Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

1b Three-digit plan number (PN) ▶ 004

1c Effective date of plan 01/01/1938

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)
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

400 BROADWAY
CINCINNATI, OH 45202

2b Employer Identification Number (EIN) 31-0487145

2c Plan Sponsor's telephone number 513-629-1800

2d Business code (see instructions) 524140

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.	10/15/2026	STEPHEN G. HUSSEY JR.
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

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

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	5512
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)**	2747
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	2590
b	Retired or separated participants receiving benefits	**6b**	1973
c	Other retired or separated participants entitled to future benefits	**6c**	428
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	4991
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	417
f	Total. Add lines **6d** and **6e**.	**6f**	5408
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**	176
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 3H

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

9a Plan funding arrangement (check all that apply)

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
31-0487145	70483	PENSION	5408	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	1310658489
5	Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6)Total additions			7c(6)	0
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	0
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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**	1206386044
b Actuarial value	**2b**	1114729318

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	2342	517526248	517526248
b For terminated vested participants	423	43291728	43291728
c For active participants	2747	220086027	229188264
d Total	5512	780904003	790006240

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**	5.37 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	19954953
b Expected plan-related expenses	**6b**	800000
c Target normal cost	**6c**	20754953

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

10/13/2026
Date

MATTHEW D. DAVIS
Type or print name of actuary

26-08289
Most recent enrollment number

BUCK GLOBAL, LLC
Firm name

412-328-9246
Telephone number (including area code)

600 GRANT STREET
SUITE 2880
PITTSBURGH, PA 15219
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)	8549241	170750804
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)	8549241	170750804
10	Interest on line 9 using prior year's actual return of 13.49 %	1153293	23034283
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 5.14 %		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)	9702534	193785087

Part III Funding Percentages

14	Funding target attainment percentage	14	115.34 %
15	Adjusted funding target attainment percentage	15	138.44 %
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	120.07 %
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**	63

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**	20754953
b Excess assets, if applicable, but not greater than line 31a	**31b**	20754953

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 Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

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

A Name of plan
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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).. . . . . [X] 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

TOUCHSTONE ADVISORS, INC

31-1394672

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

FORT WASHINGTON INVESTMENT ADVISORS

31-1301863

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

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

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

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

THE WESTERN AND SOUTHERN LIFE INSUR

31-0487145

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 12 14 29 35 36 38 50	PLAN SPONSOR	235332	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BUCK GLOBAL, LLC

13-3954297

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 15 17 50	NONE	68925	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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: FORT WASHINGTON CORE PLUS FIXED INC

b Name of sponsor of entity listed in (a): FORT WASHINGTON MASTER COLLECTIVE INVESTMENT TRUST

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)
82-2768520-108	C	49076855

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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	15746862	10983770
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	7150275	18221000
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	160649764	174054255
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	605339	0
(B) Common	1c(4)(B)	601817506	637279537
(5) Partnership/joint venture interests	1c(5)	217151593	243485104
(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)	45478963	49076855
(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)	165885219	195778968
(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	1214485521	1328879489
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	7150275	18221000
1k Total liabilities (add all amounts in lines 1g through1j)	1k	7150275	18221000
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	1207335246	1310658489

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)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	28846099	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		28846099
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		126664969
(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		155511068
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	51952493	
(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)		51952493
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)	226888	
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	8444	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		235332
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		52187825
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		103323243
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: CLARK SCHAFER HACKETT **(2)** EIN: 31-0800053

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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

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

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

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

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

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 586083.

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
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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): 31-0487145

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 | 34

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: 61.8 % Private Equity: 4.9 % Investment-Grade Debt and Interest Rate Hedging Assets: 22.6 %
High-Yield Debt: 4.7 % Real Assets: 3.9 % Cash or Cash Equivalents: 1.2 % Other: 0.9 %

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_____.

AUDITED FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

Western & Southern Financial Group Pension Plan
Years Ended December 31, 2025 and 2024
With Report of Independent Auditors

Western & Southern Life

Western & Southern Financial Group Pension Plan

Audited Financial Statements and Supplemental Schedule

Years Ended December 31, 2025 and 2024

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Independent Auditor's Report

To the Benefits Committee and Participants
Western & Southern Financial Group

Opinion

We have audited the financial statements of the Western & Southern Financial Group Pension Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, 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 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.

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 Western & Southern Financial Group Pension Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Western & Southern Financial Group Pension Plan's ability to continue as a going concern for at least 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.

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 Western & Southern Financial Group Pension 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 Western & Southern Financial Group Pension Plan's ability to continue as a going concern for a reasonable period of time.

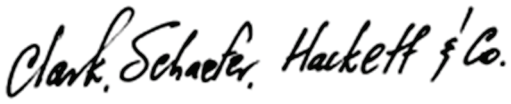
We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of Schedule H, line 4i - Schedule of Assets (Held at End of Year) 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 (DOL) 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 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 schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying supplemental schedule 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.



Cincinnati, Ohio
October 12, 2026

Western & Southern Financial Group Pension Plan

Statements of Net Assets Available for Benefits

	December 31	
	2025	**2024**
Assets		
Deposit administration group annuity contract:		
Non-pooled separate account	**$ 1,310,658,489**	$ 1,207,335,246
Net assets available for benefits	**$ 1,310,658,489**	$ 1,207,335,246

See accompanying notes.

Western & Southern Financial Group Pension Plan

Statements of Changes in Net Assets Available for Benefits

	Year Ended December 31	
	2025	**2024**
Additions		
Dividend and interest income	**$ 28,846,099**	$ 24,092,442
Net realized and unrealized appreciation in fair value of the deposit administration group annuity contract	**126,664,969**	118,976,131
Total additions	**155,511,068**	143,068,573
Deductions		
Benefits paid directly to participants	**51,952,493**	48,811,173
Administrative expenses	**235,332**	217,162
Total deductions	**52,187,825**	49,028,335
Net change in net assets available for benefits	**103,323,243**	94,040,238
Net assets available for benefits, beginning of year	**1,207,335,246**	1,113,295,008
Net assets available for benefits, end of year	**$ 1,310,658,489**	$ 1,207,335,246

See accompanying notes.

1. Description of the Plan

Western & Southern Financial Group Pension Plan (the Plan) is a noncontributory defined benefit plan that covers substantially all employees and provides for retirement benefits that are integrated with Social Security payments. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Information about the Plan Agreement, the vesting and benefit provisions, and the Pension Benefit Guaranty Corporation's (PBGC) benefit guarantee is contained in the plan document and the Summary Plan Description. Copies of these documents are available from The Western and Southern Life Insurance Company (the Company), the Plan's sponsor.

Eligibility and Vesting

An eligible employee becomes a participant in the Plan immediately after attaining 1,000 hours of service in the consecutive 12-month period from hire date and after attaining age 21. Active participants become fully vested at five years of service.

2. Summary of Significant Accounting Policies

Basis of Presentation

The following describes the significant accounting policies followed in the preparation of these financial statements, which have been prepared on the accrual basis of accounting.

Payment of Benefits

Benefits are recorded when paid.

Deposit Administration Group Annuity Contract

The Plan's assets are managed under the terms of a deposit administration group annuity contract with the Company, which provides for a non-pooled separate account. The separate account is maintained exclusively for the Plan. Earnings on separate account assets are credited to the Plan. All benefit payments are made directly by the Plan.

Investment Valuation and Income Recognition of Non-Pooled Separate Account

The Plan's deposit administration group annuity contract with the Company is valued as follows:

The investments in the non-pooled separate account are held at fair value. The other assets and other liabilities in the non-pooled separate account primarily consist of accrued investment income, receivables for securities sold, payable for securities purchased, collateral held under securities lending arrangements, and a liability to return collateral under securities lending arrangements. The other assets and liabilities are carried at the historical cost basis which approximates fair value due to their short-term duration. Fair value is defined as the price that

would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The fair value framework establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The fair value hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described below:

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

- Level 2 – Inputs to the valuation methodology include:

  – Quoted prices for similar assets or liabilities in active markets

  – Quoted prices for identical or similar assets or liabilities in inactive markets

  – Inputs other than quoted prices that are observable for the asset or liability

  – Inputs that are derived principally from or corroborated by observable market data by correlation or other means

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

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

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

The following is a description of the valuation techniques and inputs used for each major class of the Plan's assets measured at fair value. There generally have been no changes in the methodologies used in 2025 and 2024:

Debt securities: The fair values of U.S. Treasury securities and obligations of U.S. government corporations and agencies have been determined utilizing inputs from publicly quoted prices obtained from third-party pricing services. The fair values of all other debt securities have been determined through inputs from third-party pricing services utilizing market observable inputs. Less liquid private placement securities and auction rate securities trading in less liquid or illiquid markets with limited or no pricing information are valued

using either broker quotes or by discounting the expected cash flows using current market-consistent rates applicable to the yield, credit quality, and maturity of each security.

Equity securities: The fair values of actively traded equity securities have been determined utilizing publicly quoted prices obtained from third-party pricing services. The fair values of certain equity securities for which no publicly quoted prices are available have been determined through the use of third-party pricing services utilizing market observable inputs. Actively traded mutual funds are valued using the net asset values (NAV) of the funds.

Collective trust: The fair value of this fund has been estimated at NAV, which is based on the fair value of the underlying investments in the fund as reported by the issuer of the fund. NAV is used as a practical expedient in determining the fair value of the Plan's interest in the collective trust. This practical expedient would not be used if it is determined to be probable that the fund would sell the investment for an amount different from the reported NAV. Participant transactions (purchases and sales) may occur daily. There are no unfunded commitments related to the collective trust and units are redeemable at NAV. There are no notice period requirements for the redemption of the investment.

