker for securities sold | 247,564 | 14,482 |
| Interest and dividends receivable | 84,380 | 52,863 |
| Total receivables | 331,944 | 67,345 |
| Total assets | 95,821,598 | 84,740,466 |
| LIABILITIES | | |
| Administrative expenses payable | 150,900 | 129,000 |
| Due to broker for securities purchased | 247,655 | 14,482 |
| Total liabilities | 398,555 | 143,482 |
| NET ASSETS AVAILABLE FOR BENEFITS | $ 95,423,043 | $ 84,596,984 |


See accompanying notes.

# Forest Lawn Retirement Plan
## Statements of Changes in Net Assets Available for Benefits

| | Years Ended December 31, | |
|---|---|---|
| | 2025 | 2024 |
| INVESTMENT INCOME | | |
| Net appreciation in fair value of investments | $ 15,455,455 | $ 8,365,869 |
| Interest | 486,259 | 439,976 |
| Dividends | - | 14,557 |
| Total investment income | 15,941,714 | 8,820,402 |
| DISTRIBUTIONS AND EXPENSES | | |
| Benefits paid | 4,936,641 | 4,481,647 |
| Administrative expenses | 179,014 | 179,043 |
| Total distributions and expenses | 5,115,655 | 4,660,690 |
| CHANGE IN NET ASSETS | 10,826,059 | 4,159,712 |
| NET ASSETS AVAILABLE FOR BENEFITS, beginning of year | 84,596,984 | 80,437,272 |
| NET ASSETS AVAILABLE FOR BENEFITS, end of year | $ 95,423,043 | $ 84,596,984 |


See accompanying notes.

### Note 1 – Plan Description

The following description of the Forest Lawn Retirement Plan (the Plan) provides only general information. Participants should refer to the Plan Document and the summary Plan Description for a more complete description of the Plan's provisions. These documents are available upon request from the Administrative Committee of the Forest Lawn Retirement Plan (the Committee).

The Plan is an employer-sponsored defined benefit plan for the benefit of eligible employees of the participating employer corporations. The participating employers are Forest Lawn Memorial-Park Association (FLMPA) and Forest Lawn Mortuary, which is a wholly owned subsidiary of FLMPA. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Employees become eligible to participate in the Plan on the first day of January, April, July, or October, coinciding with or following the first anniversary of employment as defined in the Plan. The following types of employees are excluded from participation under the Plan:

- Employees covered under a collective bargaining agreement;
- Leased employees; and
- Employees not reported on the payroll records of the employer as a common law employee.

**Plan administration and investments** – The Committee administers the Plan. Northern Trust Company is the appointed trustee and custodian.

Strategic Investment Group (the Investment Manager) is the sole investment manager for the Plan. The Investment Manager has selected sub-managers, grouped in various business trusts and partnerships by asset class, to assist in carrying out its responsibilities. The Investment Manager is selected by the Investment Committee of FLMPA while sub-managers are selected by the Investment Manager.

**Funding policy** – The Plan provides for retirement benefits to eligible employees and is funded by annual contributions from the participating employer corporations. Annual contributions are based on computations of an independent actuary and met the minimum funding requirements as prescribed under ERISA. There were no minimum funding requirements for the years ended December 31, 2025 and 2024. The Committee decided to not fund any employer contributions for the years ended December 31, 2025 and 2024. Employee contributions are not permitted by the Plan.

**Benefits** – The benefit a participant is entitled to is based on a formula, as defined by the Plan. Normal retirement benefit is mainly comprised of two parts:

a) Prior to January 1, 2011 – Employees who were participants in the Plan prior to January 1, 2011, have a grandfathered benefit of a monthly annuity based primarily on years of service and the five highest consecutive years of compensation.

b) January 1, 2011 and later – Benefits earned subsequent to January 1, 2011, are equal to the lump-sum value of a participant's accumulation account. A participant is eligible to receive a hypothetical employer contribution to be credited to the accumulation account if he or she completes a year of service, as defined by the Plan. The amount credited to the accumulation account is as follows:

| Points (Age + Service) | Contribution |
|---|---|
| Less than 40 | 1.80% of compensation |
| 40 to 49 | 2.35% of compensation |
| 50 to 59 | 3.00% of compensation |
| 60 to 69 | 3.80% of compensation |
| 70 to 79 | 4.80% of compensation |
| 80 to 89 | 6.00% of compensation |
| 90 or more | 7.50% of compensation |

The Plan also provides for early retirement benefits for those participants attaining the age of 55 and completing 15 years of service. An adjustment is made to the accrued benefits using the early retirement date, as defined by the Plan's benefits formula.

**Note 2 – Summary of Significant Accounting Policies**

**Basis of accounting** – The financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (GAAP), using the accrual method of accounting.

**Use of estimates** – The preparation of financial statements in conformity with GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements and the reported amounts of income and expenses during the reporting period. Actual results could differ from those estimates.

**Investment valuation** – Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability (the "exit price") in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

**Income recognition** – Purchases and sales of securities are recorded on the trade date basis. Dividends are recorded on the ex-dividend date. Interest is recorded when earned. Net realized and unrealized appreciation (depreciation) is recorded in the accompanying financial statements as net appreciation in fair value of investments.

**Risk and uncertainties** – Investment securities are exposed to various risks such as interest rate, market, and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in risk in the near term would materially affect the amounts reported in the accompanying statements of net assets available for benefits and the statements of changes in net assets available for benefits.

The Plan invests in the securities of foreign companies, which involves special risks and considerations not typically associated with investing in U.S. companies. These risks include devaluation of currencies, less reliable information about issuers, different securities transaction clearance and settlement practices, and possible adverse political and economic developments. Moreover, securities of many foreign companies and their markets may be less liquid and their prices more volatile than those of securities of comparable U.S. companies.

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

**Payment of benefits** – Benefit payments to participants are recorded upon distribution.

**Administrative expenses** – Plan expenses related to investment management, audit, legal, and custodial fees were paid by the Plan and by the participating employers.

**Vesting** – Employees generally are 100% vested after three years of credited service.

**Note 3 – Plan Termination**

In the event of termination of the Plan, each participating employee's rights to accrued benefits become fully vested and nonforfeitable to the extent funded on the date of such termination, and the net assets will be allocated as prescribed by ERISA, generally to provide the following benefits, if applicable, in the order indicated:

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

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

c) Other vested benefits insured by the Pension Benefit Guaranty Corporation (PBGC), up to the applicable limitations provided thereunder.

d) All other vested benefits not insured by the PBGC.

e) All nonvested benefits.

Whether all participants receive their benefits should the Plan terminate at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits and may also depend on the level of benefits guaranteed by the PBGC.

Although they have not expressed any intention to do so, the participating employers have the right under the Plan to amend or discontinue their contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA.

**Note 4 – Federal Income Tax Status**

The Internal Revenue Service (IRS) issued a determination letter dated September 13, 2016, stating that the Plan was designed in accordance with applicable Internal Revenue Code (IRC) requirements as of that date.

In accordance with guidance on accounting for uncertainty in income taxes, the Committee does not believe the Plan has any uncertain tax positions that require disclosure or adjustment to the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

**Note 5 – Actuarial Present Value of Accumulated Plan Benefits**

Accumulated plan benefits are those future periodic payments or lump-sum distributions that are attributable to employees under the Plan's provisions for services rendered. Accumulated plan benefits include benefits expected to be paid to: (a) retired or terminated employees or their beneficiaries; (b) beneficiaries of employees who have died; and (c) present employees or their beneficiaries.

The actuarial present value of accumulated plan benefits for the Plan is determined by the Plan's independent actuary, Milliman USA, and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefit obligations to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation dates (December 31, 2025 and 2024) and the expected date of payment.

The following table sets forth information with respect to the actuarial present value of accumulated plan benefits as of December 31:

| | 2025 | 2024 |
|---|---|---|
| Vested benefits | | |
| Participants currently receiving benefits | $ 25,657,357 | $ 25,299,569 |
| Other participants | 44,304,720 | 41,330,557 |
| Nonvested benefits | 167,444 | 176,054 |
| Total actuarial present value of accumulated plan benefits | $ 70,129,521 | $ 66,806,180 |

The following table sets forth information with respect to the changes in accumulated plan benefits for the plan years ended December 31:

| | 2025 | 2024 |
|---|---|---|
| Actuarial present value of accumulated plan benefits, beginning of year | $ 66,806,180 | $ 63,970,244 |
| Increase (decrease) attributed to | | |
| Benefits accumulated | 3,681,718 | 3,043,521 |
| Increase due to decrease in discount period | 4,503,650 | 4,321,059 |
| Change in actuarial assumptions | 74,614 | (46,997) |
| Benefits paid | (4,936,641) | (4,481,647) |
| Net increase | 3,323,341 | 2,835,936 |
| Actuarial present value of accumulated plan benefits, end of year | $ 70,129,521 | $ 66,806,180 |

The significant actuarial assumptions used to calculate the Plan's actuarial present value of accumulated plan benefits as of December 31, 2025 and 2024, were: (a) life expectancy of participants using the Pri-2012 total dataset mortality tables projected generationally using MP-2021; (b) based on actual experience of male and female employees retiring from 2013 to 2017, employees are assumed to retire at progressively increasing rates between the ages of 55 to 73; (c) discount rate of 7.0%; (d) salary increases of 4.0%; and (e) withdrawal rates based on combined experience of male and female employees terminating from 2013 to 2017.

