

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
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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>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W 1158 ANNUITY PLAN AND TRUST</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 2px;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; padding: 2px; text-align: center;"><u>004</u></td> </tr> <tr> <td colspan="2" style="padding: 2px;">1c Effective date of plan <u>01/01/2002</u></td> </tr> <tr> <td colspan="2" style="padding: 2px;">2b Employer Identification Number (EIN) <u>22-0886457</u></td> </tr> <tr> <td colspan="2" style="padding: 2px;">2c Plan Sponsor's telephone number <u>973-344-1800</u></td> </tr> <tr> <td colspan="2" style="padding: 2px;">2d Business code (see instructions) <u>813930</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>004</u>	1c Effective date of plan <u>01/01/2002</u>		2b Employer Identification Number (EIN) <u>22-0886457</u>		2c Plan Sponsor's telephone number <u>973-344-1800</u>		2d Business code (see instructions) <u>813930</u>	
1b Three-digit plan number (PN) ▶	<u>004</u>										
1c Effective date of plan <u>01/01/2002</u>											
2b Employer Identification Number (EIN) <u>22-0886457</u>											
2c Plan Sponsor's telephone number <u>973-344-1800</u>											
2d Business code (see instructions) <u>813930</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>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158</u> <u>1149 BLOONFIELD AVENUE</u> <u>CLIFTON, NJ 07012</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.	10/10/2022	GEORGE SERIO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2022	GEORGE SERIO
	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.

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	645
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)	645
a(2) Total number of active participants at the end of the plan year		6a(2)	627
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	627
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	627
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	627
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	0
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2H 2J			
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) ☒ <u>1</u> 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021	
A Name of plan PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ▶ 004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457

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

(a) Name of insurance carrier
VOYA LIFE INSURANCE AND ANNUITY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	874041	9	01/01/2021	12/31/2021

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

(a) Total amount of commissions paid 1725	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
SBHU LIFE AGENCY INC
SUITE 300
700 RED BROOK BLVD
OWINGS MILLS, MD 21117

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1725			3

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

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

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

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

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

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

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

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

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

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
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(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	68510
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	676491

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
 (3) ☒ other (specify) ▶ **INDIVIDUAL GROUP ANNUITY**

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
 (3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year	7b	69356
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c	Additions: (1) Contributions deposited during the year	7c(1)	2364	
	(2) Dividends and credits.....	7c(2)		
	(3) Interest credited during the year.....	7c(3)	704	
	(4) Transferred from separate account.....	7c(4)		
	(5) Other (specify below)..... ▶	7c(5)		

(6) Total additions	7c(6)	3068
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d Total of balance and additions (add lines 7b and 7c(6))	7d	72424
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e Deductions:			
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
(2) Administration charge made by carrier.....	7e(2)		
(3) Transferred to separate account.....	7e(3)	3914	
(4) Other (specify below)..... ▶	7e(4)		

(5) Total deductions	7e(5)	3914
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f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	68510
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

SCHEDULE 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 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

MORGAN STANLEY

34 WEST 52ND STREET
NEW YORK, NY 10019

26-4310632

(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?
27	BROKER	67333	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

ROSENBERG RICH BAKER BERMAN & CO.,

265 DAVIDSON AVE
SUITE 210
SOMERSET, NJ 08873

22-3271252

(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	AUDITORS	19000	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

E.H. THOMSON & CO., INC.

800 THE PLAZA
SEA GIRT, NJ 08750

22-2602083

(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 14 15	ACTUARY RECOR DKEEPER	34640	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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ►	004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

Part I	Asset and Liability Statement
---------------	--------------------------------------

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	73138	161868
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	16181	15892
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	216488	341419
(2) U.S. Government securities	1c(2)	1324091	1248148
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	1558582	1353038
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	3187070	3645569
(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)	844440	1086093
(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)	637279	1429909
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	7857269	9281936

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	21431	38798
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	21431	38798

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	7835838	9243138
---	-----------	---------	---------

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	1082251	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1082251
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	28	
(B) U.S. Government securities	2b(1)(B)	15959	
(C) Corporate debt instruments	2b(1)(C)	42823	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other	2b(1)(F)	2995	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		61805
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock	2b(2)(B)	85449	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	12475	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		97924
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	4244908	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	3954085	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		290823
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	200889	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		200889

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		241726
(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)		76534
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2051952
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	522887	
(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)		522887
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)	53810	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	67455	
(4) Other.....	2i(4)	500	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		121765
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		644652
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		1407300
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: ROSENBERG RICH BAKER BERMAN & CO.

(2) EIN: 22-3271252

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		500000
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.			
4n			
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.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ► 004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457

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): 22-2021330	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
-----------------	-------------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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 _____

IBEW Local 1158 Annuity Plan
Financial Statements
December 31, 2021 and 2020

**IBEW Local 1158 Annuity Plan
Index to the Financial Statements
December 31, 2021 and 2020**

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ROSENBERG RICH BAKER BERMAN & COMPANY

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111 Dunnell Road, Suite 100 • Maplewood, NJ 07040 • PHONE 973-763-6363 • FAX 973-763-4430

Independent Auditor's Report

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

Opinion

We have audited the accompanying financial statements of IBEW Local 1158 Annuity 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 plan benefits as of December 31, 2021 and 2020, and the related statements of changes in net assets available for plan 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 plan benefits of IBEW Local 1158 Annuity Plan as of December 31, 2021 and 2020, and the changes in its net assets available for plan 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 Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of IBEW Local 1158 Annuity Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about IBEW Local 1158 Annuity 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.