Partnerships/joint ventures: The fair values of private equity investments have been determined using available sales prices, the NAV of the funds or internal valuation methodologies appropriate for the specific assets. The NAV of the funds are used as practical expedients in determining the fair value of the Plan’s interests in the funds. The Sponsor validates the fair value assessment based on the funds’ audited financial statements, when they become available, by reconciling the audited numbers to the Plan’s accounting records. The Plan invests in private equity funds that primarily make direct and indirect venture capital and buyout investments. The fair values of certain real estate partnership investments have been determined utilizing third-party appraisals or internal valuation methodologies appropriate for the specific assets. The unfunded commitment to private equity partnerships with the underlying characteristics of equity funds was $52,432,481 and $68,179,419 at December 31, 2025 and 2024, respectively.

Collateral held under securities lending arrangements: Collateral held under securities lending arrangements is primarily invested in cash equivalents which are valued at the NAV of the shares held by the Plan at year-end.

Other assets: Other assets primarily consist of a money market fund; also included are net payable/receivable for securities, investment income due and accrued, and other liabilities. The money market fund fair value has been determined utilizing publicly quoted prices obtained from third-party pricing services.

Assets measured at fair value on a recurring basis are outlined below:

At December 31, 2025:

	Total	Amount Measured at NAV	Fair Value Hierarchy Level		
			Level 1	Level 2	Level 3
Investments					
Debt securities:					
Asset and mortgage-backed securities	**$ 13,544,864**	**$ —**	**$ —**	**$ 13,544,864**	**$ —**
Corporate debt securities	**160,509,391**	**—**	**—**	**159,123,491**	**1,385,900**
	174,054,255	**—**	**—**	**172,668,355**	**1,385,900**
Preferred stocks	**—**	**—**	**—**	**—**	**—**
Common stocks	**637,279,537**	**—**	**637,279,537**	**—**	**—**
Mutual funds	**195,778,968**	**—**	**195,778,968**	**—**	**—**
Collective trust	**49,076,855**	**49,076,855**	**—**	**—**	**—**
Partnerships/joint ventures[a]	**243,485,104**	**192,785,314**	**—**	**—**	**50,699,790**
Total investments	**1,299,674,719**	**241,862,169**	**833,058,505**	**172,668,355**	**52,085,690**
Net other assets	**10,983,770**	**—**	**8,668,766**	**2,315,004**	**—**
Net assets available for benefits	**$1,310,658,489**	**$ 241,862,169**	**$841,727,271**	**$ 174,983,359**	**$ 52,085,690**
Collateral held under securities lending arrangements – cash equivalents[b]	**$ 18,221,000**	**$ —**	**$ 18,221,000**	**$ —**	**$ —**

[a] These are private funds investing primarily in domestic fixed income securities and partnerships with the underlying characteristics of equity that primarily make direct and indirect venture capital and buyout investments. For private fund investments, the Plan has the right to redeem its limited partnership investments at their NAV. The Plan has no future funding commitments associated with the investments. For limited partnership investments, the Plan does not have the right to redeem its limited partnership investment at its NAV. Instead, the Plan receives distributions as the underlying assets of the fund are liquidated. The fair values of certain real estate partnership investments are determined utilizing third-party appraisals or internal valuation methodologies appropriate for the specific assets. It is estimated that the underlying assets of the partnerships will be liquidated over approximately 1 to 20 years.

[b] There is no impact from securities lending on net assets available for benefits, as illustrated below.

Total assets before impact of securities lending	**$ 1,310,658,489**
Collateral held under securities lending arrangements – cash equivalents	**18,221,000**
Less: Obligation to return collateral held under securities lending arrangements	**18,221,000**
Net assets available for benefits	**$ 1,310,658,489**

At December 31, 2024:

	Total	Amount Measured at NAV	Fair Value Hierarchy Level		
			Level 1	Level 2	Level 3
Investments					
Debt securities:					
Asset and mortgage-backed securities	$ 13,665,337	$ —	$ —	$ 13,665,337	$ —
Corporate debt securities	146,984,427	—	—	145,755,190	1,229,237
	160,649,764	—	—	159,420,527	1,229,237
Preferred stocks	605,339	—	—	605,339	—
Common stocks	601,817,506	—	601,817,506	—	—
Mutual funds	165,885,219	—	165,885,219	—	—
Collective trust	45,478,963	45,478,963	—	—	—
Partnerships/joint ventures[a]	217,151,593	179,062,019	—	—	38,089,574
Total investments	1,191,588,384	224,540,982	767,702,725	160,025,866	39,318,811
Net other assets	15,746,862	—	13,137,738	2,609,124	—
Net assets available for benefits	$1,207,335,246	$ 224,540,982	$ 780,840,463	$ 162,634,990	$ 39,318,811
Collateral held under securities lending arrangements – cash equivalents[b]	$ 7,150,275	$ —	$ 7,150,275	$ —	$ —

[a] These are private funds investing primarily in domestic fixed income securities and partnerships with the underlying characteristics of equity that primarily make direct and indirect venture capital and buyout investments. For private fund investments, the Plan has the right to redeem its limited partnership investments at their NAV. The Plan has no future funding commitments associated with the investments. For limited partnership investments, the Plan does not have the right to redeem its limited partnership investment at its NAV. Instead, the Plan receives distributions as the underlying assets of the fund are liquidated. The fair values of certain real estate partnership investments are determined utilizing third-party appraisals or internal valuation methodologies appropriate for the specific assets. It is estimated that the underlying assets of the partnerships will be liquidated over approximately 1 to 20 years.

[b] There is no impact from securities lending on net assets available for benefits, as illustrated below.

Total assets before impact of securities lending	$ 1,207,335,246
Collateral held under securities lending arrangements – cash equivalents	7,150,275
Less: Obligation to return collateral held under securities lending arrangements	7,150,275
Net assets available for benefits	$ 1,207,335,246

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2025:

	Partnerships/ Joint Ventures	Debt Securities	Total of Level 3 Assets
Balance, beginning of year	$ 38,089,574	$ 1,229,237	$ 39,318,811
Realized gains (losses)	—	—	—
Unrealized gains (losses)*	996,762	156,663	1,153,425
Purchases, sales, issuances, and settlements (net)	11,613,454	—	11,613,454
Transfer in (out) of Level 3	—	—	—
Balance, end of year	$ 50,699,790	$ 1,385,900	$ 52,085,690

* Included in changes in net assets related to positions still held.

The gross purchases, issuances, sales, and settlements included in the reconciliation for all assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3) for the year ended December 31, 2025, is as follows:

	Purchases	Issuances	Sales	Settlements	Purchases, Issuances, Sales, and Settlements
Assets:					
Debt securities	$ —	$ —	$ —	$ —	$ —
Partnerships/joint ventures	12,399,706	—	(786,252)	—	11,613,454
Total	$ 12,399,706	$ —	$ (786,252)	$ —	$ 11,613,454

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the year ended December 31, 2024:

	Partnerships/ Joint Ventures	Debt Securities	Total of Level 3 Assets
Balance, beginning of year	$ 23,734,011	$ —	$ 23,734,011
Realized gains (losses)	—	—	—
Unrealized gains (losses)*	1,354,581	(130,763)	1,223,818
Purchases, sales, issuances, and settlements (net)	13,000,982	1,360,000	14,360,982
Transfer in (out) of Level 3	—	—	—
Balance, end of year	$ 38,089,574	$ 1,229,237	$ 39,318,811

* Included in changes in net assets related to positions still held.

The gross purchases, issuances, sales, and settlements included in the reconciliation for all assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3) for the year ended December 31, 2024, is as follows:

	Purchases	Issuances	Sales	Settlements	Purchases, Issuances, Sales, and Settlements
Assets:					
Debt securities	$ 1,360,000	$ —	$ —	$ —	$ 1,360,000
Partnerships/joint ventures	14,637,500	—	(1,636,518)	—	13,000,982
Total	$ 15,997,500	$ —	$ (1,636,518)	$ —	$ 14,360,982

The Plan did not have any assets measured at fair value on a nonrecurring basis as of December 31, 2025 or 2024.

The net appreciation (depreciation) in the fair value of the deposit administration group annuity contract presented in the statements of changes in net assets available for benefits consists of realized gains or losses and the net unrealized appreciation or depreciation on the separate account.

The non-pooled separate account loaned $17,851,100 and $7,006,419 of common stocks as part of a securities lending program administered by Mitsubishi UFJ Trust and Banking Corporation (the custodian) as of December 31, 2025 and 2024, respectively.

The non-pooled separate account requires collateral in the amount of 102% of fair value of the applicable securities loaned. The non-pooled separate account monitors the fair value of the underlying securities as compared with the related receivable or payable, including accrued interest, and requests additional collateral as necessary. The non-pooled separate account maintains effective control over all loaned securities, and therefore, continues to report such securities as invested assets. The non-pooled separate account records an offsetting liability for the obligation to return the collateral. The Plan had $18,221,000 and $7,150,275 of collateral held in short-term overnight repurchase agreements as of December 31, 2025 and 2024, respectively.

The non-pooled separate account contains $184,146 and $42,014 of other liabilities at December 31, 2025 and 2024, respectively. The other liabilities consist primarily of amounts payable for securities purchased and other transfers to general account.