The change in actuarial assumptions in the amount of $74,614 and $46,997 for the years ended December 31, 2025 and 2024, respectively, was due to the change in cash balance conversion rates.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

**Note 6 – Fair Value Measurement**

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3).

The three levels of the fair value hierarchy are described as follows:

**Level 1** – Inputs to the valuation techniques 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 techniques include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; and inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

**Level 3** – Inputs to the valuation techniques are unobservable and significant to the fair value measurement.

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

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

The money market fund is carried at cost, which approximates fair value.

U.S. government obligations consist of investment-grade treasury bonds and notes rated AA+ by Standard & Poor's. The Plan's investment managers value such obligations based on prices furnished by an independent pricing service, which considers the yield or price of bonds of comparable quality, coupon, maturity, and type.

The Plan invests in the NISA Collective Long Credit CIF Fund, the Northern Trust Company Collective Doubleline Long Duration Total Return Bond Fund, and the Prudential Trust Company Long Duration Credit Fund, which are collective trusts (CTs). Fair value of the CTs is determined by the investment managers of the CTs as reflected in the CTs' audited financial statements. For interests in the CTs, fair value considers, among other factors, the reported net asset value practical expedient (NAVPE) of the CTs as determined in good faith by the investment managers and the Plan's interest in the CTs. Redemptions of the CTs may be made at NAVPE on each business day. There were no unfunded commitments for the CTs as of December 31, 2025 and 2024.

**Strategic partnerships** – The Strategic Developed Markets EX-U.S. Equity Trust is a diversified equity-only portfolio that seeks to achieve a total return net of fees in excess of the total return (less a representative passive management fee) of the representative benchmarks of its respective strategies. The strategy is to generally invest in both long and short positions in equities or obligations of foreign corporations, foreign governments or supranational corporations or certain derivative securities of non-U.S. issuers or markets, and commingled portfolio investments that invest in the foregoing with a focus on developed markets excluding the U.S.

The Strategic Emerging Markets Equity Trust is a diversified equity-only portfolio that seeks to achieve a total return net of fees in excess of the total return (less a representative passive management fee) of the representative benchmarks of its respective strategies. The strategy focuses on equity investments in markets outside of the U.S. and Western Europe, including Asia and Latin America as well as Eastern Europe, Africa, and the less developed Mediterranean economies.

Strategic U.S. Equity Trust is a diversified equity portfolio that seeks to achieve a total return net of fees in excess of the total return (less a representative passive management fee) of the U.S. equities market, as measured by the Russell 3000 Index. The strategy generally invests in long positions in domestic equity securities as well as futures and options on such securities and certain stock indices, and commingled portfolio investments that invest in the foregoing.

Strategic Global Equity Trust is a diversified primarily equity portfolio that seeks to achieve a total return net of fees in excess of the total return (less a representative passive management fee) of both the U.S. and non-U.S. equities market, as measured by the weighted-average of the underlying managers' benchmarks (e.g., MSCI World Total Return Index and MSCI All Country World IMI Total Return Index). The strategy will, with the exception of defensive short and intermediate fixed income positions, invest primarily in both long and short positions in U.S. and non-U.S. equity securities as well as other derivative securities relating to U.S. and non-U.S. issuers or markets, and commingled portfolio investments that invest in the foregoing.

Strategic Buyout Series Fund, L.P. and Strategic Venture Series Fund, L.P. invest in partnerships or other pooled investment vehicles organized by independent partnership sponsors primarily to make private investments in nonpublic companies consisting primarily of equity and equity-related ownership interests. The funds generally utilize the following strategies for positions held in these limited partnerships:

- Corporate finance – encompasses middle-market buyout, leveraged buyout, and distressed credit investment strategies.

- Middle-market buyout – control-oriented investments in middle-market companies believed to have strong growth potential.

- Venture capital – seed funding to early-state companies with a high potential for growth.

The following are the commitments and unfunded commitments of the funds as of December 31, 2025:

| | Commitment | Unfunded Commitment |
|---|---|---|
| Strategic Buyout Series Fund, L.P. SBS-1 | $ 2,000,000 | $ 1,013,000 |
| Strategic Buyout Series Fund, L.P. SBS-2 | 1,750,000 | 1,380,000 |
| Strategic Buyout Series Fund, L.P. SBS-3 | 1,400,000 | 1,218,000 |
| Strategic Buyout Series Fund, L.P. SBS-4 | 1,600,000 | 1,345,000 |
| Strategic Venture Series Fund, L.P. SVS-1 | 500,000 | 216,000 |
| Strategic Venture Series Fund, L.P. SVS-2 | 500,000 | 290,000 |
| Strategic Venture Series Fund, L.P. SVS-3 | 350,000 | 215,000 |
| Strategic Venture Series Fund, L.P. SVS-4 | 400,000 | 378,000 |

Fair value of the Strategic partnerships is determined by the general partner of the partnerships as reflected in the partnerships' audited financial statements. For interests in investment partnerships, fair value considers, among other factors, the reported NAVPE equivalent of the partnerships' investments as determined in good faith by the general partner of the partnerships and the Plan's interest in the partnerships. Profits and losses of the partnerships are allocated monthly to participants according to their respective interest in the partnerships. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnerships. Because of inherent uncertainty in valuing investments in investment partnerships for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported. The Strategic partnerships are valued on the last business day of each month or on any other day by mutual consent of the investment manager and the custodial trustee. Contributions, withdrawals, and other participant activity can only be made on the first business day following the valuation of the partnerships. The investment manager, at its sole discretion, may temporarily suspend withdrawals by participants under certain circumstances as described in the partnerships' Confidential Private Offering Memorandums. Other than specifically disclosed above, the Strategic partnerships did not have any unfunded commitments as of December 31, 2025, and are valued at NAVPE under the fair value hierarchy table.

**Private equity partnerships** – Strategic Private Equity Fund IV and Strategic Private Equity Fund V invest in limited partnerships or other pooled investment vehicles organized by independent fund sponsors primarily to make private investments in nonpublic companies consisting primarily of equity and equity-related ownership interests in such companies. The partnerships may also invest directly in nonpublic entities. The partnerships have "lock-up" periods of varying lengths during which no redemptions are permitted and the following are the commitments and unfunded commitments of the funds as of December 31, 2025:

| | Commitment | Unfunded Commitment |
|---|---|---|
| Strategic Private Equity Fund IV | $ 4,000,000 | $ 1,437,000 |
| Strategic Private Equity Fund V | 4,000,000 | 1,376,000 |

Fair value of the Private Equity Partnerships is determined by the general partners of the partnerships as reflected in the partnerships' audited financial statements. For interests in investment partnerships, fair value considers, among other factors, the reported NAVPE equivalent of the partnerships' investments as determined in good faith by the general partner of the partnerships and the Plan's interest in the partnerships. The general partner makes all determinations with respect to allocations at its discretion, which are generally made in accordance with the participants' ownership percentages in the partnerships. Because of inherent uncertainty in valuing investments in investment partnerships for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported. The partnerships are valued at NAVPE under the fair value hierarchy table.

**Other partnerships** – TCW Direct Lending VII LLC and TCW Direct Lending VIII LLC are direct lending investment companies that seek to generate attractive risk-adjusted returns primarily through direct investments in senior secured loans to middle market companies or other issuers. There were no unfunded commitments for the funds as of December 31, 2025.

Fair value of the TCW Direct Lending VII LLC and TCW Direct Lending VIII LLC is determined by TCW Asset Management Company LLC (the Adviser), pursuant to the management and advisory agreement, as reflected in the audited financial statements. The Adviser is a Delaware LLC registered with the Securities and Exchange Commission under the Investment Advisers Act of 1940, as amended. For interests in the partnership, fair value considers the reported fair value of the partnership's investments as determined in good faith by the Adviser and the Plan's interest in the partnership. The Adviser makes all determinations with respect to allocations at its discretion, which are generally made in accordance with the participants' ownership percentages in the partnership. Because of inherent uncertainty in valuing investments in investment partnerships for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

Italian Real Estate Special Situations II Feeder Ltd. invests all of its investable assets into one or more sub-funds of Italian Real Estate Special Situations II SCS, SICAV RAIF, the Seed Fund, and the Closed End, an investment company organized as a common limited partnership. The objective is to obtain favorable risk-adjusted returns and to achieve capital growth through the investment of its assets in sub-performing loans, nonperforming loans, and other receivables secured by real estate assets located in Italy and real estate in Italy. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of the Italian Real Estate Special Situations II Feeder Ltd. is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from values reported.