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 IBEW Local 1158 Annuity 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 IBEW Local 1158 Annuity Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Assets Held for Investment Purposes and Schedule of Reportable Transactions are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information are 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.



ROSENBERG RICH BAKER BERMAN & COMPANY

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

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

Rosenberg Rich Baker Berman & Company

Somerset, New Jersey
September 30, 2022

IBEW Local 1158 Annuity Plan
Statements of Net Assets Available for Benefits

	December 31,	
	<u>2021</u>	<u>2020</u>
Assets		
Investments at fair value:		
Short-term investments	\$ 341,419	\$ 216,488
Mutual funds	1,429,909	637,279
U.S. government securities	1,248,148	1,324,091
Corporate bonds	1,160,718	1,375,528
Asset backed securities	192,320	183,054
Common stock	3,645,569	3,187,070
Common collective trust	<u>1,086,093</u>	<u>844,440</u>
Total Investments	9,104,176	7,767,950
Receivables:		
Employer contributions receivable	161,868	73,138
Accrued investment income receivable	<u>15,892</u>	<u>16,181</u>
Total Receivables	<u>177,760</u>	<u>89,319</u>
Total Assets	<u>9,281,936</u>	<u>7,857,269</u>
Liabilities and Net Assets Available for Benefits		
Accounts payable and accrued expenses	18,850	19,200
Due to broker	<u>19,948</u>	<u>2,231</u>
Total Liabilities	<u>38,798</u>	<u>21,431</u>
Net Assets Available for Benefits	<u>\$ 9,243,138</u>	<u>\$ 7,835,838</u>

IBEW Local 1158 Annuity Plan
Statements of Changes in Net Assets Available for Benefits

	For the Years Ended December 31,	
	<u>2021</u>	<u>2020</u>
Additions to Net Assets Attributed to:		
Investment income:		
Net appreciation in fair value of investments	\$ 809,972	\$ 296,740
Interest and dividends	<u>159,729</u>	<u>147,361</u>
Total investment income	969,701	444,101
Investment expenses	<u>(67,455)</u>	<u>(52,055)</u>
Net investment income	902,246	392,046
Employer contributions	<u>1,082,251</u>	<u>1,017,003</u>
Total Additions	<u>1,984,497</u>	<u>1,409,049</u>
Deductions from Net Assets Attributed to:		
Benefit Payments:		
Benefits paid to participants	<u>522,887</u>	<u>227,852</u>
Administrative Expenses:		
Auditing fees	19,000	16,500
Insurance expense	500	500
Legal fees	170	-
Plan administration fees	<u>34,640</u>	<u>28,720</u>
Total Administrative Expenses	<u>54,310</u>	<u>45,720</u>
Total Deductions	<u>577,197</u>	<u>273,572</u>
Net Increase in Net Assets Available for Benefits	1,407,300	1,135,477
Net Assets Available for Benefits - Beginning of Years	<u>7,835,838</u>	<u>6,700,361</u>
Net Assets Available for Benefits - End of Years	<u>\$ 9,243,138</u>	<u>\$ 7,835,838</u>

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

1. Description of Plan:

The following brief description of the IBEW Local 1158 Annuity Plan ("the Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined contribution plan administered jointly by IBEW Local 1158 and the Passaic Valley Sewerage Commissioners (PVSC). It was established for the benefit of eligible IBEW Local 1158 employees as of January 1, 1999. The PVSC adopted the Plan on behalf of their employees effective January 1, 2002. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Benefits

The Plan provides retirement benefits to employees whose employment is subject to a collective bargaining agreement with the IBEW Local 1158 Union and to other non-union employees who are employed by the PVSC. The Plan also provides retirement benefits to employees of IBEW Local 1158. IBEW Local 1158 represents a separate employer adopting the Plan.

Eligibility

A covered employee is eligible to participate in the Plan upon commencement of one hour of employment with an adopting employer and attaining age twenty one, provided that they are not a non-resident alien.

Contributions

The PVSC provides benefits to their union and non-union employees pursuant to a collective bargaining agreement. The PVSC contributed ninety-five (\$0.95) and eighty-five (0.85) cents per hour, up to a maximum of thirty-eight (\$38) and thirty-four (\$34) dollars per week during 2021 and 2020, respectively.

For the years ended December 31, 2021 and 2020, contributions on behalf of PVSC covered employees totaled \$1,051,767 and \$984,762, respectively. No employee contributions are required.

The IBEW Local 1158 provides benefits to their employees based on a discretionary formula determined each year. The IBEW Local 1158 contributed \$2.00 per hour up to a maximum of forty hours per week (a maximum contribution of \$4,160 per year) for each covered employee in 2021 and 2020.

For the years ended December 31, 2021 and 2020, contributions on behalf of IBEW Local 1158 covered employees totaled \$30,484 and \$32,241, respectively. No employee contributions are allowed or required.