At December 31, 2025 and 2024, the non-pooled separate account owned $51,712,186 and $97,438,828, respectively, of mutual funds administered by Touchstone Advisors, Inc., a wholly owned subsidiary of the Company, which represents 3.95% and 8.07% of the net assets available for benefits, respectively. At December 31, 2025 and 2024, the non-pooled separate account's investment in trusts, partnerships and joint ventures with underlying characteristics of bonds administered by Fort Washington Investment Advisors was $164,873,932 and $152,089,552, respectively, which represents 12.58% and 12.60% of the net assets available for benefits, respectively. At December 31, 2025 and 2024, the non-pooled separate account owned $56,775,364 and $53,131,139, respectively, of partnerships and joint ventures with underlying characteristics of equity administered by Fort Washington Investment Advisors, which represents 4.33% and 4.40% of the net assets available for benefits, respectively. Fort Washington Investment Advisors is a wholly owned subsidiary of the Company.

Actuarial Present Value of Accumulated Benefits

Accumulated benefits are those estimated future periodic payments attributable under the Plan's provisions for services rendered by employees to the valuation date. Accumulated benefits include benefits expected to be paid to retired or terminated employees or their beneficiaries and presently active employees or their beneficiaries. The accumulated benefits for active employees are based on retirement credits, which they have accumulated as of the valuation date.

Benefits payable under all circumstances – retirement, death, disability, and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date.

The actuarial present value of accumulated benefits, determined by an independent actuary, is the amount which results from applying actuarial assumptions to adjust accumulated benefits to

reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements for death, disability, withdrawal, and retirement) between the valuation date and the expected date of payment. The significant actuarial assumptions used in the valuations were:

Life expectancy of current beneficiaries of deceased participants	Pri-2012 White Collar Contingent Survivor Mortality with modified scale MP-2021
Life expectancy of all other participants	Pri-2012 White Collar Employee and Retiree Mortality with modified scale MP-2021
Retirement age assumption	Company experience rate which averages age 63
Assumed rate of return on investments	7.50% in 2025 (7.50% in 2024)

The Plan's mortality assumption for plan participants, including future mortality improvements, is generally derived from tables published by the Society of Actuaries (SOA). The SOA tables for current and future beneficiaries of deceased participants (Pri-2012 White Collar Contingent Survivor Mortality) and all other participants (Pri-2012 White Collar Employee and Retiree Mortality) are currently in use by the Plan. In 2021, the SOA released an updated mortality modified improvement scale (MP-2021).

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated benefits. Actuarial assumptions are reviewed on an annual basis.

Administrative Expenses

Administrative expenses presented in the statements of changes in net assets available for benefits are allocated costs of services provided or paid by the Company.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes and supplemental schedules. Actual results could differ from those estimates.

Subsequent Events

Management evaluated subsequent events through the report date, the date the financial statements were available to be issued.

Subsequent to December 31, 2025, management approved for Western-Southern Life Assurance Company (WSLAC), a wholly-owned subsidiary of the Company, to enter into a group annuity contract to pay for certain benefit payments of the Plan. The approval permits transfer of up to $300,000,000 of pension obligation from the Plan to WSLAC under the group annuity contract, which is expected to occur in the fourth quarter of 2026.

3. Funding Policy

The Company contributes amounts necessary on an actuarial basis to provide the Plan with assets sufficient to meet the future benefit obligations of the Plan. The contributions are designed to fund the Plan's normal service costs on a current basis and to fund accrued benefit costs arising from qualifying service before the establishment of the Plan. Earnings on investments of the Plan serve to reduce future contributions and to provide benefits under the Plan. The Plan has met the ERISA minimum funding requirements.

The required employer contribution is calculated based on data at the end of the plan year. No pension contribution was required in 2025 or 2024.

4. Accumulated Benefits

A comparison of the total actuarial present value of accumulated benefits as of the end of each plan year is as follows:

	December 31	
	2025	**2024**
Actuarial present value of accumulated benefits:		
Vested benefits:		
Active participants	**$ 169,416,855**	$ 164,422,057
Retired participants currently receiving payments	**459,979,833**	457,988,551
Terminated participants	**35,582,602**	32,574,901
Nonvested benefits	**8,482,716**	8,065,808
Total actuarial present value of accumulated plan benefits	**$ 673,462,006**	$ 663,051,317

A comparison of the change in the actuarial present value of accumulated benefits is presented below as of the most recent valuation dates for which complete data is available:

	December 31	
	2025	**2024**
Change in the actuarial present value of accumulated benefits:		
Actuarial present value of accumulated benefits, beginning of year	**$ 663,051,317**	$ 634,954,487
Change in actuarial assumptions[(a)]	**—**	16,587,246
Interest accumulated	**47,625,401**	45,548,796
Benefits accumulated	**14,737,781**	14,771,961
Benefits paid during year	**(51,952,493)**	(48,811,173)
Total actuarial present value of accumulated benefits, end of year	**$ 673,462,006**	$ 663,051,317

[(a)] Change in actuarial assumptions for 2024 can be attributed to a move to White Collar mortality tables.

5. Termination Priorities

In the event the Plan terminates, all benefits accrued by participants, retired or former participants, and beneficiaries to the extent then funded, will be nonforfeitable. Upon any such termination of the Plan, the assets of the Plan shall first be allocated among the current, retired, and former participants and their beneficiaries, in the order prescribed under Title IV of ERISA. Whether a particular participant's accumulated benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets of the Plan and the PBGC's benefit guarantee, while other benefits may not be provided for at all.

6. Income Tax Status

The Plan has received a determination letter from the Internal Revenue Service (IRS) dated March 20, 2017, stating that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the Code) and, therefore, the Plan assets are exempt from taxation. Once qualified, the Plan is required to operate in conformity with the Code to maintain its qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the Code and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

7. Risks and Uncertainties

The Plan invests in various securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will

occur in the near term and that such changes could significantly affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated benefits is 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 estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could significantly affect the amounts reported and disclosed in the financial statements.

Supplemental Schedule

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Line 26a – Schedule of Active Participant Data

	Years of Credited Service																			
	Under 1		1 - 4		5 - 9		10 - 14		15 - 19		20 - 24		25 - 29		30 - 34		35 - 39		40 & up	
Attained Age	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25	8		117	$ 59,222																
25 - 29	1		164	$ 63,628	48	$ 89,170														
30 - 34			130	$ 71,934	105	$ 93,888	18													
35 - 39	2		112	$ 83,248	105	$100,093	79	$120,512	19		1									
40 - 44	2		87	$ 83,265	131	$102,605	60	$120,444	48	$126,465	10		3							
45 - 49	2		76	$ 99,348	96	$113,658	49	$140,276	41	$121,423	31	$135,143	14		1					
50 - 54	2		55	$112,875	116	$123,358	48	$124,832	56	$146,021	29	$127,670	31	119,015	6		5			
55 - 59			71	$104,045	106	$111,430	52	$115,716	50	$126,255	39	$129,473	19		7		33	$104,943	5	
60 - 64	2		68	$ 79,040	83	$130,473	51	$136,906	36	$132,068	26	$125,437	18		7		17		13	
65 - 69	1		17		33	$102,746	25	$116,272	13		3		5		3				6	
70 & up	1		5		9		4		3		2		1		1		1		3	

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods

Funding assumptions and methods selection and rationale

The following assumptions were selected by the plan's enrolled actuary. The asset valuation method was selected by the plan sponsor with the actuary's advice and is an acceptable method under the applicable provisions of the Internal Revenue Code and associated regulations. The non-prescribed assumptions having a significant impact on the measurement of the Funding Target are retirement rates, withdrawal rates, and the frequency of optional forms of payment. These assumptions were selected based on the results of an experience study performed in 2024; I perform annual gain/loss analyses to review the validity of each assumption.

Use of Models

Actuarial Standard of Practice No. 56 ("ASOP 56") provides guidance to actuaries when performing actuarial services with respect to designing, developing, selecting, modifying, using, reviewing, or evaluating models. Gallagher uses third-party software in the performance of annual actuarial valuations and projections. The model is intended to calculate the liabilities associated with the provisions of the plan using data and assumptions as of the measurement date under the funding rules specified in this report. Further, the model applies those funding rules to the liabilities derived and other inputs, such as plan assets and contributions, to generate many of the exhibits found in this report. Gallagher has an extensive review process whereby the results of the liability calculations are checked using detailed sample output, changes from year to year are summarized by source, and significant deviations from expectations are investigated. Other funding outputs are similarly reviewed in detail and at a high level for accuracy, reasonability and consistency with prior results. Gallagher also reviews the model when significant changes are made to the software. The review is performed by experts within the company who are familiar with applicable funding rules as well as the manner in which the model generates its output.

Future actuarial measurements

Future actuarial measurements may differ significantly from current measurements due to plan experience differing from that anticipated by the actuarial assumptions, changes expected as part of the natural operation of the methodology used for these measurements, and changes in plan provisions, applicable law or regulations. An analysis of the potential range of such future differences is beyond the scope of this report. However, in accordance with ASOP 51, an assessment of risks for the plan was performed.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Prescribed Funding/PBGC Assumptions and Methods

The following assumptions and methods are prescribed by ERISA, as currently amended.

Interest rates

	2025 Plan Year	2024 Plan Year
Funding Rates – Constrained*		
First Segment Rate	5.07%	4.75%
Second Segment Rate	5.31%	4.87%
Third Segment Rate	5.50%	5.59%
Effective Interest Rate	5.37%	5.14%
Funding Rates – Unconstrained**		
First Segment Rate	5.07%	3.62%
Second Segment Rate	5.33%	4.46%
Third Segment Rate	5.36%	4.52%
Effective Interest Rate	5.33%	4.44%

* Used for minimum funding and benefit restriction purposes.

**Used for maximum tax-deduction, PBGC 4010 reporting, and PBGC variable premium purposes.

The interest rates used for funding purposes are the Segment Rates with 4-month lookback, constrained in accordance with relevant legislation.

