

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 2021 This Form is Open to Public Inspection
---	---	---

Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☒
D Check box if filing under:	☐ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information—enter all requested information										
1a Name of plan <u>SERVICE EMPLOYEES INTL UNION LOCAL 2000 PENSION FUND</u> 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) <u>SEIU LOCAL 2000 PENSION FUND</u> <u>5585 PERSHING, SUITE 170</u> <u>SUITE 170</u> <u>ST. LOUIS, MO 63112-4621</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 50%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1992</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>36-2435849</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>314-533-3633</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>316990</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1992</u>		2b Employer Identification Number (EIN) <u>36-2435849</u>		2c Plan Sponsor's telephone number <u>314-533-3633</u>		2d Business code (see instructions) <u>316990</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>										
1c Effective date of plan <u>01/01/1992</u>											
2b Employer Identification Number (EIN) <u>36-2435849</u>											
2c Plan Sponsor's telephone number <u>314-533-3633</u>											
2d Business code (see instructions) <u>316990</u>											

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.	07/07/2022	LISA GOULD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/08/2022	MICHAEL E. MURPHY
	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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	1195
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)	259
a(2) Total number of active participants at the end of the plan year		6a(2)	165
b Retired or separated participants receiving benefits.....		6b	
c Other retired or separated participants entitled to future benefits		6c	969
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	1134
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	
f Total. Add lines 6d and 6e		6f	1134
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	1134
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	12
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	4
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2C			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2021
		This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan SERVICE EMPLOYEES INTL UNION LOCAL 2000 PENSION FUND	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SEIU LOCAL 2000 PENSION FUND	D Employer Identification Number (EIN) 36-2435849	

Part I	Service Provider Information (see instructions)
---------------	--

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

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

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

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

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

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

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

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

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

SEIU LOCAL 2000 H & W FUND

43-1598128

(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?
15 99	AFFILIATE	93327	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMALGA TRUST

36-6228122

(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?
19 28 51	NONE	40047	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ANDERS MINKLER HUBER & HELM LLP

43-0831507

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 16 50	NONE	24920	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

HAMMOND AND SHINNERS PC

43-1164305

(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?
29 50	NONE	12645	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHILTON CAPITAL MANAGEMENT LLC

76-0488937

(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?
19 28 51	NONE	10064	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EKON BENEFITS

43-1317863

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	NONE	9787	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE 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 2021 This Form is Open to Public Inspection
--	--	---

For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>		
A Name of plan <u>SERVICE EMPLOYEES INTL UNION LOCAL 2000 PENSION FUND</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SEIU LOCAL 2000 PENSION FUND</u>	D Employer Identification Number (EIN) <u>36-2435849</u>	

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	73339	103833
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	15562	10933
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	37610	21912
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	115587	236353
(2) U.S. Government securities	1c(2)	1694048	1672345
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	859251	718507
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	4898063	5273288
(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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	7693460 8037171
Liabilities			
g	Benefit claims payable	1g	263880 247631
h	Operating payables	1h	38887 36985
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	302767 284616
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	7390693 7752555

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	157349
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers).....	2a(1)(C)	
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	157349
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	87
	(B) U.S. Government securities	2b(1)(B)	29619
	(C) Corporate debt instruments	2b(1)(C)	14362
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	
	(F) Other	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	44068
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	68983
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	68983
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	9111729
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	8472247
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	639482
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	513253
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	513253

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		1423135
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	846684	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		846684
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	43357	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	50110	
(4) Other.....	2i(4)	121122	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		214589
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1061273
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		361862
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) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

(1) ☐ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☒ 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: **ANDERS MINKLER HUBER & HELM, LLP**

(2) EIN: **43-0831507**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

During the plan year:

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.).....

	Yes	No	Amount
4a		X	

	Yes	No	Amount
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?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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.)	X		
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.)	X		
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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.		X	
4n		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ 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 2021 This Form is Open to Public Inspection.
---	---	--

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>SERVICE EMPLOYEES INTL UNION LOCAL 2000 PENSION FUND</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SEIU LOCAL 2000 PENSION FUND</u>	D Employer Identification Number (EIN) <u>36-2435849</u>

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	
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): _____ 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	<u>93</u>

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	<u>168282</u>	
b Enter the amount contributed by the employer to the plan for this plan year	6b	<u>168282</u>	
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	<u>0</u>	
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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (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) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

- 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 _____

SEIU LOCAL 2000 PENSION FUND
FINANCIAL STATEMENTS WITH SUPPLEMENTARY INFORMATION
AND ADDITIONAL INFORMATION
AND
INDEPENDENT AUDITORS' REPORT
YEARS ENDED DECEMBER 31, 2021 AND 2020

Contents

	<u>Page</u>
Independent Auditors' Report	1 - 3
Financial Statements	
Statements of Net Assets Available for Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6 - 12
Supplementary Information	
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	13 - 19
Schedule H, Line 4j - Schedule of Reportable Transactions	20
Additional Information	
Schedules of Administrative Expenses	21

Independent Auditors' Report

Board of Trustees
SEIU Local 2000 Pension Fund
St. Louis, Missouri

Opinion

We have audited the accompanying financial statements of SEIU Local 2000 Pension Fund (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2021 and 2020, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards 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 generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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.

Supplementary Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedules of Assets (Held at End of Year) and Reportable Transactions, are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

Report on Additional Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The Schedules of Administrative Expenses on page 21 are presented for purposes of additional analysis and are not a required part of the financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. In our opinion, the additional information is fairly stated, in all material respects, in relation to the financial statements as a whole.



