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
ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

1b Three-digit plan number (PN) ▶ 003

1c Effective date of plan 01/01/1997

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)
INSURANCE SERVICES OFFICE, INC.

545 WASHINGTON BLVD
JERSEY CITY, NJ 07310-1607

2b Employer Identification Number (EIN)
13-3131412

2c Plan Sponsor's telephone number
201-469-3006

2d Business code (see instructions)
524290

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	EMILY PICARELLO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2026	EMILY PICARELLO
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	8310
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)**	4646
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	4540
b	Retired or separated participants receiving benefits	**6b**	2
c	Other retired or separated participants entitled to future benefits	**6c**	3344
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	7886
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	33
f	Total. Add lines **6d** and **6e**.	**6f**	7919
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)**	8172
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)**	7802
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	54
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 2J 2K 2P 2R 2S 2T 3H

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

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

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached 0
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INSURANCE SERVICES OFFICE, INC.

D Employer Identification Number (EIN)
13-3131412

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

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

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

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

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 37 50 64	CONTRACT ADMINISTRATOR	462821	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

NORTHERN TRUST INVESTMENTS

36-1561860

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	INVESTMENT MANAGEMENT	239793	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CHARLES SCHWAB & CO, INC.

94-1737782

(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?
33 50 71	BROKER/DEALER	9121	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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
ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 003

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
INSURANCE SERVICES OFFICE, INC.

D Employer Identification Number (EIN)
13-3131412

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: NT MULTI-MANAGER US ALL CAP EQ J FD

b Name of sponsor of entity listed in (a): NORTHERN 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)
82-6192524-300	C	147018244

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE RUSSELL 3000 IDX J FD

b Name of sponsor of entity listed in (a): NORTHERN 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)
45-6138589-224	C	310738744

a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE SV COMMON TR FD

b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY

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)
52-1309931-001	C	133006998

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET RTMT TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083967-001	C	13566918

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2020 TRUST II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083982-001	C	23581382

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2025 TRUST II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083980-001	C	46610944

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2030 TRUST II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
90-6083978-001	C	109682303

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2035 TRUST II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 90-6083976-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 81790093

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2040 TRUST II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 90-6083974-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 148546554

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2045 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 90-6083972-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 118472814

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2050 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 90-6083970-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 119160049

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2055 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 27-6715091-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 62015845

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2060 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 45-3799419-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27480975

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2065 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 82-6194314-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6989832

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE AGGREGATE BD IDX J FD

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

c EIN-PN 45-6138589-088	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14999998

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK STRAT COM NONLEND M FD

b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO

c EIN-PN 46-3525011-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2803914

a Name of MTIA, CCT, PSA, or 103-12 IE: NT MULTI-MANAGER NON-US EQ J FD

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

c EIN-PN 82-6192524-301	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38078784

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE ACWI EX-US J FUND

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

c EIN-PN 45-6138589-117	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19911748

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TGT RTMT 2070 TR II FD

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST CO

c EIN-PN 87-7039453-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4225972

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

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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
ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INSURANCE SERVICES OFFICE, INC.

D Employer Identification Number (EIN)
13-3131412

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2549532	1264860
(2) Participant contributions	1b(2)		1636409
(3) Other	1b(3)		
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)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	8738573	8870912
(9) Value of interest in common/collective trusts	1c(9)	1304588484	1428682110
(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)	44393867	44394469
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	105069983	137587892

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	804487451	548114169
(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	2269827890	2170550821
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	2269827890	2170550821

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)	32474113	
(B) Participants	2a(1)(B)	50093774	
(C) Others (including rollovers)	2a(1)(C)	9810513	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		92378400
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)	688158	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		688158
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	4752653	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	410213	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		5162866
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	144647210	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	146561839	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-1914629
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-126251171	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-126251171