Bayview Opportunity Offshore VI 2, L.P. invests all of its investable capital in either the Bayview Opportunity Intermediate VI, Ltd. or the Bayview Opportunity Domestic Intermediate VI, LLC, which both invest immediately into their respective master funds. The objective is to generate attractive, risk-adjusted returns by investing in a variety of credit-related investment strategies globally. Such investments may include, but are not limited to, residential and commercial whole loans, consumer loans, business loans, real estate owned and real estate, agency, nonagency and commercial mortgage-backed securities, credit risk transfer securities, corporate equity and debt instruments of any issuer, including financial services businesses that are private and/or less liquid or equity or debt securities that create exposure to credit, asset-backed securities, collateralized loan obligations, mortgage servicing rights, and other credit-sensitive and/or credit-linked financial instruments.

Bayview Opportunity Fund Offshore VII, L.P. and Subsidiary invests all of its investable capital in either the Bayview Opportunity Intermediate Fund VII, L.P. or the Bayview Opportunity (US) Intermediate Fund VII, LLC, which both invest immediately into their respective master funds. The objective is to generate attractive, risk-adjusted returns by investing globally across the entire value chain of lending and credit related financial instruments, assets, and operating businesses.

Bayview MSR Opportunity Offshore, L.P. invest substantially all of their investable assets into the Bayview MSR Opportunity Master Fund, L.P. The objective is to generate attractive risk-adjusted returns by generating current income and capital appreciation through investments in mortgage related investments with a substantial portion of the master fund's assets invested in mortgage servicing rights and mortgage servicing rights-associated assets. There were no unfunded commitments for the funds as of December 31, 2025.

Fair value of the Bayview partnerships is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

Ellington Strategic Mortgage Institutional Fund L.P. invests primarily in mortgage related securities, including inverse floaters, pools of mortgage loans made by banks, savings and loan institutions and other lenders, collateralized mortgage obligations, real estate mortgage investment conduits, stripped mortgage-related securities, and other mortgage-related securities. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of the Ellington Strategic Mortgage Institutional Fund L.P. is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

GoldenTree High Yield Value Fund Offshore (Strategic), Ltd. seeks to achieve superior returns by investment on a long-only basis in primarily public and private high-yield noninvestment grade and nonrated debt securities. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of the GoldenTree High Yield Value Fund Offshore (Strategic), Ltd. is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

KKR Global Credit Opportunities Fund (Overseas) L.P. invests all of its investable capital in the KKR Global Credit Opportunities Master Fund L.P. The investment objective is to achieve an attractive, risk-adjusted return through investment in a diversified portfolio of fixed income securities and financial instruments. It invests primarily in high yield bonds, leveraged loans, structured products and, to a lesser extent, illiquid credit. It also may invest in common or preferred stock, warrants, exchange-traded funds and other equity interest, equity or debt tranches or collateralized debt obligations and collateralized loan obligations, other asset-backed securities, trade claims, sovereign debt, derivative contracts, and such investment deemed appropriate. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of the KKR Global Credit Opportunities Fund (Overseas) L.P. is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

Deerfield Healthcare Innovations Fund III-A, L.P. seeks to make investments in healthcare companies and assets that serve important medical and societal needs. It is expected that many investments will be made in startup and early stage companies, including companies developing unproven technologies and therapeutics having an uncertain possibility of success. There are no unfunded commitments for the fund as of December 31, 2025.

Deerfield Partners, L.P. seeks to achieve investment returns, primarily from the long side, through a portfolio strategy that combines in-depth fundamental analysis of domestic and foreign health care companies. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of the Deerfield funds is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

MGG SF Evergreen Fund (Cayman) LP invests substantially all of its capital in MGG SF Evergreen Master Fund (Cayman) LP. The investment objective is to invest primarily in debt securities of middle-market businesses, primarily operating in the United States. Its investments consist primarily of private debt investments and may also include common equity or equity interests, preferred equity, warrants and equity options. Its portfolio may also contain debt investments in the form of revolving lines of credit and unfunded delayed-draw commitments. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of MGG SF Evergreen Fund (Cayman) LP is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

Sona Fios Loan Management II Cayman LP is an exempted limited partnership organized in the Cayman Islands and operates as a feeder fund within a master-feeder structure. It invests substantially all of its investable assets, through Sona Fios Loan Management II Delaware LP, in profit participating notes (PPNs) issued by Sona Fios Loan Management II Limited. The fund serves as an investment conduit and invests substantially all of its capital in PPNs issued by Sona Fios Loan Management II Limited. The Company uses the proceeds from the PPNs to obtain exposure to underlying collateralized loan obligation (CLO) investments and related credit investments. The underlying investments are primarily floating-rate credit investments. It is indirectly exposed to interest rate, currency, credit, liquidity and other price risks associated with the underlying portfolio. There are no unfunded commitments for the fund as of December 31, 2025.

Fair value of Sona Fios Loan Management II Cayman LP is determined by the general partner of the partnership as reflected in the partnership's audited financial statements. For interests in the investment partnership, fair value considers, among other factors, the reported NAVPE equivalent of the partnership's investments as determined in good faith by the general partner of the partnership and the Plan's interest in the partnership. Profits and losses of the partnership are allocated monthly to participants according to their respective interest in the partnership. The net profit or net losses of the partnerships are allocated to each participant's capital account in proportion to their capital in the partnership. Because of inherent uncertainty in valuing investments in the investment partnership for which no active market exists, the estimated value may differ significantly from the value that could be realized in a secondary market transaction, and the ultimate amounts realized could be significantly different from the values reported.

These other partnerships are valued at NAVPE under the fair value hierarchy table.

**Hedge fund of funds** – The Plan invests in the Strategic Fund SPC ALPHA Segregated Portfolio Class R1 Hedge Fund. The fund is valued at NAVPE based on the fund's net contributions to the fund and the fund's allocated share of undistributed profits and losses. The fund seeks capital appreciation through a program of investment in other investment companies and strategies which are analyzed, selected, and monitored by the investment manager. These other investment companies and strategies invest in a variety of equity, debt, and other investments, including derivatives, and may actively engage in short selling and leverage. As of December 31, 2025, the Plan could redeem funds at NAVPE on a quarterly basis with 90 days' advance notice. There were no unfunded commitments as of December 31, 2025.

The Plan invests in the ARCM Feeder Fund IV Ltd Class S1 and Series A Hedge Funds. The NAVPE is based on the fund's net contributions to the fund and the fund's allocated share of undistributed profits and losses. The fund seeks to produce attractive absolute returns over a four- to five-year time horizon by investing in distressed debt and equity securities in Asia-Pacific, in addition to securities which may trade in jurisdictions beyond Asia, but for which the drivers of risks are Asian in nature or which are sensitive to Asian economic developments. The fund's initial closing date was February 14, 2019. The investment period is four years after the initial closing date. The investment period may be extended one additional year with the consent of the fund shareholders. There were no unfunded commitments as of December 31, 2025.

The Plan invests in the Hildene Opportunities Offshore Fund, Ltd. LT-E class, which invests substantially all of its assets through a master-feeder structure in Hildene Opportunities Master Fund, Ltd. and Subsidiaries. The NAVPE is based on the fund's net contributions to the fund and the fund's allocated share of undistributed profits and losses. The Hildene Opportunities Master Fund, Ltd. and Subsidiaries were organized for the purpose of trading and investing primarily in structured finance securities consisting of collateralized debt obligations backed by trust preferred securities and direct investment in privately issued trust preferred securities. An LT shareholder may redeem all of any portion of shares on the last day of any calendar quarter upon 12 months prior written notice. An ST shareholder may redeem all or any portion of shares on the last day of any month with 180 days prior written notice, on the last day of any quarter with 90 days prior written notice, subject to a 25% investor-level gate, or on the last day of any quarter with 90 days prior written notice. There were no unfunded commitments as of December 31, 2025.

The Plan invests in the Hildene Insurance Holdings, LLC, which directly or indirectly hold equity interest in:

- Hildene Re Holdings, LLC;
- SP 1, a segregated portfolio of Hildene Re SPC, Ltd.;
- Nonvoting convertible preferred equity interests in SILAC, Inc., nonvoting common equity interests in SILAC, and any additional strategic insurance company equity investments made directly or indirectly by Hildene Insurance Holdings, LLC, or Hildene Re Holdco;
- Investments in businesses, including operating companies and/or portfolio investments, that originate assets on a recurring basis that are expected to be acquired by capital, collateral, and other accounts of Hildene Re, and/or funds withheld accounts or modified coinsurance accounts of third-party cedants that hold assets supporting liabilities ceded to Hildene Re; and
- Otherwise engaging in any business or activity that now or hereafter may be necessary, incidental, proper, advisable, or convenient in furtherance of or otherwise relating to the foregoing purpose as determined by the managing member.

The NAVPE is based on the fund's net contributions to the fund and the fund's allocated share of undistributed profits and losses. Withdrawals are made at the sole discretion of the managing member based on specified terms and waterfall. There were no unfunded commitments as of December 31, 2025.