July 1, 2022

SEIU Local 2000 Pension Fund
Statements of Net Assets Available for Benefits
December 31, 2021 and 2020

Assets			
		<u>2021</u>	<u>2020</u>
Cash		\$ 103,833	\$ 73,339
Investments, at Fair Value		<u>7,900,493</u>	<u>7,566,949</u>
Receivables			
Employer contributions		10,933	15,562
Dividends and interest		11,323	15,332
Due from Broker		<u>-</u>	<u>14,750</u>
Total Receivables		<u>22,256</u>	<u>45,644</u>
Prepaid Expenses		<u>10,589</u>	<u>7,528</u>
Total Assets		<u>8,037,171</u>	<u>7,693,460</u>
Liabilities			
Accounts Payable		13,787	16,211
Accrued Expenses		19,800	20,025
Due to Related Fund		<u>3,398</u>	<u>2,651</u>
Total Liabilities		<u>36,985</u>	<u>38,887</u>
Net Assets Available for Benefits		<u>\$ 8,000,186</u>	<u>\$ 7,654,573</u>

SEIU Local 2000 Pension Fund
Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Additions To Net Assets:		
Investment income		
Interest	\$ 44,068	\$ 62,855
Dividends	68,983	75,747
Net appreciation in fair value of investments	<u>1,152,735</u>	<u>856,313</u>
	1,265,786	994,915
Less investment expenses	<u>50,110</u>	<u>46,758</u>
Net Investment Income	1,215,676	948,157
Employers' contributions	157,349	221,724
Other income	<u>-</u>	<u>5,229</u>
Total Additions	<u>1,373,025</u>	<u>1,175,110</u>
Deductions From Net Assets:		
Benefits paid directly to participants	862,933	610,419
Administrative expenses	<u>164,479</u>	<u>151,334</u>
Total Deductions	<u>1,027,412</u>	<u>761,753</u>
Net Increase	345,613	413,357
Net Assets Available for Benefits, Beginning of Year	<u>7,654,573</u>	<u>7,241,216</u>
Net Assets Available for Benefits, End of Year	<u>\$ 8,000,186</u>	<u>\$ 7,654,573</u>

**SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020**

1. Description of the Plan

The following description of the SEIU Local 2000 Pension Fund, (the "Plan"), provides only general information. Participants of the Plan should refer to the plan document and summary plan description for a more complete description of the Plan's provisions.

General

The Plan is a multi-employer defined contribution pension plan covering all eligible members of the Service Employees International Union ("SEIU") Local 2000 (the "Union") under the terms of the various collective bargaining agreements ("CBA") with the various contractors (the "Employers"). The Plan was established on January 1, 1992 and is administered by a joint Board of Trustees (the "Trustees") consisting of union and employer representatives. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Eligibility

Each employee of an Employer is eligible to participate in the Plan on the first day of the month following the date of employment or, if later, the first day of the month following the date specified in the CBA between the Employer and the Union. In no event, however, shall an employee become a participant in the Plan later than the first day of the month following one year of employment.

Funding Policy

Contributions to the Plan are in accordance with CBAs with the Employers. Employers pay contributions on behalf of their employees based on various hourly contribution rates for each participant's hours of service. Contributions are made on a monthly basis throughout the year.

Participant Accounts

A separate account has been established for each participant. Each participant account maintains the value of contributions made on the participant's behalf. On each valuation date, the value of participant accounts is adjusted for a proportional share of the net investment income, less administrative expenses. The amount allocated to each account is based on the account balances as of the valuation date before allocation of the income (loss).

Vesting and Forfeitures

Effective January 1, 2009, each participant who was employed under a CBA on or after that date shall be entitled to 100% of their participant account after completion of three years of vesting service.

**SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020**

If a participant separates from service prior to being completely vested in his account, the nonvested portion of his account is forfeited on the date on which the participant incurs five consecutive one year breaks in service. Such forfeitures shall be allocated to each participant eligible to receive an employer contribution in proportion that the value of such participant's account bears to the total value of all participants' accounts. For the years ended December 31, 2021 and 2020, \$23,150 and \$43,804, respectively, was forfeited and allocated to participants' accounts.

Pension Benefits

Upon attainment of normal retirement age, early retirement, death or disability retirement dates, the amount credited to a participant's account is payable to the participant, in accordance with the terms of the Plan. Benefit payments may be in the form of a lump sum or annuity. A participant who terminates employment before his normal retirement date shall be entitled, on his normal retirement date, to his vested participant account. A participant may also elect to receive his benefit under the Plan as of his early retirement date or disability date if he has reached his early retirement age or qualifies for disability.

2. Summary of Significant Accounting Policies

Basis of Presentation

The financial statements of the Plan have been prepared in accordance with the provisions of Financial Accounting Standards Board ("FASB"), Accounting Standards Codification (the "FASB ASC"), which is the source of authoritative, non-governmental accounting principles generally accepted in the United States of America ("GAAP"). All references to authoritative accounting guidance contained in our disclosures are based on the general accounting topics within the FASB ASC.

Use of Estimates

The preparation of financial statements in conformity with GAAP requires the Plan's management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) in fair value of investments includes the Plan's gains and losses on investments bought and sold as well as held during the year.

**SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020**

Fair Value Measurements

The Plan follows guidance issued by the FASB on fair value measurements, which establishes a framework for measuring fair value, clarifies the definition of fair value within that framework, and expands disclosures about the use of fair value measurements. This guidance applies whenever fair value is the applicable measurement. The three general valuation techniques used to measure fair value are the market approach, cost approach, and income approach.

Employer Contributions Receivable

Employer contributions receivable represent Employer contributions due to the Plan based on hours worked prior to the end of the Plan year. Employer contributions receivable are carried at the reported amount less an estimate made for doubtful receivables based on a review of outstanding amounts. Management determines the allowance for doubtful accounts by regularly evaluating individual Employer receivables and considering an Employer's financial condition, payment history, and current economic conditions. Employer contributions receivable are written off when deemed uncollectible. Employer contributions are due by the 15th of the month following the month hours are worked.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

The Plan permits the payment of Plan expenses from Plan assets. Plan expenses are allocated to participant accounts on a quarterly basis.

Subsequent Events

The Plan has evaluated subsequent events through July 1, 2022, the date the financial statements were available to be issued.

3. Fair Value Measurements

The framework for measuring fair value establishes a fair value hierarchy which prioritizes the inputs to valuation techniques used to measure fair value into Levels 1, 2, and 3. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

Level 1	Inputs to the valuation methodology are unadjusted quoted prices for identical instruments in active markets.
---------	---

SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020

Level 2	Inputs to the valuation methodology to include quoted prices for similar instruments in active markets, quoted prices for identical or similar instruments in inactive markets, inputs other than quoted prices that are observable for the instrument, or inputs that are derived principally from or corroborated by observable market data by correlation or other means.
Level 3	Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The instruments' fair value measurement levels within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used should maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for instruments measured at fair value:

Level 1 investments consist of money market funds, common stocks, and U.S. treasury obligations. These securities are valued at the closing price reported on the active market on which the individual securities are traded.

Level 2 investments consist of corporate, government and agency obligations. These securities are valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings.