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	**2b(6)**		199459727
(7) Net investment gain (loss) from pooled separate accounts	**2b(7)**		
(8) Net investment gain (loss) from master trust investment accounts	**2b(8)**		
(9) Net investment gain (loss) from 103-12 investment entities	**2b(9)**		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	**2b(10)**		4131439
c Other income	**2c**		20535285
d Total income. Add all **income** amounts in column (b) and enter total	**2d**		194190075
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	**2e(1)**	292720433	
(2) To insurance carriers for the provision of benefits	**2e(2)**		
(3) Other	**2e(3)**	34950	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	**2e(4)**		292755383
f Corrective distributions (see instructions)	**2f**		
g Certain deemed distributions of participant loans (see instructions)	**2g**		
h Interest expense	**2h**		
i Administrative expenses:			
(1) Salaries and allowances	**2i(1)**		
(2) Contract administrator fees	**2i(2)**	471968	
(3) Recordkeeping fees	**2i(3)**		
(4) IQPA audit fees	**2i(4)**		
(5) Investment advisory and investment management fees	**2i(5)**	239793	
(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)**		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	**2i(12)**		711761
j Total expenses. Add all **expense** amounts in column (b) and enter total	**2j**		293467144
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	**2k**		-99277069
l Transfers of assets:			
(1) To this plan	**2l(1)**		
(2) From this plan	**2l(2)**		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: COHN REZNICK LLP **(2)** EIN: 22-1478099

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		30000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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

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

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

B Three-digit plan number (PN) ▶ 003

C Plan sponsor's name as shown on line 2a of Form 5500
INSURANCE SERVICES OFFICE, INC.

D Employer Identification Number (EIN)
13-3131412

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): 42-0127290

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☒ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

ISO 401(k) Savings and Employee Stock Ownership Plan

Financial Statements as of December 31, 2025 and 2024 and for the year ended December 31, 2025,
Supplemental Schedule as of December 31, 2025, and
Independent Auditor’s Report

ISO 401(k) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN
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NOTE:
All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.

Independent Auditor's Report

To the Plan Administrator of
ISO 401 (k) Savings and Employee Stock Ownership Plan

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

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

Management, having determined it is permissible in the circumstances, has elected to have the audits of ISO 401 (k) Savings and Employee Stock Ownership Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

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

Opinion

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("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 ISO 401 (k) Savings and Employee Stock Ownership Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about ISO 401 (k) Savings and Employee Stock Ownership Plan's ability to continue as a going concern for at least one year following 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

Except as described in the *Scope and Nature of the ERISA Section 103(a)(3)(C) Audit* section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 ISO 401 (k) Savings and Employee Stock Ownership 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 ISO 401 (k) Savings and Employee Stock Ownership Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedules Required by ERISA

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

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, 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 form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

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



Parsippany, New Jersey
October 15, 2026

ISO 401(k) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
As of December 31, 2025 and 2024

	2025	2024
ASSETS:		
Investment in Company Stock — at fair value	$ 548,114,169	$ 804,280,878
Participant-directed investments — at fair value	1,610,664,471	1,454,258,907
Employer contribution receivable	1,264,860	2,549,532
Participant contribution receivable	1,636,409	-
Notes receivable from participants	8,870,912	8,738,573
Total assets	2,170,550,821	2,269,827,890
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,170,550,821	$ 2,269,827,890

The accompanying notes are an integral part of these financial statements.

ISO 401(k) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
For the Year Ended December 31, 2025

ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Participant contributions	$	50,093,774
Employer contributions		32,474,113
Rollover contributions		9,810,513
Interest income on notes receivable from participants		688,158
Total additions		93,066,558
INVESTMENT INCOME:		
Net appreciation in fair value of investments		95,960,651
Dividends		5,162,866
Net investment income		101,123,517
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Benefits paid to participants		(292,755,383)
Administrative fees		(711,761)
Total deductions		(293,467,144)
NET DECREASE IN NET ASSETS		(99,277,069)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year		2,269,827,890
End of year	$	2,170,550,821

The accompanying notes are an integral part of these financial statements.