Retirement

Participants will be eligible to retire and receive distribution of benefits on the later of the participant's sixty-fifth birthday or the fifth anniversary of commencement in the Plan. If a participant works past their normal retirement date, distributions will not begin until the participant actually retires. Distributions can be received by employees in the IBEW 1158 Staff Plan at age 59 1/2 related to salary deferral contributions or from qualified nonelective or qualified matching contributions. Participants of the Passaic Valley Sewerage Commission are only allowed to receive distributions upon separation of employment.

Participant Accounts

For participants employed by PVSC all allocations made on a participant's behalf are credited to a separate bookkeeping account established in the name of the participant. At the end of each Plan year, allocations are made to participant accounts and interest is credited based on the net earnings experienced by the Trust Fund for the Plan year.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

1. Description of Plan (continued):

Participant Accounts (continued)

IBEW Local 1158 participants may choose to invest contributions made on their behalf into 18 mutual funds of varying type and risk. The participants are allowed to change their choices or transfer between funds through automated systems.

Vesting and Forfeitures

All participants are immediately 100% vested in their individual participant accounts and no forfeitures occur. An eligible participant may receive their distribution upon normal retirement, termination of employment, disability, or death.

2. Summary of Significant Accounting Policies:

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. 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 (see Note 4, Fair Value Measurements). 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) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Contributions Receivable

Employer contributions receivable are accrued for contribution revenue earned but not collected by year-end.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Subsequent Events Evaluation Date

The Plan evaluated the events and transactions subsequent to the date of its Statements of Net Assets Available for Plan Benefits, in accordance with FASB ASC 855-10-50, "Subsequent Events" through September 30, 2022, which is the date the financial statements were available to be issued.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

3. Investments:

During the years ended December 31, 2021 and 2020, the Plan's investments (including investments bought, sold, as well as held during the years) appreciated in fair value by \$809,972 and \$296,740, respectively.

4. Fair Value Measurements:

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, "Fair Value Measurements and Disclosures", establishes a framework for measuring fair value. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

- (1) Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- (2) Level 2 - Inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.
- (3) Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020.

Short-term investments, mutual funds and common stock: Valued at the closing price reported in the active market in which the individual security is traded based on information obtained from independent quotation services (Level 1).

U.S. government securities: U.S. Treasury Bonds are valued at the closing price reported in the active market in which the securities are traded based on information obtained from independent quotation services (Level 1). Other government securities and agency bonds are valued using pricing models maximizing the use of observable inputs for similar securities (Level 2).

Corporate bonds and asset-backed securities: Valued based on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar securities, the security is valued under an approach that maximizes observable inputs, such as current yields of similar instruments, broker/dealer quotes, bids and benchmark securities (Level 2).

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

4. Fair Value Measurements (continued):

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

Assets at Fair Value as of December 31, 2021				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 341,419	\$ 341,419	\$ -	\$ -
Mutual funds	1,429,909	1,429,909	-	-
U.S. government securities	1,248,148	1,017,857	230,291	-
Corporate bonds	1,160,718	-	1,160,718	-
Asset backed securities	192,320	-	192,320	-
Common stock	3,645,569	3,645,569	-	-
Total investments at fair value	8,018,083	6,434,754	1,583,329	-
Investments measured at NAV *	1,086,093	-	-	-
Total Investments	<u>\$ 9,104,176</u>	<u>\$ 6,434,754</u>	<u>\$ 1,583,329</u>	<u>\$ -</u>

Assets at Fair Value as of December 31, 2020				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 216,488	\$ 216,488	\$ -	\$ -
Mutual funds	637,279	637,279	-	-
U.S. government securities	1,324,091	1,052,196	271,895	-
Corporate bonds	1,375,528	-	1,375,528	-
Asset backed securities	183,054	-	183,054	-
Common stock	3,187,070	3,187,070	-	-
Total investments at fair value	6,923,510	5,093,033	1,830,477	-
Investments measured at NAV *	844,440	-	-	-
Total investments at fair value	<u>\$ 7,767,950</u>	<u>\$ 5,093,033</u>	<u>\$ 1,830,477</u>	<u>\$ -</u>

(*) In accordance with Subtopic 820-15, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

The following table sets forth additional disclosures of Plan's investments whose fair value is estimated using net asset value per share (or its equivalent) as of December 31, 2021 and 2020:

December 31, 2021				
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common Collective Trust:				
Collective S&P 500 Index Fund Non-Lending	<u>\$ 1,086,093</u>	None	Daily	30 Days
Total Common Collective Trust	<u>\$ 1,086,093</u>			

December 31, 2020				
	Fair Value	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common Collective Trust:				
Collective S&P 500 Index Fund Non-Lending	<u>\$ 844,440</u>	None	Daily	30 Days
Total Common Collective Trust	<u>\$ 844,440</u>			

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

4. Fair Value Measurements (continued):

Changes in Fair Value Levels - The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

We evaluate the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2021 and 2020, there were no significant transfers in or out of levels 1, 2, or 3.