Mortality

Mortality tables mandated by applicable law and regulation as specified in IRS Regulation 1.430(h)(3)-1, as amended in the Federal Register on October 20, 2023, in TD 9983, 88 FR 72357, and as amended by IRS Notice 2024-42, applied on a fully generational basis using the IRS 2024 Adjusted Scale MP-2021 Rates mortality improvement scale.

Actuarial cost method

The Funding Target is the present value of accrued benefits based on compensation and service to date. The Target Normal Cost is the present value of benefits expected to be accrued during the current plan year, reflecting the effect of expected compensation increases during the year and including plan administrative expenses expected to be paid from plan assets during the year.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods

Salary increases

Current and Future Years:	4.60%
Prior Year:	3.75%

Social Security

Current Year annual increase in maximum wage base:	4.50%
Prior Year annual increase in maximum wage base:	3.75%

Expenses

The Target Normal Cost includes expected administrative expenses of $800,000.

Frequency of optional payment forms

Current Year:

Form	All Employees
Single life annuity	35.00%
Life annuity with 10 years certain	15.00%
Joint and 50% survivor annuity	20.00%
Joint and 75% survivor annuity	30.00%

Prior Year:

Form	WSL Employees	Affiliates and Lafayette Life Employees
Single life annuity	35.00%	100%
Life annuity with 10 years certain	10.00%	0%
Joint and 50% survivor annuity	35.00%	0%
Joint and 75% survivor annuity	10.00%	0%
Joint and 2/3 survivor annuity with 10 years certain	10.00%	0%

Terminated vested participants are assumed to commence receiving benefits at age 65 in the form of a single life annuity.

Marital percentage

Current Year:

75% of participants are assumed to be married at death. Husbands are assumed to be 2 years older than their wives.

Prior Year:

Affiliate and WSL

80% of participants are assumed to be married at death. Husbands are assumed to be 2 years older than their wives.

Lafayette Life Employees

100% of participants are assumed to be married at death. Husbands are assumed to be 2 years older than their wives.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Retirement rates

	Prior Year			Current Year	
Age	Affiliates and WSL Non–Field Employees	WSL Field Employees	Lafayette Life Employees	Lafayette Life, Affiliates and WSL Non–Field Employees	WSL Field Employees
55	10.0%	20.0%	10.0%	5.0%	25.0%
56	5.0%	15.0%	5.0%	5.0%	15.0%
57	5.0%	15.0%	5.0%	5.0%	15.0%
58	5.0%	15.0%	5.0%	10.0%	15.0%
59	5.0%	15.0%	5.0%	10.0%	15.0%
60	10.0%	20.0%	10.0%	15.0%	30.0%
61	10.0%	20.0%	10.0%	15.0%	30.0%
62	20.0%	50.0%	20.0%	20.0%	30.0%
63	10.0%	50.0%	10.0%	20.0%	30.0%
64	10.0%	50.0%	10.0%	20.0%	30.0%
65	50.0%	100.0%	50.0%	40.0%	50.0%
66	50.0%	100.0%	50.0%	40.0%	50.0%
67	50.0%	100.0%	50.0%	30.0%	50.0%
68	50.0%	100.0%	50.0%	30.0%	50.0%
69	50.0%	100.0%	50.0%	50.0%	50.0%
70	100.0%	100.0%	100.0%	50.0%	100.0%
71	100.0%	100.0%	100.0%	50.0%	100.0%
72	100.0%	100.0%	100.0%	100.0%	100.0%

Terminated vested participants are assumed to commence receiving benefits at age 65.

Late Retirement

Actuarial Equivalent adjustments are made to the benefits for actives and terminated vested participants over age 65.

Disability rates

None assumed.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

Withdrawal rates for active participants not eligible for retirement

	Prior Year					Current Year	
	Affiliates and WSL Non–Field Employees		WSL Field Employees		Lafayette Life Employees	Lafayette Life, Affiliates and WSL Non–Field Employees	WSL Field Employees
Years of Service	Male	Female	Male	Female	Unisex	Unisex	Unisex
1	15.4%	22.0%	59.3%	56.8%	N/A	15.0%	59.0%
2	13.3%	19.0%	45.1%	50.6%	N/A	15.0%	46.0%
3	11.2%	16.0%	29.2%	35.5%	N/A	13.0%	35.0%
4	N/A	N/A	24.5%	24.4%	N/A	N/A	24.0%
5	N/A	N/A	21.0%	21.0%	N/A	N/A	21.0%

Thereafter

	Prior Year					Current Year
	Affiliates and WSL Non–Field Employees		WSL Field Employees		Lafayette Life Employees	All Employees
Age	Male	Female	Male	Female	Unisex	Unisex
25	7.5%	7.5%	13.8%	16.7%	5.3%	10.0%
30	6.9%	6.9%	13.5%	16.4%	4.8%	9.4%
35	5.8%	5.8%	13.1%	15.9%	4.5%	7.8%
40	4.8%	4.8%	11.9%	15.4%	3.8%	6.4%
45	3.8%	3.8%	8.9%	14.9%	3.2%	4.5%
50	2.1%	2.1%	6.1%	14.4%	1.5%	3.2%
55	0.0%	0.0%	4.1%	10.9%	0.3%	3.0%
60	0.0%	0.0%	2.0%	5.5%	0.0%	3.0%
64	0.0%	0.0%	0.4%	1.1%	0.0%	3.0%

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
EIN/PN: 31-0487145 / 004

Schedule SB, Part V – Statement of Actuarial Assumptions/Methods (continued)

Non-Prescribed Funding Assumptions and Methods (continued)

The Actuarial Value of Assets is market value as of the valuation date, including the discounted value of accrued contributions, reduced by 2/3 of the gain/(loss) for the immediately preceding plan year and reduced by 1/3 of the gain/(loss) for the plan year before that. The gain/(loss) for each period is determined as the actual return on market value during the period less the expected return on market value based on an assumed earnings rate chosen by the actuary but required by current law and regulation to be not greater than the applicable third Segment Rate. The resulting value is constrained to be within a corridor of 90% to 110% of market value, including discounted receivable contributions.

	Actuary's Assumption	Third Segment Rate	Reflecting Limit
2025 Expected Return	7.50%	5.50%	5.50%
2024 Expected Return	7.50%	5.59%	5.59%
2023 Expected Return	7.25%	5.74%	5.74%

Summary of Changes from the January 1, 2024 Valuation

- The funding segment rates have been updated as specified in IRS Reg. 1.430(h)(2)-1. These rates are constrained in accordance with ARP. This change decreased the Funding Target by approximately $15.0 million.
- The retirement rates, termination rates, salary increase assumption, marriage percentage assumption, optional payment forms, and inflation assumption were updated based on 2024 experience study. These changes increased the Funding Target by approximately $2.0 million.

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
WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN

B Three-digit plan number (PN) ▶ 004

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
THE WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

D Employer Identification Number (EIN)
31-0487145

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**	1,206,386,044
b Actuarial value	**2b**	1,114,729,318

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	2,342	517,526,248	517,526,248
b For terminated vested participants	423	43,291,728	43,291,728
c For active participants	2,747	220,086,027	229,188,264
d Total	5,512	780,904,003	790,006,240

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**	5.37%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	19,954,953
b Expected plan-related expenses	**6b**	800,000
c Target normal cost	**6c**	20,754,953

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

Matthew Davis MDD
Signature of actuary

10/13/2026
Date

Matthew D. Davis
Type or print name of actuary

2608289
Most recent enrollment number

Buck Global, LLC
Firm name

412-328-9246
Telephone number (including area code)

600 Grant Street
Suite 2880
Pittsburgh PA 15219
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)	8,549,241	170,750,804
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)	8,549,241	170,750,804
10	Interest on line 9 using prior year's actual return of 13.49%	1,153,293	23,034,283
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 5.14%		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)	9,702,534	193,785,087

Part III Funding Percentages

14	Funding target attainment percentage	14	115.34%
15	Adjusted funding target attainment percentage	15	138.44%
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	120.07%
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:	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**: 63

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**	20,754,953
b Excess assets, if applicable, but not greater than line 31a	**31b**	20,754,953

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

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Line 22 - Description of Weighted Average Retirement Age

This table calculates the weighted average retirement age for all active persons in the plan.

(1) Age	(2) Expected Active Headcount	(3) Retirement Rate	(4) Expected Retirements (2)*(3)	(5) Weighted Age (1)*(4)
55	1,022.1290	0.0558	57.0774	3,139.2587
56	1,026.4690	0.0463	47.4828	2,659.0394
57	1,043.1949	0.0455	47.4576	2,705.0809
58	1,056.1080	0.0824	87.0527	5,049.0574
59	1,023.8537	0.0821	84.0445	4,958.6269
60	1,007.8649	0.1261	127.0756	7,624.5334
61	942.9385	0.1210	114.1229	6,961.4942
62	880.9604	0.1553	136.8277	8,483.3150
63	801.0897	0.1504	120.4889	7,590.7979
64	719.1928	0.1480	106.4238	6,811.1223
65	644.2189	0.4086	263.2165	17,109.0725
66	415.8191	0.4083	169.7618	11,204.2792
67	266.5141	0.3150	83.9512	5,624.7336
68	197.4179	0.3118	61.5459	4,185.1237
69	145.9370	0.4985	72.7446	5,019.3799
70	82.5208	0.5413	44.6653	3,126.5738
71	41.4737	0.5102	21.1609	1,502.4228
72	26.0849	1.0000	26.0849	1,878.1131
73	2.0000	1.0000	2.0000	146.0000
74	3.0000	1.0000	3.0000	222.0000
75	2.0000	1.0000	2.0000	150.0000
76	3.0000	1.0000	3.0000	228.0000
77	1.0000	1.0000	1.0000	77.0000
78	0.0000	1.0000	0.0000	0.0000
79	1.0000	1.0000	1.0000	79.0000
80	0.0000	1.0000	0.0000	0.0000
81	0.0000	1.0000	0.0000	0.0000
82	0.0000	1.0000	0.0000	0.0000
83	1.0000	1.0000	1.0000	83.0000
84	0.0000	1.0000	0.0000	0.0000
85	0.0000	1.0000	0.0000	0.0000
86	0.0000	1.0000	0.0000	0.0000
87	0.0000	1.0000	0.0000	0.0000
88	0.0000	1.0000	0.0000	0.0000
89	1.0000	1.0000	1.0000	89.0000
Total			**1,685.185**	**106,706.0248**
Weighted Average Retirement Age = 106,706.0248 / 1,685.185				**63.32**
Rounded Weighted Average Retirement Age				**63**

Note to Column 2: The Expected Active Headcount for each age includes persons who are eligible to retire and persons who are not eligible to retire at each age.