ISO 401(k) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN

NOTES TO FINANCIAL STATEMENTS

As of December 31, 2025 and 2024 and for the Year Ended December 31, 2025

1. DESCRIPTION OF THE PLAN

The following description of the ISO 401(k) Savings and Employee Stock Ownership Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions. Copies are available from the Plan administrator.

General Information - The Plan was established by Insurance Services Office, Inc. ("ISO"), a wholly-owned subsidiary of Verisk Analytics, Inc. ("Verisk" or the "Company"), for the benefit of eligible employees in the United States. The Plan includes both an employee savings component and an employee stock ownership ("ESOP") component. The purpose of the Plan is to enable the Company's employees to participate in a tax-deferred savings arrangement under the Internal Revenue Code of 1986 (the "Code"), as amended, Sections 401(a) and 401(k), and to provide eligible employees equity participation in the Company through the stock ownership account (the "Stock Ownership Account") within the ISO ESOP Trust (the "Trust"), which consists of Verisk common stock ("Company Stock") allocated to employees in the form of participation units.

ISO serves as the Plan's sponsor. The Plan Administration Committee ("PAC"), elected by the Board of Directors of the Company, controls and manages the operations and administration of the Plan. The Plan is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

GreatBanc Trust Company (the "ESOP Trustee") was selected by the Company's Board of Directors to serve as trustee of the Trust. Delaware Charter Guarantee & Trust Company dba Principal Trust Company serves as the directed trustee of the 401(k) Savings Trust and custodian (the "Custodian") of the Plan. The Trust Investment Committee, appointed by PAC, is responsible for directing the sale, investment, or reinvestment of Plan assets. The Principal Financial Group ("Principal") is the recordkeeper and transfer agent, as defined by the Plan.

Eligibility - Most employees of the Company are eligible to participate in the ESOP component of the Stock Ownership Account and to receive ESOP participation units. Employees who are not employed on the last day of the Plan year are not eligible for ESOP participation units for the year.

Most employees of the Company are eligible to participate in the 401(k) component of the Stock Ownership Account, based on the eligibility requirements in accordance with the terms of the Plan, on the first entry date following the date they complete one hour of service.

Contributions - Eligible employees may make pre-tax and after-tax cash contributions as a percentage of their compensation subject to certain limitations, under the applicable provisions of the Code. Plan participants have the option of splitting contributions between Roth and traditional 401(k) accounts. The maximum contribution that can be made to the traditional pre-tax 401(k) and Roth 401(k) on a combined basis is $23,500, the amount determined under the provisions of Code Section 402(g) for the 2025 taxable year. Certain eligible participants (age 50 and older) may contribute an additional $7,500 for 2025. After-tax contributions are limited to ten percent of a participant's compensation. Contributions can be invested in various investment options as each employee elects. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at six percent of eligible compensation and their contributions invested in a designated balanced fund until changed by the participant. In addition to core investment options, participants may choose to manage their own investments through the use of a self-directed brokerage account ("SDA"). Participants may also contribute amounts representing distributions from other defined benefit or defined contribution plans.

Participant Accounts - Individual accounts are maintained for each Plan participant. Each participant's account is credited with the participant's contributions, the Company's matching and ESOP contributions, discretionary profit-sharing contributions, and an allocation of participant forfeitures and Plan earnings are charged with withdrawals, an allocation of Plan losses, and administrative expenses. Allocations are based on participant compensation, account balances, or specific

participant transactions, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

401(k) Matching Contributions - The Company provides matching contributions for all active participants who elect to make contributions to their 401(k) account. A majority of the matching contributions is equal to 100 percent of the first six percent of the participant's contribution in accordance with the terms of the Plan. Matching contributions can be made in cash or in Participation Units ("Units") to participant accounts. The Units are calculated by dividing the dollar amount of the matching contributions by the closing fair value of the investments on the funding date. Matching contributions were included in "Employer contributions" in the accompanying statement of changes in net assets available for benefits.