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

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

	2021			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Money market funds	\$ 236,353	\$ 236,353	\$ -	\$ -
Common stocks	5,273,288	5,273,288	-	-
Corporate obligations	718,507	-	718,507	-
US Treasury, government and agency obligations	1,672,345	1,145,064	527,281	-
Total investments	<u>\$ 7,900,493</u>	<u>\$ 6,654,705</u>	<u>\$ 1,245,788</u>	<u>\$ -</u>

SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020

	2020			
	Total	Fair Value Measurements		
		Level 1	Level 2	Level 3
Money market funds	\$ 115,587	\$ 115,587	\$ -	\$ -
Common stocks	4,898,063	4,898,063	-	-
Corporate obligations	859,251	-	859,251	-
US Treasury, government and agency obligations	<u>1,694,048</u>	<u>375,270</u>	<u>1,318,778</u>	<u>-</u>
Total investments	<u>\$ 7,566,949</u>	<u>\$ 5,388,920</u>	<u>\$ 2,178,029</u>	<u>\$ -</u>

4. Related Party Transactions

The Plan paid SEIU Local 2000 Health and Welfare Fund (the "Welfare Fund") for shared personnel, rent, and administrative services. The Welfare Fund pays for all such expenses and allocates a portion of those expenses to the Plan, based upon common expense studies performed annually. The expenses allocated to the Plan amounted to \$93,327 and \$92,571 during 2021 and 2020, respectively. The Plan remitted reimbursements of \$92,580 and \$92,796 during 2021 and 2020, respectively, of which \$8,021 and \$6,703 was rent expense, respectively. The amount due to the Welfare Fund at December 31, 2021 and 2020 was \$3,398 and \$2,651, respectively.

5. Plan Termination

Although it has not expressed any intent to do so, the Trustees have the right under the Plan to terminate the Plan subject to the provisions of ERISA.

The Plan may also be terminated as the result of (1) cessation of the contractual obligation of all employers to contribute to the Plan, (2) the withdrawal of every employer from the Plan, or (3) an amendment which provides that participants will receive no years of service under the Plan for service with any employer.

If there is a termination or partial termination of the Plan, the rights of all affected participants to benefits accrued to the date of such event shall be nonforfeitable.

On termination of the Plan, the Trustees will direct the allocation and distribution of Plan assets allocable to participants and other persons entitled to benefits under the Plan. Such allocation and distribution will be made only after payment of, or provision for, all expenses and charges of administration applicable to the Plan, and after appropriate adjustment of the participants' accounts as of the date of termination in the manner described in the above termination paragraph. Each affected participant will receive a distribution equal to the value of his respective participant account on the termination date. Distributions under this section shall be made as soon as administratively feasible after the plan termination date.

**SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020**

6. Tax Status of Plan

The Internal Revenue Service has determined and informed the Plan by a letter dated September 18, 2015, that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan has been amended since receiving the determination letter. However the Plan's Trustees and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believes that the Plan is qualified and the related trust is tax-exempt.

In accordance with GAAP, the Plan's management is required to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the applicable taxing authority. The Plan's management have analyzed the tax positions taken by the Plan and have concluded that as of December 31, 2021 and 2020, there were no uncertain positions taken, or expected to be taken, that would require recognition of a liability or disclosure in the financial statements. The Plan's management believe it is no longer subject to income tax examinations for years prior to 2016. The Plan is subject to routine audits by the Department of Labor, generally for six years after the statutory due date of the annual information return. There are currently no audits in progress for any tax periods.

7. Risks and Uncertainties

Financial instruments that subject the Plan to concentrations of credit and market risk consist primarily of cash, investments, and receivables. The Plan places all of its cash with major financial institutions. The accounts in those institutions are insured by the Federal Deposit Insurance Corporation ("FDIC") up to \$250,000 per participant. At December 31, 2021, all cash balances were fully insured.

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

The majority of receivables are from Employers in the St. Louis area. The Plan generally does not require collateral, but in some cases can require a performance bond.

Plan Concentrations

Three Employers accounted for 95 and 96 percent of Employer contributions for the years ended December 31, 2021 and 2020, respectively, and accounted for 100 percent of Employer contribution receivables at December 31, 2021 and 2020.

**SEIU Local 2000 Pension Fund
Notes to Financial Statements
December 31, 2021 and 2020**

8. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, to Form 5500:

	<u>2021</u>	<u>2020</u>
Net assets available for benefits per the financial statements	\$ 8,000,186	\$ 7,654,573
Less: benefits payable at year end	<u>(247,631)</u>	<u>(263,880)</u>
Net assets available for benefits per the Form 5500	<u>\$ 7,752,555</u>	<u>\$ 7,390,693</u>

The following is a reconciliation of benefits paid to participants per the financial statements for the years ended December 31, to Form 5500:

	<u>2021</u>
Benefits paid per the financial statements	\$ 862,933
Add: benefits payable - current year	247,631
Less: benefits payable - prior year	<u>(263,880)</u>
Total benefits paid per Form 5500	<u>\$ 846,684</u>