Note to Column 3: At each age, these retirement rates are a weighted average of the rates shown in Attachment to Part V for active participants eligible to retire at the age and zero for all other active participants.

General note: The table presents values rounded to fewer significant digits than used in the calculation.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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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	$ 2,745,871	$ 229,198	$ 51,125,925	$ 54,100,994
2026	$ 4,597,728	$ 482,003	$ 49,699,199	$ 54,778,930
2027	$ 6,361,258	$ 856,979	$ 48,244,481	$ 55,462,718
2028	$ 7,968,639	$ 1,215,698	$ 46,758,668	$ 55,943,005
2029	$ 9,440,015	$ 1,596,465	$ 45,234,373	$ 56,270,853
2030	$ 10,814,723	$ 1,932,459	$ 43,663,855	$ 56,411,037
2031	$ 12,045,903	$ 2,326,568	$ 42,007,910	$ 56,380,381
2032	$ 13,139,858	$ 2,587,032	$ 40,330,972	$ 56,057,862
2033	$ 14,144,386	$ 2,908,921	$ 38,626,600	$ 55,679,907
2034	$ 15,033,749	$ 3,052,996	$ 36,898,430	$ 54,985,175
2035	$ 15,721,429	$ 3,254,496	$ 35,146,699	$ 54,122,624
2036	$ 16,345,837	$ 3,362,307	$ 33,385,103	$ 53,093,247
2037	$ 16,931,095	$ 3,520,691	$ 31,605,321	$ 52,057,107
2038	$ 17,406,596	$ 3,571,225	$ 29,812,528	$ 50,790,349
2039	$ 17,795,171	$ 3,605,887	$ 28,012,733	$ 49,413,791
2040	$ 18,131,056	$ 3,676,698	$ 26,212,689	$ 48,020,443
2041	$ 18,406,171	$ 3,762,374	$ 24,419,776	$ 46,588,321
2042	$ 18,606,558	$ 3,777,164	$ 22,631,755	$ 45,015,477
2043	$ 18,781,540	$ 3,789,285	$ 20,875,594	$ 43,446,419
2044	$ 18,823,757	$ 3,817,410	$ 19,150,413	$ 41,791,580
2045	$ 18,772,894	$ 3,816,747	$ 17,464,463	$ 40,054,104
2046	$ 18,736,989	$ 3,833,820	$ 15,826,067	$ 38,396,876
2047	$ 18,654,987	$ 3,896,395	$ 14,243,683	$ 36,795,065
2048	$ 18,536,760	$ 3,833,135	$ 12,725,879	$ 35,095,774
2049	$ 18,367,155	$ 3,744,833	$ 11,281,131	$ 33,393,119
2050	$ 18,094,424	$ 3,620,523	$ 9,917,467	$ 31,632,414
2051	$ 17,814,593	$ 3,510,595	$ 8,642,200	$ 29,967,388
2052	$ 17,491,425	$ 3,401,596	$ 7,461,587	$ 28,354,608
2053	$ 17,023,918	$ 3,272,987	$ 6,380,419	$ 26,677,324
2054	$ 16,506,971	$ 3,109,495	$ 5,401,697	$ 25,018,163
2055	$ 15,927,042	$ 2,950,280	$ 4,526,375	$ 23,403,697
2056	$ 15,281,475	$ 2,779,088	$ 3,753,303	$ 21,813,866
2057	$ 14,587,178	$ 2,603,589	$ 3,079,363	$ 20,270,130
2058	$ 13,941,305	$ 2,445,164	$ 2,499,620	$ 18,886,089
2059	$ 13,272,348	$ 2,268,681	$ 2,007,594	$ 17,548,623
2060	$ 12,569,334	$ 2,099,450	$ 1,595,681	$ 16,264,465
2061	$ 11,851,483	$ 1,936,779	$ 1,255,524	$ 15,043,786
2062	$ 11,146,262	$ 1,772,004	$ 978,448	$ 13,896,714
2063	$ 10,443,126	$ 1,617,007	$ 755,826	$ 12,815,959
2064	$ 9,745,753	$ 1,469,553	$ 579,315	$ 11,794,621
2065	$ 9,074,592	$ 1,332,710	$ 441,144	$ 10,848,446
2066	$ 8,431,999	$ 1,203,738	$ 334,281	$ 9,970,018
2067	$ 7,800,797	$ 1,084,026	$ 252,521	$ 9,137,344
2068	$ 7,193,747	$ 972,977	$ 190,559	$ 8,357,283
2069	$ 6,616,083	$ 870,791	$ 143,952	$ 7,630,826
2070	$ 6,068,417	$ 776,604	$ 109,090	$ 6,954,111
2071	$ 5,551,159	$ 689,905	$ 83,106	$ 6,324,170
2072	$ 5,063,205	$ 610,416	$ 63,769	$ 5,737,390
2073	$ 4,603,937	$ 537,576	$ 49,373	$ 5,190,886
2074	$ 4,172,315	$ 471,081	$ 38,629	$ 4,682,025

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions

Eligibility

An employee who has completed 1,000 hours of service during the first year of employment or during any subsequent anniversary year, attained age 21, and completed one year of employment is eligible on the earlier of January 1 or the first of the month which is six (6) months after all these conditions are satisfied.

Transition Group: Participants in the Plan at December 31, 2010 whose age and service are at least 70. This group continues the formula in effect at December 31, 2010 through December 31, 2015. This group is also eligible for the Social Security Temporary Annuity benefit if they retire on or before December 31, 2012.

Effective January 1, 2011 associates who work at various investment subsidiaries become eligible. They are granted Years of Membership commencing January 1, 2010.

Employee Contributions

None.

Definitions for Benefit Computations

Plan Year

The twelve (12) consecutive month period beginning January 1 and ending on December 31.

Computation Period

The initial twelve (12) consecutive month period beginning on the Employee's first date of employment and each subsequent 12-month period beginning on the anniversary of the Employee's first date of employment.

Year of Service

An Employee shall receive one (1) Year of Service for each Computation Period during which he works 1,000 or more Credited Hours.

Years of Membership

Effective January 1, 2011, an Employee shall receive one (1) Year of Membership for each calendar year during which he works at least 52 times the number of hours in a full-time regular work week. If an Employee completes less hours, a pro rata portion will be credited.

Compensation

The amount paid to an Employee by a Participating Employer for his services as such, including base salary, commissions, payment for company rule days, overtime and shift differential pay, and legion awards, but excluding pay in lieu of vacation time, moving and expense allowances, accrued credits, Security Plan allowance, any extra compensation for special services, bonuses, and the cost to the Participating Employer of other incentive plans or employee benefits. Compensation shall also include Compensation not paid to an employee but credited on behalf of an Employee to a plan that qualifies under Section 125 or Section 401(k) of the Code. Highest Compensation is the largest average during 5 consecutive years in the 10-year period before termination.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions (continued)

Normal Retirement

Eligibility

The first day of the month following the member's 65th birthday.

Benefit

Greater of

(a) (i) 1.0% times Years of Membership times Highest Compensation, plus

(ii) 0.5% times Years of Membership not in excess of thirty-five (35) years times Highest Compensation in excess of Covered Compensation, or

(b) (i) Accrued benefit as of December 31, 2010, plus

(ii) 1.0% times Years of Membership after December 31, 2010 times Highest Compensation, plus

(iii) 0.5% times Years of Membership after December 31, 2010 not in excess of thirty-five (35) years times Highest Compensation in excess of Covered Compensation.

For members of the Transition Group, December 31, 2010 is replaced with December 31, 2015 in part (b) of the above formula.

Late Retirement

Eligibility

The first day of the month subsequent to the member's normal retirement date and following actual termination of employment.

Benefit

Greater of benefit accrued to date of late retirement or the actuarial increase of the Normal Retirement Benefit.

Early Retirement

Eligibility

The first day of the month following age 55 and fifteen (15) years of service.

Benefit through December 31, 2010 (December 31, 2015 for members of the Transition Group)

Benefit accrued to date of early retirement based on Years of Membership at date of termination and assuming no future earnings for calculation of the Social Security Benefit offset. The benefit may commence immediately but it will be reduced according to the appropriate percentage from the following table interpolated for exact age and Years of Employment between 20 and 25:

Age	15 to 20 Full Years of Employment	25 or More Full Years of Employment
55	50%	75%
56	56%	80%
57	62%	85%
58	68%	90%
59	74%	95%
60	80%	100%
61	84%	100%
62	88%	100%
63	92%	100%
64	96%	100%
65	100%	100%

Schedule SB, Part V – Summary of Plan Provisions (continued)

Benefit after December 31, 2010 (December 31, 2015 for members of the Transition Group)

Age	Early Retirement Factor
55	50%
56	55%
57	60%
58	65%
59	70%
60	75%
61	80%
62	85%
63	90%
64	95%
65	100%

Termination Benefits

Eligibility

Completion of five (5) years of service.