Discretionary Profit-Sharing Contributions - Employees hired on or after March 1, 2005 may be eligible to receive discretionary profit-sharing contributions in the form of cash or Units. For the year ended December 31, 2025, there was no profit-sharing contribution made in the form of Units or cash.

Vesting - Effective January 1, 2014, each participant becomes fully vested in the value of their ESOP account and discretionary profit-sharing contribution once they have completed three years of service. A participant's ESOP account may become fully vested before that time if the participant dies while in the employ of the Company, becomes disabled and is unable to perform the essential functions of their job, or attains normal retirement age while in the employ of the Company.

Participants in the 401(k) account are 100 percent vested in their voluntary pre-tax and after-tax contributions, plus actual earnings thereon, and 401(k) matching contributions made by the Company.

Participants who separate from the Company after becoming vested in the Plan have the option to transfer the value of their accounts into another qualified plan or a qualified 401(k) account.

Payment of Benefits - Unless a participant elects otherwise, distributions of a vested participant's balance in the ESOP component of the Stock Ownership Account will begin:

a) not later than one year after the close of the Plan year in which the participant's employment with the Company ends due to death, disability, or attaining the age of 62; or

b) not later than one year after the fifth Plan year following the Plan year in which the participant separated from the Company for any other reasons.

If the participant's vested balance in the ESOP component of the Stock Ownership Account at the time of distribution does not exceed $1,000, the entire benefit shall be distributed to the participant in a lump-sum payment, unless the participant elects to roll the account into another qualified plan. If the participant's vested balance in the ESOP component of the Stock Ownership Account at the time of distribution exceeds $1,000, the distribution of the account may be made in a lump-sum or substantially equal annual, quarterly, or monthly payments over a period not to exceed five years.

The distribution of a participant's vested balance in the 401(k) component of the Stock Ownership Account will begin at retirement, termination of employment, death, or disability. A participant may continue to defer taxation by electing a direct rollover to another plan or an individual retirement account. The distribution of the 401(k) component of the Stock Ownership Account will be paid in one of the following forms:

a) a single lump-sum payment;

b) substantially equal annual or quarterly payments over a specified number of years not to exceed 15 years or the participant's life expectancy; or

c) a nontransferable annuity from a life insurance company providing for periodic annuity payments over the participant's lifetime.

Voting Rights - Allocated shares, except for corporate matters relating to a merger or consolidation, recapitalization, reclassification, liquidation, dissolution, sale of the business, or similar transactions that any regulations promulgated under Code Section 409(e)(4) may require, within the Stock Ownership Account are voted by the ESOP Trustee.

Diversification - A participant may direct the diversification of all of their 401(k) matching contribution account. Participants shall not be permitted to direct employee contributions to invest in shares of Company Stock. Participants with balances within the ESOP component of the Stock Ownership Account may direct the transfer and conversion of all their cumulative number of Units into another investment fund within the Plan. The value of each share sold will be determined based on the closing market price of the Company Stock on the day the transaction is processed.

Forfeitures - If a participant resigns or is dismissed by the Company before fully vesting, the nonvested balance in the participant's ESOP account and 401(k) match will be deemed forfeitures. The value of the forfeited ESOP amounts will be reallocated in the following Plan year to accounts of participants who were active at the end of the year in which the forfeitures occurred. The value of the forfeited 401(k) match can be used to reduce employer contributions. As of December 31, 2025 and 2024, the value of forfeited ESOP amounts totaled $8,156 and $5,829, respectively. These amounts were subsequently reallocated to participants' accounts in the following Plan year. As of December 31, 2025 and 2024, the value of 401(k) match forfeitures totaled $53,078 and $0, respectively. For the year ended December 31, 2025, 401(k) match forfeitures amounting to $2,588 were applied to offset employer contributions and are included in the "Employer contributions" within the statement of changes in net assets available for benefits.