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 36-2435849 Plan #001**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Money Market Funds			
	GOLDMAN FINANCIAL SQUARE GOVT-A FD	231,239 shares	\$ 231,239	\$ 231,239
	GOLDMAN FINANCIAL SQUARE TREAS OBLIGATIONS-A FD	5,114 shares	5,114	5,114
	Total Money Market Funds		<u>\$ 236,353</u>	<u>\$ 236,353</u>
	Common Stocks			
	ABBVIE INC COMMON STOCK	1,030 shares, common stock	\$ 90,907	\$ 139,462
	ACCENTURE PLC COMMON STOCK	240 shares, common stock	40,930	99,492
	AKAMAI TECHNOLOGIES COMMON STOCK	920 shares, common stock	90,167	107,677
	ALEXANDER & BALDWIN INC COMMON STOCK	900 shares, common stock	16,353	22,581
	ALPHABET INC CL A COMMON STOCK	75 shares, common stock	53,356	217,278
	AMAZON.COM INC COMMON STOCK	70 shares, common stock	134,002	233,404
	AMERICAN ASSETS TR INC COMMON STOCK	600 shares, common stock	19,198	22,518
	AMERICAN CAMPUS COMMUNITIES COMMON STOCK	340 shares, common stock	11,578	19,479
	AMERICAN HOMES 4 RENT COMMON STOCK	1,000 shares, common stock	22,964	43,610
	AMERICAN TOWER CORPORATION	110 shares, common stock	17,057	32,175
	AMERICOLD REALTY TRUST COMMON STOCK	900 shares, common stock	26,219	29,511
	AMGEN INC COMMON STOCK	360 shares, common stock	73,335	80,989
	APPLE INC COMMON STOCK	1,980 shares, common stock	47,447	351,589
	ARMADA HOFFLER PPTYS COMMON STOCK	1,370 shares, common stock	18,690	20,851
	AUTOZONE INC COMMON STOCK	60 shares, common stock	47,676	125,783
	AVALONBAY COMMUNITIES INC COMMON STOCK	90 shares, common stock	15,043	22,733
	BERRY GLOBAL GROUP INC COMMON STOCK	855 shares, common stock	49,565	63,082
	BROADCOM INC COMMON STOCK	210 shares, common stock	62,950	139,736
	CAMDEN PROPERTY TRUST SHARES BENEFICIAL INTEREST	245 shares, common stock	20,361	43,777
	CBOE GOLBAL MARKETS INC COMMON STOCK	490 shares, common stock	64,616	63,896
			<u>\$ 922,414</u>	<u>\$ 1,879,623</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 36-2435849 Plan # 001**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Fair Value
	Common Stocks (Continued)			
	CDW CORP COMMON STOCK	280 shares, common stock	\$ 36,831	\$ 57,338
	CERNER CORP COMMON STOCK	960 shares, common stock	69,733	89,155
	CISCO SYSTEMS INC COMMON STOCK	993 shares, common stock	48,283	62,926
	CITRIX SYSTEMS INC COMMON STOCK	585 shares, common stock	61,813	55,335
	CLOROX CO COMMON STOCK	243 shares, common stock	41,060	42,369
	COMCAST CORP COMMON STOCK	530 shares, common stock	14,926	26,675
	COOPER COMPANIES INC COMMON STOCK	160 shares, common stock	35,739	67,030
	COSTCO WHOLESALE CORP COMMON STOCK	262 shares, common stock	68,442	148,737
	COUSINS PROPERTIES INC	655 shares, common stock	24,248	26,383
	CROWN CASTLE INTL CORP COMMON STOCK	305 shares, common stock	30,634	63,666
	CTO RLTY GROWTH INC NEW COMMON STOCK	300 shares, common stock	14,470	18,426
	DANAHER CORP COMMON STOCK	240 shares, common stock	12,920	78,962
	DROPBOX INC COMMON STOCK	2589 shares, common stock	61,165	63,534
	ECOLAB INC COMMON STOCK	153 shares, common stock	17,963	35,892
	EQUINIX INC COMMON STOCK	75 shares, common stock	35,999	63,438
	ESSEX PROPERTY TRUST INC COMMON STOCK	55 shares, common stock	13,145	19,373
	EXPEDITORS INTL WASH INC COMMON STOCK	490 shares, common stock	38,988	65,802
	F5 INC COMMON STOCK	460 shares, common stock	64,934	112,567
	FACEBOOK INC COMMON STOCK	320 shares, common stock	57,802	107,632
	FASTENAL CO COMMON STOCK	670 shares, common stock	29,648	42,920
			<u>\$ 778,743</u>	<u>\$ 1,248,160</u>

See independent auditors' report.

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Common Stocks (Continued)			
	GETTY REALTY CORP COMMON STOCK	1000 shares, common stock	\$ 29,350	\$ 32,090
	HEALTHCARE REALTY TRUST INC COMMON STOCK	520 shares, common stock	16,160	16,453
	HOME DEPOT INC COMMON STOCK	242 shares, common stock	32,482	100,432
	ILLINOIS TOOL WORKS INC COMMON STOCK	250 shares, common stock	33,109	61,700
	INVENTRUST PROPERTIES CORP COMMON STOCK	850 shares, common stock	19,609	23,171
	INVITATION HOMES COMMON STOCK	1100 shares, common stock	26,230	49,874
	JOHNSON & JOHNSON COMMON STOCK	250 shares, common stock	29,757	42,768
	KEURIG DR PEPPER INC COMMON STOCK	1755 shares, common stock	57,072	64,689
	KEYSIGHT TECHNOLOGIES INC COMMON STOCK	252 shares, common stock	37,502	52,041
	LABORATORY CORP OF AMER HLDGS COMMON STOCK	194 shares, common stock	52,676	60,957
	LEIDOS HOLDINGS INC COMMON STOCK	722 shares, common stock	71,188	64,186
	LIFE STORAGE INC COMMON STOCK	250 shares, common stock	19,370	38,295
	MARSH & MCLENNAN COMPANIES INC COMMON STOCK	610 shares, common stock	36,910	106,030
	MASTERCARD INC COMMON STOCK	120 shares, common stock	8,807	43,118
	MCCORMICK & CO NON VOTING STOCK	427 shares, common stock	31,170	41,252
	MICROSOFT CORP COMMON STOCK	860 shares, common stock	50,387	289,235
	NIKE INC CLASS B STOCK	350 shares, common stock	29,908	58,335
	ORACLE CORP COMMON STOCK	954 shares, common stock	48,243	83,198
	PLYMOUTH INDUSTRIAL REIT INC COMMON STOCK	1100 shares, common stock	14,345	35,200
	PROLOGIS IN COMMON STOCK	570 shares, common stock	41,422	95,965
			<u>\$ 685,697</u>	<u>\$ 1,358,989</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Common Stocks (Continued)			
	PUBLIC STORAGE COMMON STOCK	114 shares, common stock	\$ 31,297	\$ 42,700
	REPUBLIC SERVICES INC COMMON STOCK	260 shares, common stock	24,723	36,257
	SABRA HEALTH CARE REIT INC COMMON STOCK	1087 shares, common stock	18,249	14,718
	SBA COMMUNICATIONS CORP COMMON STOCK	135 shares, common stock	30,702	52,518
	SITE CTRS CORP COM NEW COMMON STOCK	1007 shares, common stock	16,735	15,941
	SUN COMMUNITIES INC	100 shares, common stock	14,320	20,997
	SYNOPSYS INC COMMON STOCK	154 shares, common stock	34,258	56,749
	TARGET CORP COMMON STOCK	210 shares, common stock	28,212	48,602
	TJX COS INC COMMON STOCK	720 shares, common stock	25,628	54,662
	TRACTOR SUPPLY COMPANY COMMON STOCK	321 shares, common stock	48,207	76,592
	UNION PACIFIC CORP COMMON STOCK	190 shares, common stock	21,868	47,868
	UNITEDHEALTH GROUP INC COMMON STOCK	200 shares, common stock	28,134	100,428
	VENTAS INC COMMON STOCK	600 shares, common stock	22,957	30,673
	VERISK ANALYTICS INC. COMMON STOCK	190 shares, common stock	16,007	43,459
	VERIZON COMMUNICATIONS COMMON STOCK SERIES B	1110 shares, common stock	56,302	57,676
	WALT DISNEY CO COMMON STOCK	270 shares, common stock	37,368	41,820
	WELLTOWER INC COMMON STOCK	523 shares, common stock	34,326	44,856
			<u>489,293</u>	<u>786,516</u>
	Total Common Stock		<u>\$ 2,876,147</u>	<u>\$ 5,273,288</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
	Identity of Issue	Description of Investment			Cost	Current Value
		Face Value	Interest Rate	Due Date		
	Corporate Bonds					
	3M COMPANY	\$ 10,000	2.375%	8/26/2029	\$ 10,180	\$ 10,268
	ALPHABET INC	20,000	1.900%	8/15/2040	18,603	18,271
	AMGEN INC	50,000	2.000%	1/15/2032	49,001	48,481
	AT&T INC	50,000	3.500%	6/1/2041	50,796	51,528
	BALTIMORE GAS & ELECTRIC CO	20,000	2.400%	8/15/2026	20,723	20,521
	BANK OF AMERICA CORP VARIABLE	70,000	2.087%	6/14/2029	70,020	69,567
	BROADCOM INC	40,000	4.300%	11/15/2032	44,551	45,004
	CITIGROUP INC FLOATING	40,000	0.828%	6/9/2027	40,036	40,274
	EMERSON ELECTRIC CO EMERSON ELECTRIC CO	10,000	2.000%	12/21/2028	9,964	9,991
	EMERSON ELECTRIC CO EMERSON ELECTRIC CO	30,000	2.200%	12/21/2031	29,906	29,915
	GOLDMAN SACHS GROUP INC FLOATING	70,000	0.089%	9/10/2027	69,912	70,078
	JPMORGAN CHASE CO FLOATING	70,000	0.000%	9/22/2027	70,159	70,278
	MERCK & CO INC MERCK & CO INC	20,000	2.750%	12/10/2051	19,951	19,894
	MORGAN STANLEY VARIABLE	20,000	0.791%	1/22/2025	20,000	19,800
	MORGAN STANLEY VARIABLE	20,000	1.512%	7/20/2027	20,000	19,696
	ORACLE CORP	60,000	3.950%	3/25/2051	66,730	62,518
	VERIZON COMMUNICATIONS	30,000	2.100%	3/22/2028	30,083	30,081
	VIRGINIA ELECTRIC & POWER CO	10,000	3.150%	1/15/2026	9,786	10,577
	VIRGINIA ELECTRIC & POWER CO	10,000	3.500%	3/15/2027	9,961	10,779
	WELLS FARGO & COMPANY	40,000	2.393%	6/2/2028	40,000	40,680
	WELLS FARGO & COMPANY VARIABLE RATE BOND	20,000	2.164%	2/11/2026	20,059	20,306
	Total Corporate Bonds				\$ 720,421	\$ 718,507