The following table sets forth by level, within the fair value hierarchy, the Plan's investment assets measured at fair value as of December 31:

| | Fair Value Measurement at December 31, 2025 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Money market fund | $ 3,099,318 | $ - | $ - | $ 3,099,318 |
| U.S. government bonds | - | 5,896,523 | - | 5,896,523 |
| Total assets in the fair value hierarchy | $ 3,099,318 | $ 5,896,523 | $ - | 8,995,841 |
| Investments measured at NAVPE | | | | 86,493,813 |
| Investments at fair value | | | | $ 95,489,654 |

| | Fair Value Measurement at December 31, 2024 | | | |
|---|---|---|---|---|
| | Level 1 | Level 2 | Level 3 | Total |
| Money market fund | $ 1,756,996 | $ - | $ - | $ 1,756,996 |
| U.S. government bonds | - | 4,286,464 | - | 4,286,464 |
| Total assets in the fair value hierarchy | $ 1,756,996 | $ 4,286,464 | $ - | 6,043,460 |
| Investments measured at NAVPE | | | | 78,629,661 |
| Investments at fair value | | | | $ 84,673,121 |

**Note 7 – Related-Party Transactions**

The Trustee and Investment Manager are parties-in-interest as defined by ERISA. Certain plan investments are managed by the Investment Manager. These transactions qualify as party-in-interest transactions permitted by Department of Labor regulations.

**Note 8 – Net Investment Hedges**

| Type | Number of Contracts | Notional Value of Open Contracts | Contract Position | Contract Expiration |
|---|---|---|---|---|
| ME S&P CAN 60 | 2 | $ 543,323 | Long | March 2026 |
| ICUS MSCI EAF | 2 | $ 290,210 | Long | March 2026 |
| EMINI S&P 500 | 14 | $ 4,824,750 | Long | March 2026 |
| CBT UL T-BONDS | 75 | $ 8,850,000 | Long | March 2026 |
| 10-YR T-NOTES | 4 | $ 449,750 | Long | March 2026 |
| CDN DOLLAR | 7 | $ 511,840 | Long | March 2026 |

In 2025 and 2024, the Plan traded in financial index futures in order to provide broad market exposure as an overlay to a portion of the hedge fund returns, which generally are not otherwise correlated to general market returns. These instruments involve credit and market risk in excess of the amounts recognized in the accompanying statements of net assets available for benefits at December 31, 2025 and 2024. The counterparties for these instruments are generally large global financial institutions, and the markets are very well developed and liquid. The net investment hedges appreciation is included in the net appreciation in fair value of investments in the statements of changes in net assets available for benefits.

**Note 9 – Subsequent Events**

Subsequent events are events or transactions that occur after the statements of net assets available for benefits date but before the financial statements are available to be issued. The Plan recognizes in the financial statements the effects of all subsequent events that provide additional evidence about conditions that existed at the date of the statements of net assets available for benefits, including the estimates inherent in the process of preparing the financial statements. The Plan's financial statements do not recognize subsequent events that provide evidence about conditions that did not exist at the date of the statements of net assets available for benefits but arose after the statements of net assets available for benefits date and before the financial statements are available to be issued.

The Plan has evaluated subsequent events through October 13, 2026, which is the date the financial statements were available to be issued.

# Supplemental Schedules
# Required by the Department of Labor

# Forest Lawn Retirement Plan
## EIN: 95–0743320 Plan No: 333
## Schedule H, 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 | (d) Cost | (e) Current value |
|---|---|---|---|---|
| | U.S. Government Bonds | | | |
| | UNITED STATES OF AMER TREAS BONDS DTD 4.125% 08-15-2053 | 1,950,000 Certificates | $ 1,738,508 | $ 1,733,748 |
| | UNITED STATES OF AMER TREAS BONDS 3% DUE 08-15-2052 | 750,000 Certificates | 601,348 | 539,648 |
| | UNITED STATES TREAS BDS DTD 11/15/2022 4% 11-15-2052 | 2,720,000 Certificates | 2,890,638 | 2,368,950 |
| | UNITED STATES OF AMER TREAS BONDS 4.75% 08-15-2055 | 900,000 Certificates | 901,547 | 888,750 |
| | UNITED STATES TREAS BDS 1.875% DUE 2/15/2051 | 325,000 Certificates | 298,416 | 182,521 |
| | UNITED STATES TREAS BDS 2.0% DUE 2/15/2052 | 300,000 Certificates | 261,797 | 182,906 |
| | | | 6,692,254 | 5,896,523 |
| | Money Market Fund | | | |
| * | Northern Institutional Treasury Portfolio - Premier Class | 1 Shares | 3,099,318 | 3,099,318 |
| | Common Collective Trust Funds | | | |
| | NISA LONG CREDIT FUND | 59,967 Shares | 722,926 | 740,885 |
| | CF COL DOUBLELINE LNG DUR TL RT B F CL3 | 31,511 Shares | 241,372 | 293,679 |
| | CF PGIM LONG CREDIT FUND | 5,915 Shares | 735,213 | 743,180 |
| | | | 1,699,511 | 1,777,744 |
| | Partnerships | | | |
| | Bayview Opportunity Offshore VI 2, LP | 1 Par | 1 | 178,838 |
| | Bayview Opportunity Fund Offshore VII, L.P. and Subsidiary | 567,100 Par | 567,100 | 797,818 |
| | Bayview MSR Opportunity Offshore, L.P. | 499,000 Par | 499,000 | 707,408 |
| | Deerfield Healthcare Innovations Fund III-A L.P. | 13,095 Par | 13,095 | 11,471 |
| | Deerfield Partners, L.P. | 346,755 Par | 346,755 | 454,077 |
| | Ellington Strategic Mortgage Institutional Fund L.P. | 400,000 Par | 400,000 | 788,477 |
| | GoldenTree High Yield Value Fund Offshore (Strategic), Ltd. | 2,073,498 Par | 2,073,498 | 2,867,897 |
| | Italian Real Estate Special Situations Feeder Fund II Ltd | 91,966 Par | 91,966 | 141,195 |
| | KKR Global Credit Opportunities Fund (Overseas) L.P. | 800,000 Par | 800,000 | 1,056,742 |
| | MGG SF Evergreen Fund (Cayman) LP | 627,664 Par | 627,664 | 635,558 |
| | Sona CLO Equity Fund | 60,282 Par | 60,282 | 60,282 |
| * | Strategic Developed Market EX - US | 1,130,001 Par | 1,130,001 | 11,862,560 |
| * | Strategic Emerging Markets Equity Trust | 1 Par | 1 | 2,162,713 |
| * | Strategic Buyout Series Fund | 987,177 Par | 987,177 | 1,124,214 |
| * | Strategic Buyout Series SBS-2 | 370,445 Par | 370,445 | 561,792 |
| * | Strategic Buyout Series SBS-3 | 181,905 Par | 181,905 | 229,572 |
| * | Strategic Buyout Series SBS-4 | 255,043 Par | 255,043 | 292,285 |
| * | Strategic Global Equity Trust | 2,250,000 Par | 2,250,000 | 6,535,776 |
| * | Strategic Private Equity Fund IV, LP | 10,982 Par | 10,982 | 2,459,133 |
| * | Strategic Private Equity Fund V, LP | 2,493,715 Par | 2,493,715 | 4,112,447 |
| * | Strategic Venture Series Fund | 283,853 Par | 283,853 | 293,398 |
| * | Strategic Venture Series SVS-2 | 210,081 Par | 210,081 | 377,190 |
| * | Strategic Venture Series SVS-3 | 134,630 Par | 134,630 | 178,640 |
| * | Strategic Venture Series SVS-4 | 22,235 Par | 22,235 | 24,278 |
| * | Strategic US Equity Trust | 10,115,001 Par | 10,115,001 | 26,329,859 |
| | TCW Direct Lending VIII LLC | 467,878 Par | 467,878 | 430,577 |
| | TCW Direct Lending VII LLC | 268,515 Par | 268,515 | 161,817 |
| | | | 24,660,823 | 64,836,014 |
| | Hedge Fund of Funds | | | |
| * | Strategic SPC ALPHA Segregated Portfolio Class R1 | 10,300 Par | 9,217,829 | 18,712,202 |
| | Hildene Insurance Holdings, LLC | 400,000 Par | 400,000 | 546,943 |
| | Hildene Opportunities Offshore Fund LTD Class LT-E | 323,645 Par | 323,645 | 566,724 |
| | ARCM Feeder Fund IV LTD CLASS S1 | 39 Par | 22,527 | 46,735 |
| | ARCM Feeder Fund IV LTD Series A Class I | 3 Par | 3,437 | 7,451 |
| | | | 9,967,438 | 19,880,055 |
| | | | $ 46,119,344 | $ 95,489,654 |

* Party-in-interest for which a statutory exemption exists.