Benefit through December 31, 2010 (December 31, 2015 for members of the Transition Group)

The monthly benefit earned to date of termination with payments commencing at his or her normal retirement date. The benefit is determined based on anticipated Years of Membership at Normal Retirement Date, multiplied by the ratio of Years of Membership prior to termination date to anticipated Years of Membership at Normal Retirement Date. The Social Security Benefit offset assumes level earnings from date of termination until age 65.

Benefit after December 31, 2010 (December 31, 2015 for members of the Transition Group)

The monthly benefit earned to date of termination with payments commencing at his or her normal retirement date. The benefit is based on Years of Membership at date of termination and the benefit formula described above under Normal Retirement.

A participant may elect early commencement at age 55 if he had completed 15 years of service at date of termination. Such benefit is reduced 6% per year before age 65.

Pre-retirement Death Benefits

Prior to Earliest Retirement Age

Eligibility

If a member dies after becoming vested, but before retiring, his surviving spouse is entitled to a pre-retirement death benefit.

Benefit

A monthly income, payable for life commencing at the Member's earliest retirement date, which is equal to the survivor portion of the Member and Survivor Annuity.

After Earliest Retirement Age but before Normal Retirement Age

Eligibility

If a member dies after Early Retirement Age, but before retiring, his surviving spouse is entitled to a pre-retirement death benefit.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions (continued)

Benefit

A monthly income, payable for life commencing at the Member's earliest retirement date, which is equal to the survivor portion of the Member and Survivor Annuity.

Subsequent to Normal Retirement Age

Eligibility

If a member dies after Normal Retirement Age, but before retiring, his surviving spouse is entitled to a pre-retirement death benefit.

Benefit

A monthly income, payable for life commencing on the first of the month following the date of death, which is equal to the survivor portion of the Member and Survivor Annuity.

Form of Benefits

Automatic Form

A life annuity for unmarried employees and a Member and Survivor Annuity, 50% payable to surviving spouse for married employees.

Current Options Available

Life Only

Life and ten years certain

Member and Survivor Annuity with 50% payable to spouse

Qualified Optional Survivor Annuity with 75% payable to spouse

Joint and 50% survivor, with ten years certain

Joint and 66-2/3% survivor, with ten years certain

Lump Sum – if value is less than $7,000

A few grandfathered benefits are available at different options than listed above.

Actuarial Equivalence

2018 IRS Applicable Mortality table and an interest rate of 6%.

Grandfathered benefits (except as noted below)

Certain employees who were participants on January 1, 1985 are eligible for death benefit annuities under the prior plan provisions. These benefits have not been valued due to the limited number of employees eligible for such benefits.

Columbus Life Insurance Company (CLIC)

Effective July 1, 1996, the CLIC pension plan was merged with this plan. The 63 employees who moved from Columbus to Cincinnati received special grandfathered benefits. As a minimum benefit, they received benefits earned under the CLIC plan accrued through June 30, 1998. A brief description of some of the significant provisions follows.

1. Normal Retirement Benefit
   (i) 2.0% times credited service not in excess of 25 times final average compensation, plus
   (ii) 1.0% times credited service in excess of 25 times final average compensation, minus
   (iii) 2.0% times credited service not in excess of 25 times Social Security Benefit.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions (continued)

2. Final Average Earnings

   Based on years of service. A five-year average if less than 15 years, four-year average if between 15 and 25 and a three-year average if greater than 25 years of service.

3. Early Retirement

   (i) Eligible at age 55 with 10 years of service

   (ii) Benefit reduced by 3.0% per year for commencement before age 65.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions (continued)

Lafayette Life Insurance Company Benefits

Eligibility Requirements

Participation in the plan is frozen.

Vesting Service

One full year granted for each plan year in which a participant completes 1,000 hours.

Average Monthly Earnings

The average of the monthly compensation for the sixty (60) highest consecutive calendar months out of the one hundred twenty (120) calendar months immediately preceding the date of retirement, termination or death. Annual compensation is limited to $100,000 for Group Regional Directors and Regional Sales Vice Presidents for plan years beginning on or after January 1, 1999.

Normal Form of Payment

A monthly annuity payable for life.

Monthly Accrued Benefit

The monthly benefit payable to a participant at their normal retirement date is equal to (a) plus (b) below:

(a) Service and earnings used in (1) and (2) below were frozen as of December 31, 2011:

1) Before January 1, 2001
   a. 2.0% of average monthly earnings multiplied by service (for the first 20 years), plus
   b. 1.0% of average monthly earnings multiplied by service (for the next 20 years).
2) After December 31, 2000
   a. 2.0% of average monthly earnings multiplied by service (for the first 10 years), plus
   b. 1.0% of average monthly earnings multiplied by service (for the next 30 years).

(b) 1) 1.0% times Years of Membership after December 31, 2011 times Highest Compensation, plus

2) 0.5% times Years of Membership after December 31, 2011 not in excess of thirty-five (35) years times Highest Compensation in excess of Covered Compensation.

Normal Retirement

The later of age 65 and 5 years of participation.

Early Retirement

Age 55 and 5 years of Vesting Service: the accrued benefit reduced by 5/24 of 1% for each month retirement precedes age 60, payable immediately. If the participant is age 60 with 5 years of Vesting Service, the unreduced accrued benefit payable immediately.

Termination

100% vested after 5 years of Vesting Service.

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Part V – Summary of Plan Provisions (continued)

Pre-Retirement Death

Eligibility

Death of a participant who has earned the right to a vested benefit.

Amount

The amount which would be payable if the participant terminated on his/her date of death, elected payment at the earliest eligibility for early retirement in the form of a qualified joint and survivor annuity, and died prior to the first payment.

Voluntary After-Tax Account

Prior to 1997, participants in the Lafayette Life Insurance Company Pension Plan were eligible to make voluntary after-tax contributions to the Plan. Participants can elect to withdraw all or part of their after-tax account balance at any time without impact to any other benefits provided by the Plan.

Gerber Life

Active former employees of Gerber Life as of January 1, 2019 became participants in the Western & Southern Financial Group Pension Plan on that date. Gerber Life employees receive vesting service credit for their prior employment with Gerber Life. Benefits under this plan first begin to accrue as of January 1, 2019.

Summary of Changes from the January 1, 2024 Valuation

None.

Western & Southern Financial Group Pension Plan
EIN #31-0487145 Plan #004
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2025

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date	Rate of Interest	Par Value/ Shares	Cost	Current Value
Corporate Debt Securities					
Alphabet	11/15/2075	5.70 %	5,000,000	$ 4,974,100	$ 4,927,091
Amfam Holdings Inc	03/11/2031	2.81	2,500,000	2,080,550	2,193,336
Apple Inc	05/13/2045	4.38	3,000,000	2,989,050	2,679,646
AT&T	11/15/2031	8.75	1,431,000	1,319,368	1,707,713
AT&T Inc	12/01/2057	3.80	2,298,000	2,311,957	1,581,752
Bank Gospodarstwa Krajow	07/09/2054	6.25	4,000,000	3,971,040	4,131,676
Bank of America Corp	02/04/2033	2.97	5,000,000	4,376,050	4,570,511
Bank of Nova Scotia	05/04/2037	4.59	5,000,000	4,803,850	4,873,760
Berkshire Hathaway Energ	05/01/2053	4.60	3,000,000	2,983,780	2,529,111
Berkshire Hathaway Inc	03/15/2052	3.85	4,000,000	2,971,560	3,082,713
Boeing Co	05/01/2060	5.93	2,400,000	2,035,128	2,354,191
Burlington North Santa Fe	03/15/2055	5.50	4,000,000	3,978,800	3,935,549
Cargill Inc	04/22/2052	4.38	2,000,000	1,991,380	1,662,023
Cintas Corp No 2	08/15/2036	6.15	3,000,000	2,980,560	3,271,829
Comcast Corp	03/15/2033	7.05	3,000,000	3,627,360	3,430,303
Comcast Corp	06/01/2054	5.65	4,000,000	3,982,160	3,752,044
CVS Corp	03/25/2048	5.05	5,000,000	4,971,500	4,413,394
7-Eleven Inc	02/10/2031	1.80	5,000,000	4,001,100	4,374,957
Equinix Inc	04/15/2032	3.90	2,000,000	1,779,340	1,921,726
FMR LLC	11/15/2039	6.45	3,000,000	3,162,720	3,313,487
FMR LLC	02/01/2043	5.15	1,000,000	925,760	949,904
Galaxy Pipeline Assets	03/31/2036	2.63	5,000,000	4,065,000	4,418,746
Guardian Life Insurance	06/19/2064	4.88	3,000,000	2,989,950	2,577,344
Gulf Power Co	10/01/2040	5.10	4,000,000	3,673,760	3,882,662
Honeywell International Inc	03/01/2054	5.25	3,000,000	2,880,690	2,835,880
Hutchison Whampoa Intl	11/24/2033	7.45	1,000,000	1,152,640	1,174,167
Mars Inc	05/01/2065	5.80	3,000,000	2,982,450	3,013,399
Marsh & Mclennan	03/15/2055	5.40	4,000,000	3,935,800	3,852,215
Martin Marietta Materials	12/15/2047	4.25	3,700,000	3,659,115	3,056,769
Morgan Stanley	04/20/2037	5.30	5,000,000	5,017,815	5,084,429
Northern States Pwr	09/01/2038	6.38	610,000	840,659	669,747
Northwestern Mutual Life	05/29/2055	6.17	4,000,000	3,999,680	4,262,839
Old Dominion Electric	12/01/2028	5.68	249,984	249,984	253,964
Oracle Corp	11/09/2052	6.90	2,000,000	1,977,920	1,978,486
Paypal Holdings Inc	06/01/2032	4.40	5,000,000	4,812,650	4,996,075