Notes Receivable from Participants - The Plan provides loans to employees participating in the Plan. The maximum number of outstanding loans that a participant may have at any time is one. The amount of any loan shall be at least $1,000 and shall not exceed 50 percent of the first $100,000 of the vested balance in the participant's 401(k) account. No loans are permitted from a participant's ESOP account. The 50 percent limit will be reduced by the highest outstanding balance of loans provided to the participant during the one-year period ending on the day before the date on which the new loan is made. The loan terms are between one and five years with a fixed interest rate for new loans equal to one percent point above the prime rate when the loan is granted.

Each loan is collateralized by the borrower's interest in the Plan and is evidenced by a promissory note. Any outstanding loan will become due and payable as of the end of the second month following the month of the participant's termination of employment. If a participant is no longer an active employee and defaults on a loan, the outstanding loan balance is treated as a deduction from the individual's lump-sum distribution.

Excess Contributions - The Plan is required to return contributions received during the Plan year in excess of the Code limits. During the Plan year 2025, there were no excess contributions returned to participants.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates - The preparation of financial statements in conformity with GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities, changes therein and disclosures of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties - The Plan utilizes various investment instruments, including Company Stock, registered investment companies, pooled separate accounts, common/collective trusts, a stable value fund, interest-bearing cash, and SDAs. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and those changes could materially affect the amounts reported in the financial statements.

Investment Valuation and Income Recognition - The Plan's investments are stated at fair value. Fair value of a financial instrument is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The Company Stock is stated at fair value, which is a quoted market price. Shares of registered investment companies are valued at quoted market prices, which represent the net asset value ("NAV") of shares held by the Plan at year-end. The fair value of the common collective trusts is based on the NAV of its investments. The fair value of the SDAs are based on the closing market price of the respective individual security at year-end. Interest-bearing cash is valued at amortized cost which approximates fair value. See Note 4 for further discussion of the fair value measurements associated with the Plan's investment options.

The statement of changes in net assets available for benefits presents the "Net appreciation in fair value of investments," which consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments. Management fees and operating expenses charged to the Plan for investments in registered investment companies are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of net appreciation in the fair value for such investments for the year ended December 31, 2025.

Purchases and sales of securities are recorded on the trade date. Interest income is recorded on an accrual basis. Dividend income is recorded on the ex-dividend date. Net appreciation includes gains and losses on investments bought and sold as well as held during the year.

Administrative Expenses – The annual Plan administrative expenses, as determined by the PAC, will be deducted on a quarterly basis from the Plan and each participant will pay a proportion of the expenses, unless the Company pays part or all of such expenses. The amount deducted from each participant's account is determined by prorating the total expense amount based on each participant's account balance. Plan administrative expenses include items such as recordkeeping, investment management fees, participant website, participant statements, Plan compliance services and financial professional services. For the year ended December 31, 2025, Plan recordkeeping, investment management fees, participant website, and participant statements were paid for by the Plan. All other administrative expenses were paid for by the Company. Plan administrative expenses are included in "Administrative fees" within the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2025.

Payment of Benefits - Benefit payments to participants are recorded upon distribution. There were no amounts allocated to accounts of persons who have elected to withdraw from the Plan but have not yet been paid as of December 31, 2025 and 2024.

Notes Receivable from Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2025 or 2024.

Contributions - Contributions from Plan participants and the matching contributions from the Company are recorded in the year in which the employee contributions are withheld from compensation.

3. INFORMATION CERTIFIED BY THE CUSTODIAN

The Plan administrator has elected to have an audit performed pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2025 and 2024. Accordingly, certain information in the Plan's financial statements and supplemental schedule was agreed to or derived from information certified as complete and accurate by the Custodian, the ESOP Trustee and a qualified institution. The certified information includes the Plan's investments and notes receivable from participants reported in the accompanying statements of net assets available for benefits as of December 31, 2025 and 2024, and the accompanying supplemental Schedule of Assets (Held at End of Year) as of December 31, 2025, and the related investment activity (including net appreciation in fair value and dividends) and interest income on notes receivable from participants reported in the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2025.