# Forest Lawn Retirement Plan
## EIN: 95–0743320 Plan No: 333
## Schedule H, Line 4(j) – Schedule of Reportable Transactions
## Year Ended December 31, 2025

| (a) Identity | (b) Description | (c) Purchase price | (d) Selling price | (e) Lease rental | (f) Expense incurred with transaction | (g) Cost of asset | (h) Current value of asset on transaction date | (i) Net gain or (loss) |
|---|---|---|---|---|---|---|---|---|
| Investments | | | | | | | | |
| Northern Trust* | | | | | | | | |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 43 purchases | $ 10,133,673 | $ - | $ - | $ - | $ 10,133,673 | $ 10,133,673 | $ - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 128 purchases | 11,117,073 | - | - | - | 11,117,073 | 11,117,073 | - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 63 sales | - | 9,954,479 | - | - | 9,954,479 | 9,954,479 | - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 118 sales | - | 9,718,986 | - | - | 9,718,986 | 9,718,986 | - |

* Party-in-interest for which a statutory exemption exists.

Baker Tilly Advisory Group, LP and Baker Tilly US, LLP, trading as Baker Tilly, are members of the global network of Baker Tilly International Ltd., the members of which are separate and independent legal entities. Baker Tilly US, LLP is a licensed CPA firm that provides assurance services to its clients. Baker Tilly Advisory Group, LP and its subsidiary entities provide tax and consulting services to their clients and are not licensed CPA firms.

## Forest Lawn Retirement Plan

**EIN: 95-0743320**
**Plan Number: 333**

## Form 5500 for 2025 Plan Year
## Schedule SB, line 26a – Schedule of Active Participant Data

| Attained Age | Years of Credited Service | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Under 1 | | | 1 to 4 | | | 5 to 9 | | | 10 to 14 | | |
| | | Average * | | | Average * | | | Average * | | | Average * | |
| | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. |
| Under 25 | 0 | | | 20 | $54,531 | $676 | 0 | | | 0 | | |
| 25 - 29 | 2 | - | - | 66 | 64,207 | 1,546 | 12 | - | - | 1 | - | - |
| 30 - 34 | 0 | | | 65 | 66,475 | 1,654 | 50 | $71,375 | $6,402 | 9 | - | - |
| 35 - 39 | 1 | - | - | 43 | 67,059 | 2,089 | 34 | 72,667 | 8,271 | 28 | $98,780 | $18,934 |
| 40 - 44 | 0 | | | 36 | 85,895 | 3,008 | 37 | 105,762 | 13,135 | 13 | - | - |
| 45 - 49 | 0 | | | 29 | 103,430 | 4,019 | 24 | 141,052 | 19,619 | 17 | - | - |
| 50 - 54 | 0 | | | 31 | 80,128 | 3,519 | 32 | 132,596 | 21,098 | 27 | 148,627 | 38,449 |
| 55 - 59 | 1 | - | - | 30 | 71,197 | 2,995 | 34 | 118,496 | 20,939 | 14 | - | - |
| 60 - 64 | 0 | | | 13 | 89,314 | 5,754 | 33 | 113,004 | 27,001 | 24 | 148,214 | 54,202 |
| 65 - 69 | 0 | | | 7 | 63,636 | 4,737 | 16 | 117,498 | 32,613 | 17 | - | - |
| 70 & Up | 0 | | | 0 | | | 8 | 79,522 | 25,713 | 8 | - | - |
| Total | 4 | - | - | 340 | $73,090 | $2,484 | 280 | $102,643 | $16,553 | 158 | $126,178 | $40,005 |

| Attained Age | 15 to 19 | | | 20 to 24 | | | 25 to 29 | | | 30 to 34 | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | Average * | | | Average * | | | Average * | | | Average * | |
| | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. |
| Under 25 | 0 | | | 0 | | | 0 | | | 0 | | |
| 25 - 29 | 0 | | | 0 | | | 0 | | | 0 | | |
| 30 - 34 | 0 | | | 0 | | | 0 | | | 0 | | |
| 35 - 39 | 10 | - | - | 2 | - | - | 0 | | | 0 | | |
| 40 - 44 | 17 | - | - | 10 | - | - | 1 | - | - | 0 | | |
| 45 - 49 | 15 | - | - | 8 | - | - | 4 | - | - | 2 | - | - |
| 50 - 54 | 17 | - | - | 4 | - | - | 7 | - | - | 3 | - | - |
| 55 - 59 | 15 | - | - | 8 | - | - | 6 | - | - | 14 | - | - |
| 60 - 64 | 11 | - | - | 19 | - | - | 4 | - | - | 8 | - | - |
| 65 - 69 | 5 | - | - | 5 | - | - | 6 | - | - | 2 | - | - |
| 70 & Up | 3 | - | - | 5 | - | - | 2 | - | - | 3 | - | - |
| Total | 93 | $113,257 | $48,643 | 61 | $105,435 | $59,338 | 30 | $124,553 | $83,079 | 32 | $119,466 | $93,542 |

| Attained Age | 35 to 39 | | | 40 & up | | |
|---|---|---|---|---|---|---|
| | | Average * | | | Average * | |
| | No. | Comp. | Cash Bal. | No. | Comp. | Cash Bal. |
| Under 25 | 0 | | | 0 | | |
| 25 - 29 | 0 | | | 0 | | |
| 30 - 34 | 0 | | | 0 | | |
| 35 - 39 | 0 | | | 0 | | |
| 40 - 44 | 0 | | | 0 | | |
| 45 - 49 | 0 | | | 0 | | |
| 50 - 54 | 2 | - | - | 0 | | |
| 55 - 59 | 6 | - | - | 1 | - | - |
| 60 - 64 | 7 | - | - | 7 | - | - |
| 65 - 69 | 4 | - | - | 0 | | |
| 70 & Up | 1 | - | - | 2 | - | - |
| Total | 20 | $90,154 | $78,685 | 10 | - | - |

* Not shown for groups with fewer than 20 participants.

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

## Form 5500 for 2025 Plan Year
## Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

The following cost method and assumptions were used in valuing the benefits of all participants.

| | January 1, 2025 | January 1, 2024 |
|---|---|---|
| **Actuarial Cost Method** | Unit Credit | Unit Credit |
| **Discount rate** | | |
| PPA–Funding Target (with ARPA-21) | 5.07 / 5.31 / 5.50% for 0-5 / 5-20 / 20 + years | 4.75 / 4.87 / 5.59% for 0-5 / 5-20 / 20 + years |
| PPA–Funding Target (without ARPA-21) | 24 month avg. segmented rates with 4 month lookback 5.07 / 5.33 / 5.36% for 0-5 / 5-20 / 20 + years | 24 month avg. segmented rates with 4 month lookback 3.62 / 4.46 / 4.52% for 0-5 / 5-20 / 20 + years |
| **Salary scale** | 4.0% | 4.0% |
| **Mortality** | | |
| PPA-Target Liability | Prescribed Generational Mortality Assumption under IRC Section 430(h)(3)(A) | Prescribed Generational Mortality Assumption under IRC Section 430(h)(3)(A) |
| **Withdrawal rates** | Service based on the combined experience of males and females terminating in 2013-2017 | Service based on the combined experience of males and females terminating in 2013-2017 |

| Service | Rate | Service | Rate |
|---|---|---|---|
| 1 | 14.0% | 1 | 14.0% |
| 2 | 13.0% | 2 | 13.0% |
| 3 | 12.0% | 3 | 12.0% |
| 4 | 11.0% | 4 | 11.0% |
| 5 | 10.0% | 5 | 10.0% |
| 6 | 9.0% | 6 | 9.0% |
| 7 | 8.0% | 7 | 8.0% |
| 8 | 7.0% | 8 | 7.0% |
| 9 | 6.0% | 9 | 6.0% |
| 10 – 19 | 5.0% | 10 – 19 | 5.0% |
| 20+ | 3.0% | 20+ | 3.0% |

| | | | |
|---|---|---|---|
| **Retirement Age** | Age based on the combined experience of males and females retiring in 2013- 2017. The age at which 100% of employees are assumed to retire was extended from age 70 to age 73 as of January 1, 2022. | Age based on the combined experience of males and females retiring in 2013- 2017. The age at which 100% of employees are assumed to retire was extended from age 70 to age 73 as of January 1, 2022. | |

| Age | Rate | Age | Rate |
|---|---|---|---|
| 55 - 59 | 3.0% | 55 - 59 | 3.0% |
| 60 - 62 | 10.0% | 60 - 62 | 10.0% |
| 63 | 15.0% | 63 | 15.0% |
| 64 - 66 | 20.0% | 64 - 66 | 20.0% |
| 67 - 69 | 25.0% | 67 - 69 | 25.0% |
| 70-72 | 50.0% | 70-72 | 50.0% |
| 73+ | 100.0% | 73+ | 100.0% |