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
	Identity of Issue	Description of Investment				Current Value
		Face Value	Interest Rate	Due Date	Cost	
	Government Obligations					
	FEDERAL FARM CREDIT BANK CALL 11/29/22@100	\$ 50,000	2.350%	11/29/2023	\$ 49,975	\$ 49,804
	FEDERAL FARM CREDIT BANK CALL 11/30/22@100.00	50,000	1.540%	11/30/2026	50,020	50,003
	FHLB CALL 12/24/21@100	30,000	1.150%	12/17/2029	28,956	28,754
	FHLMC POOL #A87957	2,273	5.000%	8/1/2039	2,352	2,552
	FHLMC POOL #G08006	1,631	6.000%	8/1/2034	1,688	1,885
	FHLMC POOL #G08706	15,019	3.500%	5/1/2046	15,859	16,140
	FHLMC POOL #SB8025	32,038	2.000%	11/1/2034	31,662	32,843
	FNMA POOL #817869	57	5.000%	3/1/2022	57	59
	FNMA POOL #AI1915	4,949	4.000%	4/1/2026	5,158	5,209
	FNMA POOL #MA3650	17,508	3.500%	4/1/2029	18,082	18,459
	FNMA POOL #MA3680	36,470	3.500%	6/1/2029	37,458	38,480
	FNMA POOL #555531	1,563	5.500%	6/1/2033	1,575	1,767
	FNMA POOL #735036	5,366	5.500%	12/1/2034	5,326	6,092
	FNMA POOL #748613	1,687	5.500%	1/1/2034	1,716	1,850
	FNMA POOL# MA3864	38,251	2.500%	11/1/2034	38,475	39,628
	FNMA POOL #826305	922	5.000%	7/1/2035	916	1,044
	FNMA POOL #AD8529	7,867	4.500%	8/1/2040	8,013	8,539
					\$ 297,288	\$ 303,108

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
Identity of Issue	Description of Investment			Cost	Current Value	
	Face Value	Interest Rate	Due Date			
Government Obligations						
FNMA POOL #AO4136	\$ 8,297	3.500%	6/1/2042	\$ 8,718	\$ 8,929	
FNMA POOL #AO5472	4,464	3.000%	7/1/2042	4,759	4,816	
FNMA POOL #AS8056	22,305	3.000%	10/1/2046	23,095	23,415	
FNMA POOL #BJ1662	27,348	3.500%	12/1/2047	27,606	28,958	
FNMA POOL #CA0997	18,357	3.500%	1/1/2048	18,369	19,655	
FNMA POOL #MA2642	23,806	3.500%	6/1/2046	25,107	25,437	
FNMA POOL#MA4438	108,071	2.500%	10/1/2051	112,208	110,417	
GNMA POOL #618631	2,307	6.000%	8/15/2034	2,396	2,546	
U.S. TREASURY NOTES	20,000	0.625%	3/31/2027	19,659	19,345	
U.S. TREASURY NOTES	315,000	0.625%	12/31/2027	306,422	301,650	
U.S. TREASURY NOTES	175,000	0.750%	1/31/2028	171,757	168,663	
U.S. TREASURY NOTES	240,000	1.125%	2/29/2028	238,386	236,709	
U.S. TREASURY NOTES	130,000	1.250%	9/30/2028	128,636	128,583	
U.S. TREASURY NOTES	80,000	1.750%	8/15/2041	77,228	77,813	
U.S. TREASURY NOTES	150,000	2.000%	8/15/2025	153,984	154,758	
U.S. TREASURY NOTES	30,000	2.500%	2/28/2026	31,943	31,594	
U.S. TREASURY NOTES	25,000	2.750%	11/15/2023	24,799	25,949	
				1,375,072	1,369,237	
Total Government Obligation				\$ 1,672,360	\$ 1,672,345	
Total Investments				\$ 5,505,281	\$ 7,900,493	