4. FAIR VALUE MEASUREMENTS

Certain assets and liabilities of the Plan are reported at fair value in the accompanying statements of net assets available for benefits. To increase consistency and comparability of assets and liabilities recorded at fair value, ASC 820-10, *Fair Value Measurements* ("ASC 820-10"), established a three-level fair value hierarchy to prioritize the inputs to valuation techniques used to measure fair value. ASC 820-10 requires disclosures detailing the extent to which companies measure assets and liabilities at fair value, the methods and assumptions used to measure fair value, and the effect of fair value measurements in the statement of changes in net assets available for benefits. In accordance with ASC 820-10, the Company applied the following fair value hierarchy:

Level 1 - Assets or liabilities for which the identical item is traded on an active exchange, such as publicly traded instruments. The fair value is based on unadjusted quoted prices in active markets that are accessible to the Plan for identical assets.

Level 2 - Assets and liabilities valued based on observable market data for similar instruments. Level 2 inputs include quoted market prices in active markets for similar assets, quoted market prices in markets that are not active for identical or similar assets, and other inputs that are either directly or indirectly observable for substantially the full term of the financial instrument.

Level 3 - Assets or liabilities for which significant valuation assumptions are not readily observable in the market; instruments valued based on the best available data, some of which is internally developed, and considers risk premiums that a market participant would require.

Valuation techniques are discussed in Note 2. As required by ASC 820-10, the level within which a financial instrument is categorized under the fair value hierarchy is based on the lowest-level input that is significant to the fair value measurement in its entirety. The Plan reviews its fair value hierarchy periodically and changes in the observability of valuation inputs and in the significance of valuation inputs may result in a reclassification between fair value hierarchy-level categories. The Plan's policy is to recognize significant transfers between levels at the end of the reporting period. There were no significant transfers for the year ended December 31, 2025.

	Total	Quoted Prices in Active Markets for Identical Assets (Level 1)
December 31, 2025		
Company Stock	$ 548,114,169	$ 548,114,169
Registered investment companies	44,394,468	44,394,468
Self-directed brokerage account	137,587,892	137,587,892
Total assets in the fair value hierarchy	730,096,529	730,096,529
Investments measured at NAV[(a)]	1,428,682,111	-
Total investments	$ 2,158,778,640	$ 730,096,529
December 31, 2024		
Company Stock	$ 804,280,878	$ 804,280,878
Registered investment companies	44,393,867	44,393,867
Self-directed brokerage account	105,276,556	105,276,556
Total assets in the fair value hierarchy	953,951,301	953,951,301
Investments measured at NAV[(a)]	1,304,588,484	-
Total investments	$ 2,258,539,785	$ 953,951,301

(a) In accordance with ASC 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

The redemption restrictions and unfunded commitments to investments for which fair value is determined based on the NAV of the underlying investment as of December 31, 2025 and 2024, are as follows:

	Fair Value	Unfunded Commitment	Redemption Frequency	Other Redemption Restrictions	Redemption Notice Period
December 31, 2025					
Common/collective trusts	$ 1,428,682,111	$ -	Immediate	None	None
December 31, 2024					
Common/collective trusts	$ 1,304,588,484	$ -	Immediate	None	None

5. FEDERAL INCOME TAX STATUS

The Internal Revenue Service (the "IRS") has determined and informed the Company by a letter dated August 22, 2014, that the Plan and related trust were designed in accordance with the applicable regulations of the Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed, and being operated, in compliance with the applicable requirements of the Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan management considers that no tax liabilities (or assets) were warranted as of December 31, 2025 and 2024; currently, there are no IRS audits for any tax periods in progress.

6. PLAN TERMINATION

The Company intends to continue the Plan indefinitely, but reserves the right to amend, terminate, or partially terminate the Plan at any time in accordance with the terms of the Plan. The date of the termination or partial termination will become the last day of the Plan year. After all adjustments required under the Plan have been made, the participant benefits affected under the termination will not be subject to forfeiture. If a participant remains an employee of the Company, the assets allocated to the participant's account may be retained in the Plan until after the participant's termination of employment with the Company. Although it has not expressed any intention to do so, the Company has the right under the Plan to terminate the Plan, subject to the provisions set forth under ERISA. In the event that the Plan is terminated, participants would become 100 percent vested in their accounts.