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

## Form 5500 for 2025 Plan Year
## Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

| | January 1, 2025 | January 1, 2024 |
|---|---|---|
| **Accrued Frozen Benefit Election** | 50% of employees eligible for early commencement are assumed to start payments immediately after termination and 50% are assumed to start at age 65, or termination if later, employees not eligible for early commencement are assumed to start payment at age 65. | 50% of employees eligible for early commencement are assumed to start payments immediately after termination and 50% are assumed to start at age 65, or termination if later, employees not eligible for early commencement are assumed to start payment at age 65. |
| **Accrued Frozen Benefit Form of Payment** | 75% Single Life Annuity<br>25% Joint and Survivor with 100% Continuance | 75% Single Life Annuity<br>25% Joint and Survivor with 100% Continuance |
| **Cash Balance Form and Election** | At termination, if the cash balance benefit does not exceed $5,000, then it is assumed immediately paid upon termination as a lump sum. If the cash balance benefit exceeds $5,000, then 50% are assumed to elect immediate payment and 50% are assumed to elect payment at age 65, or termination if later. At the assumed payment age, and if eligible for early commencement at assumed payment ages less than 65, 10% of participants are assumed to annuitize their cash balance benefit. The rest will elect a lump sum of their cash balance benefit.<br><br>Former employees who have a cash balance benefit are assumed to defer payment of their cash balance benefit until age 65, or the valuation date if later. 10% of former employees are assumed to annuitize their cash balance benefit when payments commence, the rest will elect a lump sum of their cash balance benefit. | At termination, if the cash balance benefit does not exceed $5,000, then it is assumed immediately paid upon termination as a lump sum. If the cash balance benefit exceeds $5,000, then 50% are assumed to elect immediate payment and 50% are assumed to elect payment at age 65, or termination if later. At the assumed payment age, and if eligible for early commencement at assumed payment ages less than 65, 10% of participants are assumed to annuitize their cash balance benefit. The rest will elect a lump sum of their cash balance benefit.<br><br>Former employees who have a cash balance benefit are assumed to defer payment of their cash balance benefit until age 65, or the valuation date if later. 10% of former employees are assumed to annuitize their cash balance benefit when payments commence, the rest will elect a lump sum of their cash balance benefit. |
| **Cash Balance Annuity Conversion** | Plan definition of Actuarial Equivalent for purposes of converting a cash balance account to a single life annuity for payments starting during the 2025 plan year, which is the applicable interest rates under Section 417(e)(3)(D) for the fifth calendar month preceding the first day of the plan year for payments made during the plan year, and the applicable mortality table as defined in Section 417(e)(3)(B). | Plan definition of Actuarial Equivalent for purposes of converting a cash balance account to a single life annuity for payments starting during the 2024 plan year, which is the applicable interest rates under Section 417(e)(3)(D) for the fifth calendar month preceding the first day of the plan year for payments made during the plan year, and the applicable mortality table as defined in Section 417(e)(3)(B). |
| **Probability of Marriage** | For future retirees, assume 90% of participants are married, and female spouses are 3 years younger than male spouses. Actual data used for current retirees. | For future retirees, assume 90% of participants are married, and female spouses are 3 years younger than male spouses. Actual data used for current retirees. |

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

## Form 5500 for 2025 Plan Year
## Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

| | January 1, 2025 | January 1, 2024 |
|---|---|---|
| **Missing Inactive Participants** | Any former participant over age 75 who cannot be located and has not applied for benefits is assumed to be deceased with no spousal beneficiary. | Any former participant over age 75 who cannot be located and has not applied for benefits is assumed to be deceased with no spousal beneficiary. |
| **Administrative Expenses** | $50,000 | $44,000 |
| **Asset valuation method** | Average market value over the last 3 valuation dates. Must be within 90-110% of market value. | Average market value over the last 3 valuation dates. Must be within 90-110% of market value. |

# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

**2025**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

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

**A** This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan
- ☐ a DFE (specify) _____

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

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

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

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

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
FOREST LAWN RETIREMENT PLAN

**1b** Three-digit plan number (PN) ▶ 333

**1c** Effective date of plan 12/31/1953

**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)

Forest Lawn Memorial-Park Assoc

1712 S. Glendale Ave.

Glendale CA 91205

**2b** Employer Identification Number (EIN) 95-0743320

**2c** Plan Sponsor's telephone number 323-254-3131

**2d** Business code (see instructions) 812220

**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 | D C R U L.L.C. | 10/14/26 | Doug Urbanski, Committee Member |
| | **Signature of plan administrator** | Date | Enter name of individual signing as plan administrator |
| SIGN HERE | D C R U L.L.C. | 10/14/26 | Doug Urbanski, Committee Member |
| | **Signature of employer/plan sponsor** | Date | Enter name of individual signing as employer or plan sponsor |
| SIGN HERE | | | |
| | **Signature of DFE** | Date | Enter name of individual signing as DFE |

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

ADMINISTRATIVE COMMITTEE FOREST LAWN RETIREMENT PLAN

1712 S. GLENDALE AVE.

GLENDALE CA 91205

**3b** Administrator's EIN: 95-0743320

**3c** Administrator's telephone number: 323-254-3131

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

**a** Sponsor's name

**c** Plan Name

**4b** EIN

**4d** PN

| | | | |
|---|---|---|---|
| **5** | Total number of participants at the beginning of the plan year | **5** | 1,995 |
| **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)** | 965 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 998 |
| **b** | Retired or separated participants receiving benefits | **6b** | 556 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 442 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c**. | **6d** | 1,996 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 74 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 2,070 |
| **g(1)** | Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) | **6g(1)** | |
| **g(2)** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g(2)** | |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 81 |
| **7** | Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

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

1A

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

**9a** Plan funding arrangement (check all that apply)

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

**9b** Plan benefit arrangement (check all that apply)

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

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

**a Pension Schedules**

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

**b General Schedules**

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

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

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

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

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

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

Receipt Confirmation Code_____

# Forest Lawn Retirement Plan
## EIN: 95–0743320 Plan No: 333
## Schedule H, Line 4(j) – Schedule of Reportable Transactions
## Year Ended December 31, 2025

| (a) Identity | (b) Description | (c) Purchase price | (d) Selling price | (e) Lease rental | (f) Expense incurred with transaction | (g) Cost of asset | (h) Current value of asset on transaction date | (i) Net gain or (loss) |
|---|---|---|---|---|---|---|---|---|
| Investments | | | | | | | | |
| Northern Trust* | | | | | | | | |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 43 purchases | $ 10,133,673 | $ - | $ - | $ - | $ 10,133,673 | $ 10,133,673 | $ - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 128 purchases | 11,117,073 | - | - | - | 11,117,073 | 11,117,073 | - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 63 sales | - | 9,954,479 | - | - | 9,954,479 | 9,954,479 | - |
| Northern Institutional Treasury Portfolio – Premier Class | Series of 118 sales | - | 9,718,986 | - | - | 9,718,986 | 9,718,986 | - |

* Party-in-interest for which a statutory exemption exists.

# 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
FOREST LAWN RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 333

**C** Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
FOREST LAWN MEMORIAL-PARK ASSOC

**D** Employer Identification Number (EIN)
95-0743320

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

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

## Part I Basic Information

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

**2** Assets:

| | | |
|---|---|---|
| **a** Market value | **2a** | 84730398 |
| **b** Actuarial value | **2b** | 80358889 |

**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 | 561 | 28139933 | 28139933 |
| **b** For terminated vested participants | 418 | 11103610 | 11103610 |
| **c** For active participants | 1028 | 37389735 | 37574284 |
| **d** Total | 2007 | 76633278 | 76817827 |

**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** | 5.36 % |
| **6** Target normal cost | | |
| **a** Present value of current plan year accruals | **6a** | 3364942 |
| **b** Expected plan-related expenses | **6b** | 50000 |
| **c** Target normal cost | **6c** | 3414942 |

**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

9/21/2025
Date

REID EARNHARDT
Type or print name of actuary

26-08739
Most recent enrollment number

MILLIMAN, INC.
Firm name

925-948-1253
Telephone number (including area code)

500 YGNACIO VALLEY ROAD
SUITE 498
WALNUT CREEK, CA 94596
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 11.06 % | 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) | | 0 |
| b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.12 % | | 0 |
| 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 | | 0 |
| 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 | 104.60% |
| 15 Adjusted funding target attainment percentage | 15 | 104.60% |
| 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 | 108.92% |
| 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 |
|---|---|---|---|---|---|
| | 0 | 0 | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Totals ▶ 18(b) | 0 | 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 | 0 |

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: | |
|---|---|---|---|
| 5.07% | 5.31% | 5.50% | ☐ N/A, full yield curve used |

**b** Applicable month (enter code) — **21b**: 4

**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** | 3414942 |
| **b** Excess assets, if applicable, but not greater than line 31a | **31b** | 3414942 |