5. Nonparticipant-Directed Investments:

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant-directed investments is as follows:

	<u>December 31,</u>	
	<u>2021</u>	<u>2020</u>
Net Assets:		
Investments at fair value:		
Short-Term Investments	\$ 341,419	\$ 216,488
U.S. Government Securities	1,248,148	1,324,091
Corporate Bonds	1,160,718	1,375,528
Asset Backed Securities	192,320	183,054
Common Stock	3,645,569	3,187,070
Common Collective Trust	1,086,093	844,440
Mutual Funds	<u>684,908</u>	<u>-</u>
Total investments at fair value	8,359,175	7,130,671
Receivables	177,760	89,319
Liabilities	<u>(38,798)</u>	<u>(21,431)</u>
	<u>\$ 8,498,137</u>	<u>\$ 7,198,559</u>
	<u>Years Ended December 31,</u>	
	<u>2021</u>	<u>2020</u>
Changes in Net Assets:		
Contributions	\$ 1,051,767	\$ 984,762
Interest and Dividends	159,025	147,361
Net Appreciation	733,438	296,740
Investment Expenses	(67,455)	(52,055)
Administrative Expenses	(54,310)	(45,720)
Benefits Paid to Participants	<u>(522,887)</u>	<u>(227,853)</u>
	<u>\$ 1,299,578</u>	<u>\$ 1,103,235</u>

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2021 and 2020

6. Plan Termination:

In the event of a termination or partial termination of the Plan, or in the event of complete discontinuance of contributions, each employee shall have a non-forfeitable right to the assets remaining after providing for the expenses of the Plan and for the payment of any accumulated share. Each participant shall receive that part of the total remaining assets in the same ratio as his or her accumulated share bears to the aggregate amount of the accumulated shares of all participants.

7. Parties-in-Interest:

The Plan's investments are held at Morgan Stanley, VOYA and Northern Trust, thus these entities are parties-in-interest. Also, certain other professionals, officers and employees of the Plan perform administrative functions and are compensated by the Plan. Such transactions are not deemed prohibited party-in-interest transactions because they are covered by statutory or administrative exemptions from the IRS and ERISA rules on prohibited transactions.

8. Tax Status:

The Plan obtained its latest determination letter on November 21, 2011, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan has been amended since receiving the determination letter. However, the Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. Risks and Uncertainties:

Investment Risk: 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 the statement of net assets available for benefits.

Concentrations: As of December 31, 2021 and 2020, there were only two contributing employers. There exists the possibility that contributions could be reduced significantly due to changing circumstances and conditions, which would have a significant negative impact on the Fund.

IBEW Local 1158 Annuity Plan
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
December 31, 2021

2021 Form 5500
 EIN: 22-0886457
 Plan #004

(a)	(b) Identity of issuer, borrower, lessor, or similar part	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	American Funds - Balanced	Mutual Fund	**	\$ 5,608
	American Funds - Fundamental Investors	Mutual Fund	**	9,035
	BlackRock Equity Dividend Fund	Mutual Fund	**	78,041
	Carillon Eagle Sm Cap Grw R3	Mutual Fund	**	8,697
	Dodge & Cox International Stock Fund	Mutual Fund	**	1,909
	Fidelity Advisors New Insights Fund	Mutual Fund	**	170,746
	Invesco Small Cap Equity Fund	Mutual Fund	**	14,042
*	VOYA Fixed Account	Mutual Fund	**	68,510
*	VOYA Government Money Market Port I	Mutual Fund	**	231
*	VOYA HighYield Portfolio	Mutual Fund	**	4,690
*	VOYA Index Solution 2025 Portfolio	Mutual Fund	**	45,088
*	VOYA Index Solution 2035 Portfolio	Mutual Fund	**	24,831
*	VOYA Index Solution 2040 Portfolio	Mutual Fund	**	11,707
*	VOYA Index Solution 2050 Portfolio	Mutual Fund	**	7,021
*	VOYA Index Solution Inc P Adv	Mutual Fund	**	3,603
*	VOYA Intermediate Bond Portfolio	Mutual Fund	**	119,308
*	VOYA MidCap Opportunities Portfolio	Mutual Fund	**	115,483
*	VOYA Russell MidCap Index Portfolio	Mutual Fund	**	56,450
*	Northern Trust Collective S&P 500 Index Fund Non-Lending	Common Collective Trust	448,552	1,086,093
*	Morgan Stanley Account #552-112030-644	See attached details	6,290,174	7,273,083
				<u>\$ 9,104,176</u>

* Indicates a party-in-interest as defined in the Employee Security Act of 1974.

** Cost information is not presented for participant-directed investments.

Activity

ACTIVITY DETAILS - CONTRIBUTIONS, DISTRIBUTIONS AND OTHER DEPOSITS (CONTINUED)

Activity Date	Account Number	Activity Type	Description	Quantity/ Face Value	Amount
Distributions (Continued)					
Rollovers (Continued)					
07/30/21	552-038346-644	Rollovers - Cash	BRANCH CHECK		(8,066.20)
Rollover Total					\$(230,393.65)
Total Distributions					\$(289,309.93)
Other Deposits					
Fees Received					
03/05/21	552-038346-644	Fees Received	FUNDS RECEIVED		\$94.13
Fees Received Total					\$94.13
Total Other Deposits					\$94.13

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE

Plan Beginning Market Value With Loans: \$6,300,181.01

SINGLE TRANSACTIONS

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
08/24/21	08/26/21	552-071764-644	ISHARES MSCI EAFE ETF	Bought	8,705,000	\$80.40	\$699,903.76	11.11%

CONTINUED

Plan Account Number: 552-112030-644 EIN: 22-0886457 PN004
For the Period: 01/01/2021 - 12/31/2021

Activity

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE (CONTINUED)
SERIES OF TRANSACTIONS