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>c</u>	<u>d</u>	<u>g</u>	<u>h</u>	<u>i</u>
Identity of Party Involved	Description of Investment	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
	<u>Series Transaction by Issue in Excess of 5%</u>					
	Goldman Financial Square Govt-A Fd	\$ 2,878,844	\$ -	\$ 2,878,844	\$ 2,878,844	\$ -
	Goldman Financial Square Govt-A Fd		2,999,610	2,999,610	2,999,610	
	U.S. Treasury Notes .625% due 12/31/2027	737,165		737,165	737,165	
	U.S. Treasury Notes .625% due 12/31/2027		426,561	430,743	426,561	(4,182)
	U.S. Treasury Notes .75% due 1/31/2028	515,409		515,409	515,409	
	U.S. Treasury Notes 2% due 2/15/2050		382,984	370,965	382,984	12,019

See independent auditors' report

SEIU Local 2000 Pension Fund
Schedules of Administrative Expenses
Years Ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Accounting	\$ 20,925	\$ 14,915
Actuary	9,787	8,813
Administrative fees	85,306	85,868
Computer expenses	4,200	4,135
Consulting	1,013	-
Insurance	17,163	16,089
Legal	12,645	8,406
Miscellaneous	5,419	6,405
Rent	8,021	6,703
	<u>\$ 164,479</u>	<u>\$ 151,334</u>

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 36-2435849 Plan #001**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Money Market Funds			
	GOLDMAN FINANCIAL SQUARE GOVT-A FD	231,239 shares	\$ 231,239	\$ 231,239
	GOLDMAN FINANCIAL SQUARE TREAS OBLIGATIONS-A FD	5,114 shares	5,114	5,114
	Total Money Market Funds		<u>\$ 236,353</u>	<u>\$ 236,353</u>
	Common Stocks			
	ABBVIE INC COMMON STOCK	1,030 shares, common stock	\$ 90,907	\$ 139,462
	ACCENTURE PLC COMMON STOCK	240 shares, common stock	40,930	99,492
	AKAMAI TECHNOLOGIES COMMON STOCK	920 shares, common stock	90,167	107,677
	ALEXANDER & BALDWIN INC COMMON STOCK	900 shares, common stock	16,353	22,581
	ALPHABET INC CL A COMMON STOCK	75 shares, common stock	53,356	217,278
	AMAZON.COM INC COMMON STOCK	70 shares, common stock	134,002	233,404
	AMERICAN ASSETS TR INC COMMON STOCK	600 shares, common stock	19,198	22,518
	AMERICAN CAMPUS COMMUNITIES COMMON STOCK	340 shares, common stock	11,578	19,479
	AMERICAN HOMES 4 RENT COMMON STOCK	1,000 shares, common stock	22,964	43,610
	AMERICAN TOWER CORPORATION	110 shares, common stock	17,057	32,175
	AMERICOLD REALTY TRUST COMMON STOCK	900 shares, common stock	26,219	29,511
	AMGEN INC COMMON STOCK	360 shares, common stock	73,335	80,989
	APPLE INC COMMON STOCK	1,980 shares, common stock	47,447	351,589
	ARMADA HOFFLER PPTYS COMMON STOCK	1,370 shares, common stock	18,690	20,851
	AUTOZONE INC COMMON STOCK	60 shares, common stock	47,676	125,783
	AVALONBAY COMMUNITIES INC COMMON STOCK	90 shares, common stock	15,043	22,733
	BERRY GLOBAL GROUP INC COMMON STOCK	855 shares, common stock	49,565	63,082
	BROADCOM INC COMMON STOCK	210 shares, common stock	62,950	139,736
	CAMDEN PROPERTY TRUST SHARES BENEFICIAL INTEREST	245 shares, common stock	20,361	43,777
	CBOE GOLBAL MARKETS INC COMMON STOCK	490 shares, common stock	64,616	63,896
			<u>\$ 922,414</u>	<u>\$ 1,879,623</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 36-2435849 Plan # 001**

<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
Identity of Issue	Description of Investment	Cost	Fair Value
Common Stocks (Continued)			
CDW CORP COMMON STOCK	280 shares, common stock	\$ 36,831	\$ 57,338
CERNER CORP COMMON STOCK	960 shares, common stock	69,733	89,155
CISCO SYSTEMS INC COMMON STOCK	993 shares, common stock	48,283	62,926
CITRIX SYSTEMS INC COMMON STOCK	585 shares, common stock	61,813	55,335
CLOROX CO COMMON STOCK	243 shares, common stock	41,060	42,369
COMCAST CORP COMMON STOCK	530 shares, common stock	14,926	26,675
COOPER COMPANIES INC COMMON STOCK	160 shares, common stock	35,739	67,030
COSTCO WHOLESALE CORP COMMON STOCK	262 shares, common stock	68,442	148,737
COUSINS PROPERTIES INC	655 shares, common stock	24,248	26,383
CROWN CASTLE INTL CORP COMMON STOCK	305 shares, common stock	30,634	63,666
CTO RLTY GROWTH INC NEW COMMON STOCK	300 shares, common stock	14,470	18,426
DANAHER CORP COMMON STOCK	240 shares, common stock	12,920	78,962
DROPBOX INC COMMON STOCK	2589 shares, common stock	61,165	63,534
ECOLAB INC COMMON STOCK	153 shares, common stock	17,963	35,892
EQUINIX INC COMMON STOCK	75 shares, common stock	35,999	63,438
ESSEX PROPERTY TRUST INC COMMON STOCK	55 shares, common stock	13,145	19,373
EXPEDITORS INTL WASH INC COMMON STOCK	490 shares, common stock	38,988	65,802
F5 INC COMMON STOCK	460 shares, common stock	64,934	112,567
FACEBOOK INC COMMON STOCK	320 shares, common stock	57,802	107,632
FASTENAL CO COMMON STOCK	670 shares, common stock	29,648	42,920
		\$ 778,743	\$ 1,248,160

See independent auditors' report.