7. PLAN ADMINISTRATION

The PAC controls and manages the operations and administration of the Plan. The Trust Investment Committee, elected by the PAC, is responsible for directing the sale, investment, or reinvestment of Plan assets. The ESOP Trustee votes on behalf of participants whose allocated shares are within the Stock Ownership Account.

8. PARTY-IN-INTEREST TRANSACTIONS

Exempt Party-in-Interest - At December 31, 2025 and 2024, the Plan held 2,450,329 and 2,920,092 shares, respectively, of the Company Stock. The fair value and cost basis of the Company Stock at December 31, 2025 was $548,114,169 and $21,656,414, respectively. The fair value and cost basis of the Company Stock at December 31, 2024 was $804,280,878 and $25,558,833, respectively. Net depreciation of the Company Stock totaled $128,165,802 for the year ended December 31, 2025.

Certain officers or employees of the Company perform administrative functions, but they do not receive compensation from the Plan. The Company also provides to the Plan certain accounting and administrative services for which no fees are charged.

Notes receivable from participants are also considered exempt party-in-interest transactions.

Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund.

9. SUBSEQUENT EVENTS

The Plan has identified and evaluated there were no subsequent events through October 15, 2026, which is the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

ISO 401(k) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN
EMPLOYER IDENTIFICATION NUMBER 13-3131412, PLAN 003
Form 5500, Schedule H, Line 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
As of December 31, 2025

(a) Party in Interest	(b) Identity of issue	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value		(d) Cost	(e) Market Value
	Investment in Verisk Analytics, Class A Common Stock - Non-Participant Directed				
*	Verisk Analytics Inc.	Verisk Analytics Inc. Stock	Employer Security	$ 21,656,414	**$ 548,114,169**
	Investments in Common Collective Trust Investments - Participant Directed				
	BlackRock Institutional Trust Co	BlackRock Strat Compl Non-Lending M Fund	Common/Collective Trust		$ 2,803,914
	Northern Trust	NT Collective Aggregate Bond Index J Fund	Common/Collective Trust		$ 14,999,998
	Northern Trust	NT Collective ACWI ex-US J Fund	Common/Collective Trust		$ 19,911,748
	Northern Trust	NT Collective Russell 3000 Index J Fund	Common/Collective Trust		$ 310,738,744
	Northern Trust	NT Multi-Manager Non-US Eq J Fund	Common/Collective Trust		$ 38,078,784
	Northern Trust	NT Multi-Manager US All Cap Equity J Fund	Common/Collective Trust		$ 147,018,244
	T. Rowe Price Trust Company	T. Rowe Price Stable Value Common Trust N Fund	Common/Collective Trust		$ 133,006,998
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement Trust II Fund	Common/Collective Trust		$ 13,566,918
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2020 Trust II Fund	Common/Collective Trust		$ 23,581,382
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2025 Trust II Fund	Common/Collective Trust		$ 46,610,944
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2030 Trust II Fund	Common/Collective Trust		$ 109,682,303
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2035 Trust II Fund	Common/Collective Trust		$ 81,790,093
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2040 Trust II Fund	Common/Collective Trust		$ 148,546,554
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2045 Trust II Fund	Common/Collective Trust		$ 118,472,814
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2050 Trust II Fund	Common/Collective Trust		$ 119,160,049
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2055 Trust II Fund	Common/Collective Trust		$ 62,015,845
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2060 Trust II Fund	Common/Collective Trust		$ 27,480,975
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2065 Trust II Fund	Common/Collective Trust		$ 6,989,832
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2070 Trust II Fund	Common/Collective Trust		$ 4,225,972
					$ 1,428,682,111
	Investments in Registered Investment Companies - Participant Directed				
	PGIM Investments, LLC	PGIM Total Return Bond Fund	Registered Investment Company		$ 28,909,498
	PIMCO	PIMCO Inflation Resp Multi-Asset Institutional Fund	Registered Investment Company		$ 15,484,970
					$ 44,394,468
*	**Participant Loans - Participant Directed**	Range of Rates 4.25% to 9.50%	Loans		**$ 8,870,912**
	Investments in Self-Directed Brokerage Account - Participant Directed				
	Principal Life Insurance Company	Principal Self-Dir Broker Acct	Brokerage Account (Other)		**$ 137,587,892**
	TOTAL SCHEDULE OF ASSETS HELD				**$ 2,167,649,552**