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
01/13/21	01/14/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Bought	86,000,000	105.49	91,300.87	1.45%
01/22/21	01/25/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Bought	57,000,000	105.53	60,563.34	0.96%
02/08/21	02/09/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Sold	34,000,000	105.01	35,972.41	0.57%
02/19/21	02/22/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Bought	89,000,000	103.63	92,264.99	1.46%
02/23/21	02/24/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Sold	2,000,000	103.53	2,071.58	0.03%
03/02/21	03/03/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Sold	18,000,000	102.93	18,540.91	0.29%
03/25/21	03/26/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Sold	7,000,000	101.33	7,105.75	0.11%
05/11/21	05/12/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.625% DUE 2029-08-15 (912828VB0)	Sold	67,000,000	101.39	68,192.70	1.08%
03/02/21	03/03/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.750% DUE 2023-05-15 (912828VB3)	Sold	86,000,000	103.50	\$376,012.55 89,465.46	5.95% 1.42%
04/08/21	04/09/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.750% DUE 2023-05-15 (912828VB3)	Bought	35,000,000	103.30	36,402.09	0.58%
07/09/21	07/12/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.750% DUE 2023-05-15 (912828VB3)	Sold	52,000,000	102.85	53,628.07	0.85%
10/25/21	10/26/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 1.750% DUE 2023-05-15 (912828VB3)	Sold	192,000,000	102.21	197,742.32	3.14%
01/13/21	01/14/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 2.125% DUE 2024-03-31 (912828W71)	Sold	37,000,000	106.01	\$377,237.94 39,454.62	5.99% 0.63%
02/23/21	02/24/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 2.125% DUE 2024-03-31 (912828W71)	Bought	100,000,000	105.83	106,690.57	1.69%
03/09/21	03/10/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 2.125% DUE 2024-03-31 (912828W71)	Sold	4,000,000	105.37	4,252.43	0.07%

CONTINUED

Plan Account Number: 552-112030-644
For the Period: 01/01/2021 - 12/31/2021

EIN: 22-0886457

PN004

Activity

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE (CONTINUED)
SERIES OF TRANSACTIONS (CONTINUED)

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
10/25/21	10/26/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 2.125% DUE 2024-03-31 (912828W71)	Bought	59,000.000	103.68	61,265.35	0.97%
12/07/21	12/08/21	552-038330-644	UNITED STATES TREASURY NOTE <cr> 2.125% DUE 2024-03-31 (912828W71)	Sold	142,000.000	103.00	146,842.65	2.33%
							\$358,505.62	5.69%

Plan Account Number: 552-112030-644 EIN: 22-0886457 PN004
For the Period: 01/01/2021 - 12/31/2021

Holdings

Cash, Deposits, Money Market Funds, and Certificates of Deposit

NET UNSETTLED PURCHASES/SALES

Security Description	Account Number	Market Value
NET UNSETTLED PURCHASES/SALES	552-030185-644	\$(12,797.13)
NET UNSETTLED PURCHASES/SALES	552-038330-644	(7,151.35)
Total Net Unsettled Purchases/Sales		\$(19,948.48)

BANK DEPOSITS

Security Description	Account Number	Market Value
MORGAN STANLEY BANK N.A.	552-030185-644	\$15,126.26
MORGAN STANLEY BANK N.A.	552-038330-644	40,014.32
MORGAN STANLEY BANK N.A.	552-038332-644	0.01
MORGAN STANLEY BANK N.A.	552-038346-644	18,661.95
MORGAN STANLEY BANK N.A.	552-038456-644	0.01
MORGAN STANLEY BANK N.A.	552-071764-644	17,737.07
MORGAN STANLEY PRIVATE BANK NA	552-030185-644	35,064.66
MORGAN STANLEY PRIVATE BANK NA	552-038330-644	43,781.18
MORGAN STANLEY PRIVATE BANK NA	552-038332-644	4,392.83
MORGAN STANLEY PRIVATE BANK NA	552-038346-644	138,119.15
MORGAN STANLEY PRIVATE BANK NA	552-038456-644	28,521.01
Total Bank Deposits		\$341,418.45

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
4.42%	\$0.00	\$0.00	\$321,469.97	\$0.00	\$0.00	\$0.00
Total Cash, Deposits, Money Market Funds and Certificates of Deposit						