Western & Southern Financial Group Pension Plan
EIN #31-0487145 Plan #004
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)
December 31, 2025

Identity of Issuer, Borrower, Lessor, or Similar Party	Description of Investment Including Maturity Date	Rate of Interest	Par Value/ Shares	Cost	Current Value
Corporate Debt Securities (continued)					
Pfizer Investment Enter	05/19/2063	5.34 %	5,000,000	$ 4,902,850	$ 4,642,216
Phillips Edison Grocery	11/15/2031	2.63	4,082,000	3,275,896	3,659,986
Polar Tankers Inc	05/10/2037	5.95	2,515,260	2,596,855	2,687,544
Public Storage	08/01/2053	5.35	4,000,000	3,904,480	3,868,791
Reliance Industries	01/15/2097	10.25	1,000,000	1,360,000	1,385,900
Rochester Gas & Electric	12/15/2033	8.00	3,000,000	3,000,000	3,525,016
San Diego Gas & El	08/15/2040	4.50	4,000,000	4,047,080	3,640,263
Securian Financial Group	04/15/2048	4.80	1,000,000	981,340	870,488
Suncor Energy Inc	12/01/2034	5.95	1,000,000	961,440	1,059,021
Texas Eastern Transmissi	01/15/2048	4.15	3,000,000	2,973,510	2,384,608
TIAA	09/15/2044	4.90	2,487,000	2,310,622	2,267,105
T-Mobile USA Inc	06/15/2054	6.00	2,000,000	1,851,220	2,033,812
Trinity	12/01/2045	4.13	1,500,000	1,498,515	1,253,366
United Parcel Service	05/22/2064	5.60	4,000,000	3,974,080	3,861,413
Virginia Electric & Power	11/15/2038	8.88	5,000,000	5,131,993	6,681,401
Vmware Inc - Class A	05/15/2030	4.70	5,000,000	4,964,450	5,079,356
Waste Management Inc	10/15/2054	5.35	4,000,000	3,946,040	3,895,667
				160,135,597	160,509,391
Residential mortgage-backed securities					
CWALT 2005-46CB A14	10/25/2035	5.50 %	298,327	$ 287,816	$ 202,328
FHASI 2005-FA6 A5	09/25/2035	5.50	206,139	174,824	96,152
FN FN 933427	03/01/2038	5.00	56,645	57,313	58,022
FNMA FN 733735	09/01/2033	5.50	68,750	68,277	70,940
FNR 2004-23 Z	04/25/2034	4.50	103,033	101,422	103,510
				689,652	530,952
Asset-backed and other structured securities					
MEAG TXB PLT	04/01/2057	6.66 %	1,846,000	$ 1,846,000	$ 1,994,799
Focus 2017-1A A2Ii	04/30/2047	5.09	6,130,500	5,358,440	6,117,369
Nbly 2023-1A A2	01/30/2053	7.31	4,862,500	4,765,250	4,901,744
				11,969,690	13,013,912
Common Stocks					
3M Co.			8,992	$ 1,316,210	$ 1,439,619
Abbvie Inc			5,009	298,801	1,144,506
Accenture Plc-Cl A			3,855	1,119,090	1,034,296
Advanced Energy Industries			1,557	127,274	325,989
Agree Realty Corp			7,079	451,313	509,900

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Common stocks (continued)					
Airbnb Inc - Class A			35,585	$ 5,215,286	$ 4,829,596
Alexandria Real Estate			13,258	1,783,908	648,847
Alphabet			89,899	2,647,045	28,210,306
Amazon.com Inc			70,107	1,072,419	16,182,098
American Tower Corp			8,629	1,578,229	1,514,994
Ameris Bancorp			8,130	499,418	603,815
Amgen Inc			2,460	732,494	805,183
Analog Devices			5,903	802,566	1,600,894
Air Product and Chemicals Inc			3,592	661,786	887,296
Apple Inc			92,617	2,126,789	25,178,858
Applied Materials			17,543	3,095,971	4,508,376
Arthur J Gallagher & Co			4,647	479,460	1,202,597
AT&T Inc			58,694	1,043,034	1,457,958
Atlantic Union Bankshares Co			11,067	329,180	390,665
Automatic Data Processing Inc			4,011	697,381	1,031,750
Avalon Bay Communities			3,717	673,594	673,929
Bank of America Corp			200,314	3,478,838	11,017,270
Becton Dickinson			32,712	7,346,169	6,348,418
Berkshire Hathaway Inc Del			10,914	1,378,382	5,485,922
Biomarin Pharmaceutical Inc			26,252	2,028,743	1,560,156
Bio-Techne Corp			5,976	332,437	351,449
Blackrock Funding Inc			1,615	668,846	1,728,599
Boeing Co			25,787	3,900,052	5,598,873
Booking Holdings			246	909,936	1,317,411
Box Inc - Class A			16,398	446,982	490,464
Bristol-Myers Squibb			90,079	4,671,069	4,858,861
Broadcom Inc			10,477	272,933	3,626,090
Caci International Inc - Cl A			740	239,713	394,279
Cactus Inc - A			11,218	500,739	512,438
Cargurus Inc			18,194	321,824	697,740
Caterpillar Inc			2,927	274,808	1,676,790
CCC Intelligent Solutions Holdings Inc			62,883	554,602	499,920
Certara Inc			41,300	427,508	363,853
Chemed Corp			946	432,121	404,756
Chevron Corp			11,658	1,280,804	1,776,796
Choice Hotels Intl Inc			30,183	2,643,409	2,875,233

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Common stocks (continued)					
Ciena Corp			2,250	$ 93,991	$ 526,208
Cincinnati Financial			255,000	1,838,593	41,646,600
Cintas Corp			588,607	388,320	110,699,318
Cisco Systems Inc			26,467	975,479	2,038,753
Citigroup			15,184	1,054,076	1,771,821
Clean Harbors Inc			1,672	170,715	392,051
Coca-Cola Femsa Sab Cv			45,564	2,377,614	4,315,366
Colliers Intl Gr - Subord Vot			3,576	428,471	525,708
Comcast Corp			128,793	3,996,763	3,849,623
Commvault Systems Inc			3,024	247,620	379,089
Constellation Brands			6,426	1,445,822	886,531
Corporate Office Properties			18,113	486,409	503,541
Crane Co-W/I			1,828	136,076	337,138
Crocs Inc			4,020	403,557	343,790
Curtiss-Wright Corp			701	80,450	386,440
CVS Corp			18,711	1,243,272	1,484,905
Deere & Company			9,265	4,567,303	4,313,506
Diageo PLC			3,799	554,486	327,740
Disney			19,608	1,835,704	2,230,802
Dollar General Corp			8,462	1,712,330	1,123,500
Doubleverify Holdings Inc			32,879	536,260	376,136
Doximity Inc - Class A			8,285	313,960	366,860
Duke Energy			12,003	969,103	1,406,872
Eagle Materials Inc			1,639	264,244	338,749
Eli Lilly			1,162	858,793	1,248,778
Encompass			4,775	295,268	506,818
Ensign Group Inc/The			2,959	275,421	515,458
Entergy Corp			14,761	742,447	1,364,359
Esco Technologies Inc			2,550	267,273	498,244
Evercore Partners Inc - Cl A			1,425	145,243	484,856
Exlservice Holdings Inc			11,322	306,156	480,506
Exxon Mobil Corp			61,297	4,660,494	7,376,481
Federal Signal Corp			4,500	301,898	488,655
Fifth Third Bancorp			28,876	1,014,394	1,351,686
Floor & Decor Holdings Inc - A			31,525	1,993,920	1,919,557
FNB Corp			37,450	550,519	640,395

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Common stocks (continued)					
Fox Corp			11,214	$ 281,913	$ 819,407
Fragrances Inc			44,136	3,625,294	2,974,325
Franklin Electric Co Inc			5,190	508,884	495,801
Frontdoor Inc			34,668	1,397,447	1,999,997
Globus Medical Inc - A			5,834	282,667	509,367
Goldman Sachs Group Inc			13,608	1,931,157	11,961,432
Grand Canyon Education Inc			2,844	340,109	472,986
Gulfport Energy Corp			1,990	347,685	413,900
Haemonetics Corp/Mass			12,906	884,383	1,034,416
HCA Holdings Inc			7,301	720,072	3,408,545
Hexcel Corp			5,356	313,277	395,808
HF Sinclair Corp			8,780	332,711	404,582
Home Bancshares Inc			12,400	256,986	344,472
Home Depot			5,803	946,497	1,996,812
Hubbell Inc - Cl B			6,978	795,414	3,099,000
IBM			7,264	844,678	2,151,669
ITT Inc			2,322	190,295	402,890
Johnson & Johnson			49,129	4,971,633	10,167,247
Jones Lang Lasalle Inc			14,910	1,377,031	5,016,768
JP Morgan Chase & Co			5,149	757,322	1,659,111
KBR Inc			8,481	359,209	340,936
Kinder Morgan			49,469	1,077,957	1,359,903
KLA Corp			1,263	99,623	1,534,646
Klaviyo			3,132	133,173	101,696
Kulicke & Soffa Industries			11,011	421,796	501,661
Las Vegas Sands Corp			34,975	1,642,518	2,276,523
LCI Industries			4,050	409,406	491,427
Linde PLC			2,812	1,255,755	1,199,009
Livanova PLC			9,579	459,204	589,396
Lockheed Martin			2,882	1,017,370	1,393,937
LPL Financial Holdings Inc			10,162	2,369,695	3,629,562
Malibu Boats Inc - A			12,084	427,942	340,890
Markel Corp			2,830	3,603,305	6,083,509
Maximus Inc			6,236	427,272	538,292
McDonald's			5,043	699,059	1,541,292
Medtronic Plc			84,256	6,938,707	8,093,631
Merck & Co Inc			16,013	1,123,994	1,685,528