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Common Stocks (Continued)			
	GETTY REALTY CORP COMMON STOCK	1000 shares, common stock	\$ 29,350	\$ 32,090
	HEALTHCARE REALTY TRUST INC COMMON STOCK	520 shares, common stock	16,160	16,453
	HOME DEPOT INC COMMON STOCK	242 shares, common stock	32,482	100,432
	ILLINOIS TOOL WORKS INC COMMON STOCK	250 shares, common stock	33,109	61,700
	INVENTRUST PROPERTIES CORP COMMON STOCK	850 shares, common stock	19,609	23,171
	INVITATION HOMES COMMON STOCK	1100 shares, common stock	26,230	49,874
	JOHNSON & JOHNSON COMMON STOCK	250 shares, common stock	29,757	42,768
	KEURIG DR PEPPER INC COMMON STOCK	1755 shares, common stock	57,072	64,689
	KEYSIGHT TECHNOLOGIES INC COMMON STOCK	252 shares, common stock	37,502	52,041
	LABORATORY CORP OF AMER HLDGS COMMON STOCK	194 shares, common stock	52,676	60,957
	LEIDOS HOLDINGS INC COMMON STOCK	722 shares, common stock	71,188	64,186
	LIFE STORAGE INC COMMON STOCK	250 shares, common stock	19,370	38,295
	MARSH & MCLENNAN COMPANIES INC COMMON STOCK	610 shares, common stock	36,910	106,030
	MASTERCARD INC COMMON STOCK	120 shares, common stock	8,807	43,118
	MCCORMICK & CO NON VOTING STOCK	427 shares, common stock	31,170	41,252
	MICROSOFT CORP COMMON STOCK	860 shares, common stock	50,387	289,235
	NIKE INC CLASS B STOCK	350 shares, common stock	29,908	58,335
	ORACLE CORP COMMON STOCK	954 shares, common stock	48,243	83,198
	PLYMOUTH INDUSTRIAL REIT INC COMMON STOCK	1100 shares, common stock	14,345	35,200
	PROLOGIS IN COMMON STOCK	570 shares, common stock	41,422	95,965
			<u>\$ 685,697</u>	<u>\$ 1,358,989</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>(c)</u>	<u>(d)</u>	<u>(e)</u>
	Identity of Issue	Description of Investment	Cost	Current Value
	Common Stocks (Continued)			
	PUBLIC STORAGE COMMON STOCK	114 shares, common stock	\$ 31,297	\$ 42,700
	REPUBLIC SERVICES INC COMMON STOCK	260 shares, common stock	24,723	36,257
	SABRA HEALTH CARE REIT INC COMMON STOCK	1087 shares, common stock	18,249	14,718
	SBA COMMUNICATIONS CORP COMMON STOCK	135 shares, common stock	30,702	52,518
	SITE CTRS CORP COM NEW COMMON STOCK	1007 shares, common stock	16,735	15,941
	SUN COMMUNITIES INC	100 shares, common stock	14,320	20,997
	SYNOPSYS INC COMMON STOCK	154 shares, common stock	34,258	56,749
	TARGET CORP COMMON STOCK	210 shares, common stock	28,212	48,602
	TJX COS INC COMMON STOCK	720 shares, common stock	25,628	54,662
	TRACTOR SUPPLY COMPANY COMMON STOCK	321 shares, common stock	48,207	76,592
	UNION PACIFIC CORP COMMON STOCK	190 shares, common stock	21,868	47,868
	UNITEDHEALTH GROUP INC COMMON STOCK	200 shares, common stock	28,134	100,428
	VENTAS INC COMMON STOCK	600 shares, common stock	22,957	30,673
	VERISK ANALYTICS INC. COMMON STOCK	190 shares, common stock	16,007	43,459
	VERIZON COMMUNICATIONS COMMON STOCK SERIES B	1110 shares, common stock	56,302	57,676
	WALT DISNEY CO COMMON STOCK	270 shares, common stock	37,368	41,820
	WELLTOWER INC COMMON STOCK	523 shares, common stock	34,326	44,856
			<u>489,293</u>	<u>786,516</u>
	Total Common Stock		<u>\$ 2,876,147</u>	<u>\$ 5,273,288</u>

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
		Description of Investment			Cost	Current Value
	Identity of Issue	Face Value	Interest Rate	Due Date		
Corporate Bonds						
	3M COMPANY	\$ 10,000	2.375%	8/26/2029	\$ 10,180	\$ 10,268
	ALPHABET INC	20,000	1.900%	8/15/2040	18,603	18,271
	AMGEN INC	50,000	2.000%	1/15/2032	49,001	48,481
	AT&T INC	50,000	3.500%	6/1/2041	50,796	51,528
	BALTIMORE GAS & ELECTRIC CO	20,000	2.400%	8/15/2026	20,723	20,521
	BANK OF AMERICA CORP VARIABLE	70,000	2.087%	6/14/2029	70,020	69,567
	BROADCOM INC	40,000	4.300%	11/15/2032	44,551	45,004
	CITIGROUP INC FLOATING	40,000	0.828%	6/9/2027	40,036	40,274
	EMERSON ELECTRIC CO EMERSON ELECTRIC CO	10,000	2.000%	12/21/2028	9,964	9,991
	EMERSON ELECTRIC CO EMERSON ELECTRIC CO	30,000	2.200%	12/21/2031	29,906	29,915
	GOLDMAN SACHS GROUP INC FLOATING	70,000	0.089%	9/10/2027	69,912	70,078
	JPMORGAN CHASE CO FLOATING	70,000	0.000%	9/22/2027	70,159	70,278
	MERCK & CO INC MERCK & CO INC	20,000	2.750%	12/10/2051	19,951	19,894
	MORGAN STANLEY VARIABLE	20,000	0.791%	1/22/2025	20,000	19,800
	MORGAN STANLEY VARIABLE	20,000	1.512%	7/20/2027	20,000	19,696
	ORACLE CORP	60,000	3.950%	3/25/2051	66,730	62,518
	VERIZON COMMUNICATIONS	30,000	2.100%	3/22/2028	30,083	30,081
	VIRGINIA ELECTRIC & POWER CO	10,000	3.150%	1/15/2026	9,786	10,577
	VIRGINIA ELECTRIC & POWER CO	10,000	3.500%	3/15/2027	9,961	10,779
	WELLS FARGO & COMPANY	40,000	2.393%	6/2/2028	40,000	40,680
	WELLS FARGO & COMPANY VARIABLE RATE BOND	20,000	2.164%	2/11/2026	20,059	20,306
	Total Corporate Bonds				\$ 720,421	\$ 718,507