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2021 - 12/31/2021

EIN: 22-0886457

PN004

Holdings

US Government Securities

TREASURY SECURITIES

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
UNITED STATES TREASURY NOTE	552-038330-644	320,000.00	\$101.543	\$329,254.12	\$333,242.42	\$324,937.60	\$(4,316.52)	\$(6,354.82)	\$1,950.00
Coupon Rate 1.625%; Matures 08/15/2029; CUSIP 912828Y80									
Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 1.411%; Moody AAA; Issued 08/15/19; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	188,000.00	96.910	184,329.84	184,723.09	182,190.80	(2,139.04)	(2,372.64)	159.65
Coupon Rate 0.250%; Matures 08/31/2025; CUSIP 91282CAJ0									
Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 1.112%; Moody AAA; Issued 08/31/20; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	148,000.00	100.856	148,407.55	151,984.13	149,266.88	859.33	(2,061.06)	656.19
Coupon Rate 1.500%; Matures 09/15/2022; CUSIP 912828YF1									
Interest Paid Semi-Annually Mar/Sep; Moody AAA; Issued 09/16/19; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	124,000.00	100.383	128,258.80	128,793.12	124,474.92	(3,783.88)	(3,848.06)	470.14
Coupon Rate 1.125%; Matures 02/28/2025; CUSIP 912828ZC7									
Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 1.001%; Moody AAA; Issued 03/02/20; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	157,000.00	99.398	155,991.77	156,148.05	156,054.86	63.09	197.95	291.14
Coupon Rate 1.125%; Matures 10/31/2026; CUSIP 91282CDG3									
Interest Paid Semi-Annually; Yield to Maturity 1.254%; Issued 11/01/21; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	37,000.00	99.961	37,020.35	37,028.14	36,985.57	(34.78)	(42.57)	
Coupon Rate 0.125%; Matures 06/30/2022; CUSIP 912828ZX1									
Interest Paid Semi-Annually Jun/Dec; Moody AAA; Issued 06/30/20; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	154,000.00	101.219	156,767.69	156,918.94	155,877.26	(890.43)	(506.49)	535.19
Coupon Rate 1.375%; Matures 09/30/2023; CUSIP 912828T26									
Interest Paid Semi-Annually Mar/Sep; Yield to Maturity .672%; Moody AAA; Issued 09/30/16; Asset Class: FI & Pref									
UNITED STATES TREASURY NOTE	552-038330-644	13,000.00	102.938	13,479.41	13,728.70	13,381.94	(97.47)	(276.94)	69.82
Coupon Rate 2.125%; Matures 03/31/2024; CUSIP 912828W71									
Interest Paid Semi-Annually Mar/Sep; Yield to Maturity .805%; Moody AAA; Issued 03/31/17; Asset Class: FI & Pref									

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Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2021 - 12/31/2021

EIN: 22-0886457

PN004

Holdings

TREASURY SECURITIES (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
UNITED STATES TREASURY NOTE Coupon Rate 1.250%; Matures 08/31/2024; CUSIP 912828YE4 Interest Paid Semi-Annually Feb/Aug; Yield to Maturity .892%; Moody AAA; Issued 09/03/19; Asset Class: FI & Pref	552-038330-644	104,000.00	100.941	105,617.20	105,823.21	104,978.64	(638.56)	(404.13)	440.44
Total Treasury Securities				\$1,259,126.73	\$1,268,389.80	\$1,248,148.47	\$(10,978.26)	\$(15,668.76)	\$4,572.57

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
17.23%	\$1,259,126.73	\$1,268,389.80	\$1,248,148.47	\$(10,978.26)	\$(15,668.76)	\$4,572.57

Corporate Fixed Income

CORPORATE BONDS

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
ABBVIE INC Coupon Rate 2.950%; Matures 11/21/2026; CUSIP 00287YBVO Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 09/21/26; Yield to Call 1.746%; Moody BAA2 S&P BBB +; Issued 05/21/20; Asset Class: FI & Pref	552-038330-644	51,000.00	\$105.434	\$53,624.46	\$53,733.12	\$53,771.34	\$146.88	\$205.39	\$167.17
AIR LEASE CORP Coupon Rate 3.250%; Matures 10/01/2029; CUSIP 00914AAE2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 07/01/29; Yield to Call 2.915%; S&P BBB; Issued 09/16/19; Asset Class: FI & Pref	552-038330-644	58,000.00	102.244	57,037.11	61,768.55	59,301.52	2,264.41	(1,995.78)	471.25
AMERICAN EXPRESS CO Coupon Rate 4.200%; Matures 11/06/2025; CUSIP 025816CA5 Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 10/06/25; Yield to Call 1.456%; Moody A3 (+) S&P BBB +; Issued 11/06/18; Asset Class: FI & Pref	552-038330-644	49,000.00	110.014	56,748.86	57,206.36	53,906.86	(2,842.00)	(2,985.08)	314.42
BANK OF AMERICA CORP FXD TO 10/2024 VAR THRAFT 2.4560% Coupon Rate 2.456%; Matures 10/22/2025; CUSIP 06051GHW2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 10/22/24; Floating Rate; Moody A2 S&P A-; Issued 10/22/19; LIBOR Linked; Asset Class: FI & Pref	552-038330-644	52,000.00	102.729	54,360.80	54,751.03	53,419.08	(941.72)	(1,087.17)	244.78
BANK OF AMERICA CORP FXD TO 07/2031 VAR THRAFT 2.2990% Coupon Rate 2.299%; Matures 07/21/2032; CUSIP 06051GKA6 Interest Paid Semi-Annually; Callable \$100.00 on 07/21/31; First Coupon 01/21/22; Floating Rate; Moody A2 S&P A-; Issued 07/21/21; Asset Class: FI & Pref	552-038330-644	54,000.00	98.490	54,476.82	54,614.76	53,184.60	(1,292.22)	(878.40)	551.76

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Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