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Common stocks (continued)					
Merit Medical Systems Inc			5,831	$ 401,307	$ 513,944
Meta Platforms Inc			32,455	5,520,996	21,423,221
Microchip Technology Inc			14,785	1,162,036	942,100
Micron Technology Inc			4,033	245,861	1,151,059
Microsoft Corp			67,002	2,220,415	32,403,507
Monster Beverage Corp			46,089	1,146,888	3,533,644
Morgan Stanley			7,779	1,057,488	1,381,006
Netflix Inc			25,950	793,771	2,433,072
Nextera Energy Inc			18,550	1,009,802	1,489,194
Nextracker Inc - Cl A			3,808	159,330	331,715
Nike Inc			12,804	1,117,568	815,743
Nu Holdings			23,706	309,956	396,838
Nvidia Corp			83,206	8,451,451	15,517,919
Oceaneering Intl Inc			15,616	307,586	375,252
Omnicom Group			10,838	794,641	875,168
Onto Innovation Inc			2,995	247,729	472,791
Option Healthcare			22,834	670,823	727,491
Oracle Corp			49,228	2,023,911	9,595,029
Paychex Inc			8,387	708,857	940,854
PepsiCo Inc			9,935	1,010,177	1,425,871
Pfizer Inc			50,460	1,588,028	1,256,454
Philip Morris Internat - W/I			56,927	4,178,948	9,131,091
Phillips 66			6,803	523,547	877,859
Principal Financial Group			10,216	596,048	901,153
Procter & Gamble Co			12,615	2,054,666	1,807,856
Progyny Inc			33,223	694,564	853,167
PVH Corp			5,070	435,388	339,791
Q2 Holdings Inc			4,760	336,034	343,482
Qnity Electronics Inc			5,972	396,156	487,614
Qualcomm			9,728	698,132	1,663,974
Qualys Inc			3,800	485,132	505,020
Ramp			26,645	716,327	782,564
Raytheon Tech Corp			20,960	1,200,845	3,844,064
Regal Beloit			13,642	1,922,019	1,914,245
Ringcentral Inc - Class A			23,461	673,520	677,554
Salesforce.com Inc			28,107	2,870,141	7,445,825
Schwab Corp			79,824	5,214,235	7,975,216

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Common stocks (continued)					
Sherwin-Williams Co/The			3,888	$ 1,418,871	$ 1,259,829
Silgan Hlds Inc			8,956	370,721	361,554
Simon Property Grp LP			5,021	745,270	929,437
Skyline Champion Corp			5,752	336,462	486,044
Southern Co			16,015	1,330,849	1,396,508
Southstate Bankcorp			3,955	297,753	372,205
Southwest Air			31,584	1,046,444	1,305,367
SPS Commerce Inc			4,127	468,482	367,839
SS&C Technologies			137,270	10,005,627	12,000,143
Stag Industrial Inc			13,833	474,352	508,501
Stanley Black & Decker Inc			45,421	4,002,001	3,373,872
Starbucks Corp			19,294	1,237,566	1,624,748
Steven Madden LTD			8,096	277,449	337,117
Stride Inc			6,718	428,958	436,200
Sysco Corp			17,299	1,245,753	1,274,763
T Rowe Price Group Inc			9,000	827,432	921,420
Taiwan Semiconductor - Sp Adr			21,876	3,109,909	6,647,898
Target Corp			8,091	975,119	790,895
Texas Instruments			33,891	3,661,973	5,879,750
Texas Roadhouse Inc			2,542	266,474	421,972
Tidewater Inc			7,890	419,194	398,524
Topbuild Corp - W/I			849	165,428	354,194
Tower Semiconductor LTD			4,094	112,269	480,717
Truist Financial Corp			29,763	999,800	1,464,637
U S Bancorp			36,373	1,288,400	1,940,863
Uber			28,662	2,133,784	2,341,972
Union Pacific Corp			5,567	1,322,010	1,287,758
UnitedHealth Group Inc			15,644	3,842,034	5,164,241
Valero Energy Corp			5,259	386,713	856,113
Verizon Communications			36,945	1,916,189	1,504,770
Visa Inc			27,217	5,563,769	9,545,274
Waystar Holding Corp			11,660	423,978	381,864
Webster Financial Corp			6,322	253,671	397,906
Wells Fargo & Co			23,719	912,624	2,210,610
Workday Inc - Class A			16,040	2,243,449	3,445,070
Yeti Holdings Inc			9,395	346,812	414,977
Yum! Brands Inc			8,331	667,908	1,260,314

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Common stocks (continued)					
Zeta Global Holdings Corp - A			12,490	$ 230,866	$ 254,171
Ziff Davis			9,677	445,177	340,147
Zurn Water			7,378	156,672	343,003
				250,267,582	637,279,537
Mutual Funds					
First Eagle Overseas Fund			1,701,937	$ 37,687,865	$ 53,304,664
Ishares Russell 1000 Growth			67,310	25,036,103	31,857,823
Ishares Russell 2000			104,593	13,757,869	33,784,585
JP Morgan Large Cap Grow-R6 Mutual Fund			290,603	24,863,980	25,119,710
*Touchstone Sands Capital Select			918,696	18,124,104	18,989,444
*Touchstone Strategic Income Opp			1,260,992	33,027,981	32,722,742
				152,497,902	195,778,968
Collective Trust					
*Fort Washington Core Plus Fixed Income CIT			4,042,575	$ 40,425,745	$ 49,076,855
				40,425,745	49,076,855
Partnerships/Joint Ventures					
Coller Credit Secondaries OP FD I				$ 1,646,943	$ 1,844,563
Limited Partnership Interest					
Coller Credit Secondaries OP FD II				2,042,360	2,374,483
Limited Partnership Interest					
Energy Fund XVA				1,554,510	68,822
Limited Partnership Interest					
European Strategic Partners I				1,867,793	7,182
Limited Partnership Interest					
*Ft. Washington Core Plus ERISA				82,547,022	87,106,825
Limited Partnership Interest					
*Ft. Washington Strategic Income LLC				25,000,000	28,690,252
Limited Partnership Interest					
*Ft. Washington Private Equity III				1,669,273	1,732,534
Limited Partnership Interest					
*Ft. Washington Private Equity V				4,565,725	2,960,014
Limited Partnership Interest					
*Ft. Washington Private Equity VI				3,407,661	3,334,739
Limited Partnership Interest					
*Ft. Washington Private Equity VII				1,926,512	1,579,012
Limited Partnership Interest					

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Partnerships/Joint Ventures (continued)					
*Ft. Washington Private Equity VIII				$ 3,247,126	$ 3,013,309
Limited Partnership Interest					
*Ft. Washington Private Equity X				8,816,601	12,965,806
Limited Partnership Interest					
*Ft. Washington Private Equity IX				11,143,628	16,028,717
Limited Partnership Interest					
*Ft. Washington Private Equity Opp Fund III				1,420,028	1,326,349
Limited Partnership Interest					
*Ft. Washington Private Equity Opp Fund IV				2,286,702	2,607,506
Limited Partnership Interest					
*Ft. Washington Private Equity Small Mkt				1,905,885	2,576,659
Limited Partnership Interest					
*Ft. Washington Private Equity XI				7,404,986	8,650,719
Limited Partnership Interest					
Nycap Mezzanine Offshore Partners III				201,849	6,648
Limited Partnership Interest					
Royalty Opportunity				2,074,576	2,280
Limited Partnership Interest					
Sands Capital Private Growth				428,571	851,142
Limited Partnership Interest					
Sands Capital Private Growth AN				4,785,322	6,579,315
Limited Partnership Interest					
Sands Capital Private Growth Life Science				504,190	404,890
Limited Partnership Interest					
Waterfall Eden Fund				—	143,545
Limited Partnership Interest					
Waterfall Victoria Fund LTD				8,000,000	6,889,626
Limited Partnership Interest					
Maranon Sr Credit Strategies				1,058,283	1,040,377
Limited Partnership Interest					
EQT Exeter Industrial Core Plus Fund IV				9,062,194	9,586,193
Limited Partnership Interest					
Al. Neyer Industrial Fund II-Q, LLC				7,955,193	9,027,750
Limited Partnership Interest					

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Partnerships/Joint Ventures (continued)					
Cabot Industrial Value Fund VII				$ 8,801,000	$ 8,323,426
Limited Partnership Interest					
Real Term Logistics Fund IV, LP				14,622,544	15,123,813
Limited Partnership Interest					
*WS Workforce Apartments Investor, LLC				8,892,958	8,638,608
Limited Partnership Interest					
				228,839,435	243,485,104
Total investments				$ 844,825,603	$ 1,299,674,719

**Party-in interest*

WESTERN & SOUTHERN FINANCIAL GROUP PENSION PLAN
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Schedule SB, Line 24 – Change in Actuarial Assumptions

- The retirement rates, termination rates, salary increase assumption, marriage percentage assumption, optional payment forms, and inflation assumption were updated based on a 2024 experience study.

  These changes increased the Funding Target by approximately $2.0 million.