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
	Identity of Issue	Description of Investment				Current Value
		Face Value	Interest Rate	Due Date	Cost	
	Government Obligations					
	FEDERAL FARM CREDIT BANK CALL 11/29/22@100	\$ 50,000	2.350%	11/29/2023	\$ 49,975	\$ 49,804
	FEDERAL FARM CREDIT BANK CALL 11/30/22@100.00	50,000	1.540%	11/30/2026	50,020	50,003
	FHLB CALL 12/24/21@100	30,000	1.150%	12/17/2029	28,956	28,754
	FHLMC POOL #A87957	2,273	5.000%	8/1/2039	2,352	2,552
	FHLMC POOL #G08006	1,631	6.000%	8/1/2034	1,688	1,885
	FHLMC POOL #G08706	15,019	3.500%	5/1/2046	15,859	16,140
	FHLMC POOL #SB8025	32,038	2.000%	11/1/2034	31,662	32,843
	FNMA POOL #817869	57	5.000%	3/1/2022	57	59
	FNMA POOL #AI1915	4,949	4.000%	4/1/2026	5,158	5,209
	FNMA POOL #MA3650	17,508	3.500%	4/1/2029	18,082	18,459
	FNMA POOL #MA3680	36,470	3.500%	6/1/2029	37,458	38,480
	FNMA POOL #555531	1,563	5.500%	6/1/2033	1,575	1,767
	FNMA POOL #735036	5,366	5.500%	12/1/2034	5,326	6,092
	FNMA POOL #748613	1,687	5.500%	1/1/2034	1,716	1,850
	FNMA POOL# MA3864	38,251	2.500%	11/1/2034	38,475	39,628
	FNMA POOL #826305	922	5.000%	7/1/2035	916	1,044
	FNMA POOL #AD8529	7,867	4.500%	8/1/2040	8,013	8,539
					\$ 297,288	\$ 303,108

See independent auditors' report

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2021
EIN 43-1598128 Plan #501**

(a)	(b)	(c)			(d)	(e)
	Identity of Issue	Description of Investment			Cost	Current Value
		Face Value	Interest Rate	Due Date		
	Government Obligations					
	FNMA POOL #AO4136	\$ 8,297	3.500%	6/1/2042	\$ 8,718	\$ 8,929
	FNMA POOL #AO5472	4,464	3.000%	7/1/2042	4,759	4,816
	FNMA POOL #AS8056	22,305	3.000%	10/1/2046	23,095	23,415
	FNMA POOL #BJ1662	27,348	3.500%	12/1/2047	27,606	28,958
	FNMA POOL #CA0997	18,357	3.500%	1/1/2048	18,369	19,655
	FNMA POOL #MA2642	23,806	3.500%	6/1/2046	25,107	25,437
	FNMA POOL#MA4438	108,071	2.500%	10/1/2051	112,208	110,417
	GNMA POOL #618631	2,307	6.000%	8/15/2034	2,396	2,546
	U.S. TREASURY NOTES	20,000	0.625%	3/31/2027	19,659	19,345
	U.S. TREASURY NOTES	315,000	0.625%	12/31/2027	306,422	301,650
	U.S. TREASURY NOTES	175,000	0.750%	1/31/2028	171,757	168,663
	U.S. TREASURY NOTES	240,000	1.125%	2/29/2028	238,386	236,709
	U.S. TREASURY NOTES	130,000	1.250%	9/30/2028	128,636	128,583
	U.S. TREASURY NOTES	80,000	1.750%	8/15/2041	77,228	77,813
	U.S. TREASURY NOTES	150,000	2.000%	8/15/2025	153,984	154,758
	U.S. TREASURY NOTES	30,000	2.500%	2/28/2026	31,943	31,594
	U.S. TREASURY NOTES	25,000	2.750%	11/15/2023	24,799	25,949
					1,375,072	1,369,237
	Total Government Obligation				\$ 1,672,360	\$ 1,672,345
	Total Investments				\$ 5,505,281	\$ 7,900,493

See independent auditors' report

For Paperwork Reduction Act Notice, see the Instructions for Form 5500. Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor**3b** Administrator's EIN**3c** Administrator's telephone number**4** If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:**a** Sponsor's name**c** Plan Name**4b** EIN**4d** PN**5** Total number of participants at the beginning of the plan year**5** 1,195**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)** 259**a (2)** Total number of active participants at the end of the plan year**6a(2)** 165**b** Retired or separated participants receiving benefits**6b****c** Other retired or separated participants entitled to future benefits**6c** 969**d** Subtotal. Add lines 6a(2), 6b, and 6c**6d** 1,134**e** Deceased participants whose beneficiaries are receiving or are entitled to receive benefits**6e****f** Total. Add lines 6d and 6e**6f** 1,134**g** Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)**6g** 1,134**h** Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested**6h** 12**7** Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)**7** 4**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2C**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:**9a** Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

- (1) ☒ **R** (Retirement Plan Information)
 (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
 (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

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

**Service Employees International Union
Local 2000 Pension Fund
Schedule H, Line 4j - Schedule of Reportable Transactions
Year Ended December 31, 2021
EIN 43-1598128 Plan #501**

<u>(a)</u>	<u>(b)</u>	<u>c</u>	<u>d</u>	<u>g</u>	<u>h</u>	<u>i</u>
Identity of Party Involved	Description of Investment	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain or (Loss)
<u>Series Transaction by Issue in Excess of 5%</u>						
	Goldman Financial Square Govt-A Fd	\$ 2,878,844	\$ -	\$ 2,878,844	\$ 2,878,844	\$ -
	Goldman Financial Square Govt-A Fd		2,999,610	2,999,610	2,999,610	
	U.S. Treasury Notes .625% due 12/31/2027	737,165		737,165	737,165	
	U.S. Treasury Notes .625% due 12/31/2027		426,561	430,743	426,561	(4,182)
	U.S. Treasury Notes .75% due 1/31/2028	515,409		515,409	515,409	
	U.S. Treasury Notes 2% due 2/15/2050		382,984	370,965	382,984	12,019

See independent auditors' report