PN004

EIN: 22-0886457

Plan Account Number: 552-112030-644

For the Period: 01/01/2021 - 12/31/2021

Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
BOEING CO/THE	552-038330-644	53,000.00	100.004	53,041.87	53,391.03	53,002.12	(39.75)	86.34	475.25
Coupon Rate 2.196%; Matures 02/04/2026; CUSIP 097023DG7									
Interest Paid Semi-Annually Feb/Aug; Callable \$100.00 on 02/04/23; Yield to Call 2.191%; Moody BAA2				S&P BBB-; Issued 02/04/21; Asset Class: FI & Pref					
BROADCOM INC	552-038330-644	49,000.00	116.531	58,891.49	60,009.33	57,100.19	(1,791.30)	(2,391.92)	517.22
Coupon Rate 5.000%; Matures 04/15/2030; CUSIP 11135FBD2									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 01/15/30; Yield to Call 2.699%; Moody BAA3				S&P BBB-; Issued 04/09/20; Asset Class: FI & Pref					
CAPITAL ONE FINANCIAL CORP	552-038330-644	51,000.00	108.772	54,126.11	58,567.26	55,473.72	1,347.61	(2,724.64)	368.90
Coupon Rate 4.200%; Matures 10/29/2025; CUSIP 14040HBH3									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 09/29/25; Yield to Call 1.768%; Moody BAA1				S&P BBB-; Issued 10/29/15; Asset Class: FI & Pref					
CITIGROUP INC FXD TO 01/2027 VAR	552-038330-644	76,000.00	108.482	83,234.44	84,063.23	82,446.32	(788.12)	(213.70)	1,403.21
THRAFTER 3.8870%									
Coupon Rate 3.887%; Matures 01/10/2028; CUSIP 172967LD1									
Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 01/10/27; Floating Rate; Moody A3				S&P BBB+; Issued 01/10/17; LIBOR Linked; Asset Class: FI & Pref					
DELL INTERNATIONAL LLC / EMC CORP	552-038330-644	48,000.00	112.694	54,151.41	54,621.81	54,093.12	(58.29)	59.31	588.00
Coupon Rate 4.900%; Matures 10/01/2026; CUSIP 24703TAE6									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 08/01/26; Yield to Call 1.988%; Moody BAA3				S&P BBB-; Issued 04/01/21; Asset Class: FI & Pref					
EDISON INTERNATIONAL	552-038330-644	41,000.00	114.085	47,073.01	49,168.66	46,774.85	(298.16)	(2,289.03)	104.78
Coupon Rate 5.750%; Matures 06/15/2027; CUSIP 281020AN7									
Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 04/15/27; Yield to Call 2.860%; Moody BAA3				S&P BBB-; Issued 06/21/19; Asset Class: FI & Pref					
ENERGY TRANSFER LP	552-038330-644	51,000.00	114.634	52,942.18	60,110.81	58,463.34	5,521.16	(1,082.22)	565.25
Coupon Rate 5.250%; Matures 04/15/2029; CUSIP 29278NAG8									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 01/15/29; Yield to Call 2.934%; Moody BAA3				S&P BBB-; Issued 01/15/19; Asset Class: FI & Pref					
GENERAL MOTORS FINANCIAL CO INC	552-038330-644	51,000.00	107.835	56,880.30	58,201.03	54,995.85	(1,884.45)	(2,181.78)	1,023.40
Coupon Rate 4.300%; Matures 07/13/2025; CUSIP 37045XAZ9									
Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 04/13/25; Yield to Call 1.830%; Moody BAA3				S&P BBB-; Issued 07/13/15; Asset Class: FI & Pref					
GOLDMAN SACHS GROUP INC/THE	552-038330-644	51,000.00	105.411	54,928.33	55,023.70	53,759.61	(1,168.72)	(480.67)	783.42
Coupon Rate 3.500%; Matures 01/23/2025; CUSIP 38148LAC0									
Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 10/23/24; Yield to Call 1.526%; Moody A2				S&P BBB+; Issued 01/23/15; Asset Class: FI & Pref					
HCA INC	552-038330-644	51,000.00	104.746	54,666.79	56,022.82	53,420.46	(1,246.33)	(2,198.61)	403.75
Coupon Rate 4.750%; Matures 05/01/2023; CUSIP 404121AF2									
Interest Paid Semi-Annually May/Nov; Yield to Maturity 1.152%; Moody BAA3				S&P BBB-; Issued 10/23/12; Asset Class: FI & Pref					
HEWLETT PACKARD ENTERPRISE CO	552-038330-644	37,000.00	105.531	40,769.56	41,110.01	39,046.47	(1,723.09)	(1,656.49)	407.05
Coupon Rate 4.450%; Matures 10/02/2023; CUSIP 42824CBG3									
Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 09/02/23; Yield to Call 1.097%; Moody BAA2				S&P BBB-; Issued 04/09/20; Asset Class: FI & Pref					