**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** | 0 |

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

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

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

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

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

**Form 5500 for 2025 Plan Year**

**Schedule SB, line 22 – Description of Weighted Average Retirement Age**

| (A) Age | (B) Retirement Rate | (C) Number Active at Beginning of year =[(C) - (D)] prior year | (D) Retiring At Age Shown =(B) x (C) | (E) Active At End Of Year =(C) - (D) | (F) Retirement Age (weight) =(A) x (D) |
|---|---|---|---|---|---|
| 55 | 0.0300 | 1.0000 | 0.0300 | 0.9700 | 1.6500 |
| 56 | 0.0300 | 0.9700 | 0.0291 | 0.9409 | 1.6296 |
| 57 | 0.0300 | 0.9409 | 0.0282 | 0.9127 | 1.6089 |
| 58 | 0.0300 | 0.9127 | 0.0274 | 0.8853 | 1.5881 |
| 59 | 0.0300 | 0.8853 | 0.0266 | 0.8587 | 1.5670 |
| 60 | 0.1000 | 0.8587 | 0.0859 | 0.7729 | 5.1524 |
| 61 | 0.1000 | 0.7729 | 0.0773 | 0.6956 | 4.7144 |
| 62 | 0.1000 | 0.6956 | 0.0696 | 0.6260 | 4.3126 |
| 63 | 0.1500 | 0.6260 | 0.0939 | 0.5321 | 5.9159 |
| 64 | 0.2000 | 0.5321 | 0.1064 | 0.4257 | 6.8111 |
| 65 | 0.2000 | 0.4257 | 0.0851 | 0.3406 | 5.5340 |
| 66 | 0.2000 | 0.3406 | 0.0681 | 0.2724 | 4.4953 |
| 67 | 0.2500 | 0.2724 | 0.0681 | 0.2043 | 4.5634 |
| 68 | 0.2500 | 0.2043 | 0.0511 | 0.1532 | 3.4736 |
| 69 | 0.2500 | 0.1532 | 0.0383 | 0.1149 | 2.6435 |
| 70 | 0.5000 | 0.1149 | 0.0575 | 0.0575 | 4.0228 |
| 71 | 0.5000 | 0.0575 | 0.0287 | 0.0287 | 2.0401 |
| 72 | 0.5000 | 0.0287 | 0.0144 | 0.0144 | 1.0344 |
| 73 | 1.0000 | 0.0144 | 0.0144 | 0.0000 | 1.0488 |
| Total | | | | | 63.8059 |

63.8059 is the expected retirement age in the absence of other decrements.

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

## Form 5500 for 2025 Plan Year
## Schedule SB, line 26b – Schedule of Projection of Expected Benefit Payments

| Plan Year | Active Participants | Terminated Vested Participants | Retired Participants and Beneficiaries Receiving Payments | Total |
|---|---|---|---|---|
| 2025 | $3,915,451 | $577,168 | $3,001,268 | $7,493,887 |
| 2026 | 2,770,601 | 278,380 | 2,905,049 | 5,954,030 |
| 2027 | 2,367,489 | 295,527 | 2,801,335 | 5,464,351 |
| 2028 | 2,425,621 | 746,470 | 2,694,375 | 5,866,466 |
| 2029 | 2,637,748 | 453,100 | 2,584,447 | 5,675,295 |
| 2030 | 2,564,624 | 551,509 | 2,471,859 | 5,587,992 |
| 2031 | 2,535,008 | 652,673 | 2,356,946 | 5,544,627 |
| 2032 | 2,532,566 | 736,619 | 2,240,074 | 5,509,259 |
| 2033 | 2,598,378 | 684,036 | 2,121,644 | 5,404,058 |
| 2034 | 2,585,500 | 644,158 | 2,002,117 | 5,231,775 |
| 2035 | 2,374,964 | 802,688 | 1,882,013 | 5,059,665 |
| 2036 | 2,462,011 | 788,418 | 1,761,895 | 5,012,324 |
| 2037 | 2,348,759 | 834,951 | 1,642,373 | 4,826,083 |
| 2038 | 2,256,310 | 763,988 | 1,524,082 | 4,544,380 |
| 2039 | 2,278,253 | 1,018,421 | 1,407,666 | 4,704,340 |
| 2040 | 2,184,144 | 859,958 | 1,293,765 | 4,337,867 |
| 2041 | 2,191,276 | 820,517 | 1,182,992 | 4,194,785 |
| 2042 | 2,022,363 | 835,025 | 1,075,902 | 3,933,290 |
| 2043 | 2,024,265 | 830,776 | 972,994 | 3,828,035 |
| 2044 | 1,807,615 | 995,723 | 874,698 | 3,678,036 |
| 2045 | 1,823,701 | 808,802 | 781,370 | 3,413,873 |
| 2046 | 1,895,388 | 788,503 | 693,301 | 3,377,192 |
| 2047 | 1,739,011 | 858,219 | 610,716 | 3,207,946 |
| 2048 | 1,704,391 | 887,125 | 533,794 | 3,125,310 |
| 2049 | 1,631,795 | 820,935 | 462,683 | 2,915,413 |
| 2050 | 1,528,825 | 726,943 | 397,504 | 2,653,272 |
| 2051 | 1,582,442 | 779,435 | 338,329 | 2,700,206 |
| 2052 | 1,406,353 | 713,181 | 285,140 | 2,404,674 |
| 2053 | 1,357,564 | 592,101 | 237,853 | 2,187,518 |
| 2054 | 1,348,104 | 624,374 | 196,297 | 2,168,775 |
| 2055 | 1,091,455 | 555,115 | 160,213 | 1,806,783 |
| 2056 | 964,925 | 466,068 | 129,279 | 1,560,272 |
| 2057 | 1,005,402 | 434,452 | 103,098 | 1,542,952 |
| 2058 | 857,241 | 457,262 | 81,235 | 1,395,738 |
| 2059 | 810,170 | 430,143 | 63,228 | 1,303,541 |
| 2060 | 679,919 | 380,624 | 48,603 | 1,109,146 |
| 2061 | 596,297 | 319,580 | 36,891 | 952,768 |
| 2062 | 503,001 | 282,003 | 27,645 | 812,649 |
| 2063 | 429,217 | 239,059 | 20,447 | 688,723 |
| 2064 | 386,651 | 225,173 | 14,920 | 626,744 |
| 2065 | 285,761 | 222,608 | 10,736 | 519,105 |
| 2066 | 243,054 | 167,521 | 7,613 | 418,188 |
| 2067 | 209,826 | 147,378 | 5,314 | 362,518 |
| 2068 | 170,062 | 129,081 | 3,648 | 302,791 |
| 2069 | 151,685 | 112,555 | 2,461 | 266,701 |
| 2070 | 126,214 | 97,702 | 1,629 | 225,545 |
| 2071 | 105,478 | 84,411 | 1,057 | 190,946 |
| 2072 | 89,983 | 72,572 | 672 | 163,227 |
| 2073 | 75,902 | 62,072 | 418 | 138,392 |
| 2074 | 64,332 | 52,798 | 254 | 117,384 |

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

**Form 5500 for 2025 Plan Year**
**Schedule SB, Part V – Summary of Plan Provisions**

The following description is only a brief summary of the more important provisions of the retirement plan. In the event there are any inconsistencies between statements contained in this Appendix and the plan agreement, the provisions of the plan agreement shall control.

**Effective Date:** December 1, 1953. Amended as of 1/1/76 to comply with ERISA and as of 1/1/89 to comply with TRA86, and further amended to comply with GUST and EGTRRA. The plan was restated effective January 1, 2016.

**Employee Eligibility Requirements:** An employee commences on the first day of the calendar quarter coincident with, or next following completion of, one year of credited service.

**Credited Service:** One year of credited service is earned for each plan year in which the employee completes 1,000 hours of service or more.

**Normal Retirement Date and Benefit:** The Normal Retirement Age is 65. Payment may be made on the last day of the calendar month in which a Participant attains Normal Retirement Age. The annual Accrued Total Benefit, payable in twelve monthly installments, shall be equal to the Participant's Accrued Frozen Benefit plus the Participant's Accrued Cash Balance Benefit as follows:

Accrued Frozen Benefit:

For service through December 31, 1988:

(1) For an employee hired on or after January 1, 1976, the annual benefit will be determined according to the "offset" formula:

> "Offset" formula – for each year of credited service, measured from date of participation, 1% of the average of the five consecutive years of highest compensation, less 50% of the primary Social Security benefit.

(2) For an employee hired prior to January 1, 1976, the annual benefit will be determined according to the more favorable of the "offset" formula and the "original" formula:

> "Original" formula – upon completion of 10 years of credited service, measured from date of employment, $600; for each year of credited service in excess of 10, 1% of compensation in that year in excess of $3,600 (subject to a maximum of $48 per year until the earlier of attainment of age 50 and January 1, 1963).

For service on and after January 1, 1989 through December 31, 2010:

> For each year of credited service, measured from the later of (a) January 1, 1989 and (b) date of participation, 1% of the average of the five consecutive years of highest compensation.

Effective December 31, 2010, this benefit formula was frozen. No Service or Compensation after December 31, 2010 is counted in this benefit formula.

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

**Form 5500 for 2025 Plan Year**
**Schedule SB, Part V – Summary of Plan Provisions (continued)**

Cash Balance Benefit:

For service on or after January 1, 2011, the Accrued Cash Balance Benefit is a life annuity equal to the actuarial equivalent of the balance in the Participant's accumulation cash balance account.