* Party-in-interest

See Independent Auditor's Report.

ISO 401(K) SAVINGS AND EMPLOYEE STOCK OWNERSHIP PLAN
EMPLOYER IDENTIFICATION NUMBER 13-3131412, PLAN 003 Form 5500, Schedule H, Line 4i

Schedule of Assets Held - December 31, 2025

(a) Party in Interest	(b) Identity of Issue	(c) Description of Investment	Type	(d) Cost	(e) Market Value
	Investment in Verisk Analytics, Class A common stock				
*	Verisk Analytics Inc.	Verisk Analytics Inc. Stock	Employer Security		$ 548,114,168.51
	Investments in Common Collective Trust Investments				
	BlackRock Institutional Trust Co	BlackRock Strat Compl Non-Lending M Fund	Common/Collective Trust		$ 2,803,913.86
	Northern Trust	NT Collective Aggregate Bond Index J Fund	Common/Collective Trust		$ 14,999,997.91
	Northern Trust	NT Collective ACWI ex-US J Fund	Common/Collective Trust		$ 19,911,747.66
	Northern Trust	NT Collective Russell 3000 Index J Fund	Common/Collective Trust		$ 310,738,743.67
	Northern Trust	NT Multi-Manager Non-US Eq J Fund	Common/Collective Trust		$ 38,078,783.72
	Northern Trust	NT Multi-Manager US All Cap Eq J Fund	Common/Collective Trust		$ 147,018,244.02
	T. Rowe Price Trust Company	T. Rowe Price Stable Value Common Trust N Fund	Common/Collective Trust		$ 133,006,997.64
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement Trust II Fund	Common/Collective Trust		$ 13,566,917.48
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2020 Trust II Fund	Common/Collective Trust		$ 23,581,381.50
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2025 Trust II Fund	Common/Collective Trust		$ 46,610,943.87
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2030 Trust II Fund	Common/Collective Trust		$ 109,682,302.23
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2035 Trust II Fund	Common/Collective Trust		$ 81,790,093.09
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2040 Trust II Fund	Common/Collective Trust		$ 148,546,554.50
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2045 Trust II Fund	Common/Collective Trust		$ 118,472,814.30
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2050 Trust II Fund	Common/Collective Trust		$ 119,160,049.74
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2055 Trust II Fund	Common/Collective Trust		$ 62,015,845.63
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2060 Trust II Fund	Common/Collective Trust		$ 27,480,975.59
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2065 Trust II Fund	Common/Collective Trust		$ 6,989,831.62
	Vanguard Fiduciary Trust Co	Vanguard Target Retirement 2070 Trust II Fund	Common/Collective Trust		$ 4,225,971.66
					$ 1,428,682,109.69
	Investments in Registered Investment Companies				
	PGIM Investments, LLC	PGIM Total Return Bond Fund	Registered Investment Company		$ 28,909,497.85
	PIMCO	PIMCO Inflation Resp Multi-Asset Institutional Fund	Registered Investment Company		$ 15,484,970.93
*	**Participant Loans**	Range of Rates 4.25% to 9.50%	Loans		$ 8,870,912.18
	Investments in Self-Directed Brokerage Account				
	Principal Life Insurance Company	Principal Self-Dir Broker Acct	Brokerage Account (Other)		$ 137,587,891.90