Cash Balance Contributions: As of the last day of the Plan Year, Participant accounts are credited with a Hypothetical Employer Contribution based on the Participant's Points (age last birthday + number of Years of Credited Service) as shown in the following table:

| Points (Age + Service) | Contribution |
|---|---|
| Less than 40 | 1.80% of Compensation. |
| 40 to 49 | 2.35% of Compensation. |
| 50 to 59 | 3.00% of Compensation. |
| 60 to 69 | 3.80% of Compensation. |
| 70 to 79 | 4.80% of Compensation. |
| 80 to 89 | 6.00% of Compensation. |
| 90 or more | 7.50% of Compensation. |

Cash Balance Interest Rate: For Plan Years beginning on or after January 1, 2013, the annual rate of interest used to determine Cash Balance account earnings is 5%. For Plan Years ending prior to January 1, 2013, the annual rate of interest is the 10-year Treasury rate for the fifth calendar month preceding the first day of the Plan Year.

**Normal Form of Retirement Benefit:** The normal retirement benefit form shall be a life annuity determined according to the Benefit Formula above. The amount of benefit paid in another form will be the actuarial equivalent of the life annuity form.

**Early Retirement Date and Benefit:** After age 55 and 15 years of credited service. The early retirement benefit of the Accrued Frozen Benefit shall be the normal retirement benefit, reduced by an actuarial equivalent factor defined under the terms of the plan.

**Deferred Retirement:** Retirement may be deferred beyond age 65. The benefit amount is the amount determined by the "Benefit Formula" as of the employee's late retirement date.

**Vested Participant:** 100% vesting upon completion of 3 years of credited service or upon attainment of normal retirement age if earlier; 0% prior to that time.

If a non-vested employee suffers a one-year break in service, then all benefits accrued to the break will be forfeited. If such benefits are to be reinstated, then the employee must earn a year of credited service before he incurs five consecutive one-year breaks in service or, if later, the date that his number of consecutive one-year breaks in service equals his pre-break years of credited service.

Upon termination of employment, a Vested Participant may elect upon spousal consent to receive the Accumulation Cash Balance Account as a single sum cash-out. The Accrued Frozen Benefit may not be paid as a lump sum.

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

**Form 5500 for 2025 Plan Year**
**Schedule SB, Part V – Summary of Plan Provisions (continued)**

**Spouse's Pre-Retirement Death Benefit:**

Accrued Frozen Benefit:

At the death of a vested employee, the surviving spouse is entitled to a life annuity in an amount equal to 100% of the Accrued Frozen Benefit that would have been paid to the employee had he retired on the later of his date of death or age 55 and elected the joint-and-100% survivor annuity option. The annuity to the spouse commences on the later of the employee's date of death or his earliest possible retirement date (age 55). No pre-retirement death benefit is payable to a non-spouse beneficiary.

Accrued Cash Balance Benefit:

The surviving spouse (or other beneficiary, if not married) may elect to receive either the Accrued Cash Balance Benefit when the participant would have reached normal retirement age, or an immediate single sum cash-out of the Accrued Cash Balance Benefit.

# Forest Lawn Retirement Plan
## EIN: 95–0743320 Plan No: 333
## Schedule H, 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 | (d) Cost | (e) Current value |
|---|---|---|---|---|
| | U.S. Government Bonds | | | |
| | UNITED STATES OF AMER TREAS BONDS DTD 4.125% 08-15-2053 | 1,950,000 Certificates | $ 1,738,508 | $ 1,733,748 |
| | UNITED STATES OF AMER TREAS BONDS 3% DUE 08-15-2052 | 750,000 Certificates | 601,348 | 539,648 |
| | UNITED STATES TREAS BDS DTD 11/15/2022 4% 11-15-2052 | 2,720,000 Certificates | 2,890,638 | 2,368,950 |
| | UNITED STATES OF AMER TREAS BONDS 4.75% 08-15-2055 | 900,000 Certificates | 901,547 | 888,750 |
| | UNITED STATES TREAS BDS 1.875% DUE 2/15/2051 | 325,000 Certificates | 298,416 | 182,521 |
| | UNITED STATES TREAS BDS 2.0% DUE 2/15/2052 | 300,000 Certificates | 261,797 | 182,906 |
| | | | 6,692,254 | 5,896,523 |
| | Money Market Fund | | | |
| * | Northern Institutional Treasury Portfolio - Premier Class | 1 Shares | 3,099,318 | 3,099,318 |
| | Common Collective Trust Funds | | | |
| | NISA LONG CREDIT FUND | 59,967 Shares | 722,926 | 740,885 |
| | CF COL DOUBLELINE LNG DUR TL RT B F CL3 | 31,511 Shares | 241,372 | 293,679 |
| | CF PGIM LONG CREDIT FUND | 5,915 Shares | 735,213 | 743,180 |
| | | | 1,699,511 | 1,777,744 |
| | Partnerships | | | |
| | Bayview Opportunity Offshore VI 2, LP | 1 Par | 1 | 178,838 |
| | Bayview Opportunity Fund Offshore VII, L.P. and Subsidiary | 567,100 Par | 567,100 | 797,818 |
| | Bayview MSR Opportunity Offshore, L.P. | 499,000 Par | 499,000 | 707,408 |
| | Deerfield Healthcare Innovations Fund III-A L.P. | 13,095 Par | 13,095 | 11,471 |
| | Deerfield Partners, L.P. | 346,755 Par | 346,755 | 454,077 |
| | Ellington Strategic Mortgage Institutional Fund L.P. | 400,000 Par | 400,000 | 788,477 |
| | GoldenTree High Yield Value Fund Offshore (Strategic), Ltd. | 2,073,498 Par | 2,073,498 | 2,867,897 |
| | Italian Real Estate Special Situations Feeder Fund II Ltd | 91,966 Par | 91,966 | 141,195 |
| | KKR Global Credit Opportunities Fund (Overseas) L.P. | 800,000 Par | 800,000 | 1,056,742 |
| | MGG SF Evergreen Fund (Cayman) LP | 627,664 Par | 627,664 | 635,558 |
| | Sona CLO Equity Fund | 60,282 Par | 60,282 | 60,282 |
| * | Strategic Developed Market EX - US | 1,130,001 Par | 1,130,001 | 11,862,560 |
| * | Strategic Emerging Markets Equity Trust | 1 Par | 1 | 2,162,713 |
| * | Strategic Buyout Series Fund | 987,177 Par | 987,177 | 1,124,214 |
| * | Strategic Buyout Series SBS-2 | 370,445 Par | 370,445 | 561,792 |
| * | Strategic Buyout Series SBS-3 | 181,905 Par | 181,905 | 229,572 |
| * | Strategic Buyout Series SBS-4 | 255,043 Par | 255,043 | 292,285 |
| * | Strategic Global Equity Trust | 2,250,000 Par | 2,250,000 | 6,535,776 |
| * | Strategic Private Equity Fund IV, LP | 10,982 Par | 10,982 | 2,459,133 |
| * | Strategic Private Equity Fund V, LP | 2,493,715 Par | 2,493,715 | 4,112,447 |
| * | Strategic Venture Series Fund | 283,853 Par | 283,853 | 293,398 |
| * | Strategic Venture Series SVS-2 | 210,081 Par | 210,081 | 377,190 |
| * | Strategic Venture Series SVS-3 | 134,630 Par | 134,630 | 178,640 |
| * | Strategic Venture Series SVS-4 | 22,235 Par | 22,235 | 24,278 |
| * | Strategic US Equity Trust | 10,115,001 Par | 10,115,001 | 26,329,859 |
| | TCW Direct Lending VIII LLC | 467,878 Par | 467,878 | 430,577 |
| | TCW Direct Lending VII LLC | 268,515 Par | 268,515 | 161,817 |
| | | | 24,660,823 | 64,836,014 |
| | Hedge Fund of Funds | | | |
| * | Strategic SPC ALPHA Segregated Portfolio Class R1 | 10,300 Par | 9,217,829 | 18,712,202 |
| | Hildene Insurance Holdings, LLC | 400,000 Par | 400,000 | 546,943 |
| | Hildene Opportunities Offshore Fund LTD Class LT-E | 323,645 Par | 323,645 | 566,724 |
| | ARCM Feeder Fund IV LTD CLASS S1 | 39 Par | 22,527 | 46,735 |
| | ARCM Feeder Fund IV LTD Series A Class I | 3 Par | 3,437 | 7,451 |
| | | | 9,967,438 | 19,880,055 |
| | | | $ 46,119,344 | $ 95,489,654 |

* Party-in-interest for which a statutory exemption exists.

**Forest Lawn Retirement Plan**

**EIN: 95-0743320**
**Plan Number: 333**

**Form 5500 for 2025 Plan Year**

**Schedule SB, line 24 – Change in Actuarial Assumptions**

The cash balance annuity conversion assumption was updated to the Plan's definition of actuarial equivalence for payments starting during the 2025 plan year, which is the applicable interest rates under Section 417(e)(3)(D) for the fifth calendar month preceding the first day of the plan year, and the applicable mortality table as defined in Section 417(e)(3)(B).

The administrative expenses assumption was increased from $44,000 to $50,000 per year. This cost is based on average quarterly fees paid during the plan year ending December 31, 2024.