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Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
HOST HOTELS & RESORTS LP	552-038330-644	53,000.00	102.757	56,242.77	56,894.36	54,461.21	(1,781.56)	(1,886.96)	546.19
Coupon Rate 3.500%; Matures 09/15/2030; CUSIP 44107TAZ9									
Interest Paid Semi-Annually Mar/Sep: Callable \$100.00 on 06/15/30; Yield to Call 3.126%; Moody BAA3 S&P BBB-; Issued 08/20/20; Asset Class: FI & Pref									
JPMORGAN CHASE & CO FXD TO 042025 VAR THRAFTF 4%	552-038330-644	30,000.00	100.500	26,391.67	30,787.50	30,150.00	3,758.33	(337.50)	300.00
Coupon Rate 4.000%; Perpetual Maturity; CUSIP 48128BAH4									
Interest Paid Semi-Annually Apr/Oct: Callable \$100.00 on 04/01/25; Floating Rate; Moody BAA2 S&P BBB-; Issued 02/24/20; Pays Div: Asset Class: FI & Pref									
JPMORGAN CHASE & CO FXD TO 032024 VAR THRAFTF 3.2200%	552-038330-644	51,000.00	103.974	51,455.64	55,456.36	53,026.74	1,571.10	(1,882.22)	547.40
Coupon Rate 3.200%; Matures 03/01/2025; CUSIP 46647PAH9									
Interest Paid Semi-Annually Mar/Sep: Callable \$100.00 on 03/01/24; Floating Rate; Moody A2 S&P A-; Issued 06/01/17; LIBOR Linked; Asset Class: FI & Pref									
VMWARE INC	552-038330-644	52,000.00	108.941	48,987.29	59,391.54	56,649.32	7,662.03	(2,009.89)	732.33
Coupon Rate 3.900%; Matures 08/21/2027; CUSIP 928563AC9									
Interest Paid Semi-Annually Feb/Aug: Callable \$100.00 on 05/21/27; Yield to Call 2.134%; Moody BAA3 S&P BBB-; Issued 08/21/17; Asset Class: FI & Pref									
WELLS FARGO & CO FXD TO 022025 VAR THRAFTF 2.1640%	552-038330-644	83,000.00	101.532	86,816.34	86,891.18	84,271.56	(2,544.78)	(1,921.13)	698.49
Coupon Rate 2.164%; Matures 02/11/2026; CUSIP 95000U2K8									
Interest Paid Semi-Annually Feb/Aug: Callable \$100.00 on 02/11/25; Floating Rate; Moody A1 S&P BBB+; Issued 02/11/20; LIBOR Linked; Asset Class: FI & Pref									
Total Corporate Bonds				\$1,156,847.25	\$1,201,784.45	\$1,160,718.28	\$3,871.03	\$(29,852.15)	\$11,214.02

CONTINUED

Plan Account Number: 552-112030-644 EIN: 22-0886457 PN004
For the Period: 01/01/2021 - 12/31/2021

Holdings

OTHER FIXED INCOME

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
CAPITAL ONE MULTI TR 2021-3 A	552-038330-644	107,000.00	\$99.578	\$106,985.23	\$106,985.23	\$106,548.21	\$(437.02)	\$(344.29)	\$92.73
Coupon Rate 1.040%; Matures 11/16/2026; CUSIP 14041NFY2									
Interest Paid Monthly; Yield to Maturity 1.129%; First Coupon 01/15/22; S&P AAA; Issued 11/30/21; Asset Class: FI & Pref									
VERIZON OWNER TRUST 2020-B A-1A	552-038330-644	86,000.00	99.734	85,981.94	86,316.76	85,771.65	(210.29)	(532.76)	12.35
Coupon Rate 0.470%; Matures 02/20/2025; CUSIP 92290BAA9									
Interest Paid Monthly; Yield to Maturity .556%; Moody AAA; Issued 08/12/20; Asset Class: FI & Pref									
Total Other Fixed Income				\$192,967.17	\$193,301.99	\$192,319.86	\$(647.31)	\$(877.05)	\$105.08

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
18.77%	\$1,349,814.42	\$1,395,086.44	\$1,353,038.14	\$3,223.72	\$(30,729.20)	\$11,319.10
Total Fixed Income						

Stocks

COMMON STOCKS

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ACADIA HEALTHCARE COMPANY INC (ACHC)	552-038332-644	189,000	\$60.700	\$11,932.55	\$11,932.55	\$11,472.30	\$(460.25)	\$(460.25)
Asset Class: Equities								
AIA GROUP LTD SPON ADR (AAGIY)	552-030185-644	425,000	40.325	16,906.95	21,177.86	17,137.91	230.96	(4,039.95)
Asset Class: Equities								
ALTRIA GROUP INC (MO)	552-038456-644	715,000	47.390	25,549.10	29,930.73	33,883.85	8,334.75	3,953.12
Next Dividend Payable 01/10/22; Asset Class: Equities								
AMADEUS IT GROUP S.A ADR (AMADY)	552-030185-644	120,000	67.720	8,718.67	8,718.67	8,126.40	(592.27)	(592.27)
Asset Class: Equities								
AMCOR PLC (AMCR)	552-030185-644	852,000	12.010	8,713.95	9,763.03	10,232.52	1,518.57	469.49
Next Dividend Payable 03/2022; Asset Class: Equities								
AMERICAN CAMPUS CMIMTYS INC (ACC)	552-038332-644	116,000	57.290	5,705.23	5,705.23	6,645.64	940.41	940.41
Next Dividend Payable 02/2022; Asset Class: Alt								
APTARGROUP INC (ATR)	552-038332-644	51,000	122.480	6,807.60	6,807.60	6,246.48	(561.12)	(561.12)
Next Dividend Payable 02/2022; Asset Class: Equities								

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Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644

EIN: 22-0886457

For the Period: 01/01/2021 - 12/31/2021

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ARKEMA SPONS ADR (ARKAY)	552-030185-644	118.000	141.750	16,261.57	16,261.57	16,726.50	464.93	464.93
Asset Class: Equities								
ARTISAN PARTNERS ASSET MGMT (APAM)	552-038332-644	65.000	47.640	3,196.71	3,196.71	3,096.60	(100.11)	(100.11)
Next Dividend Payable 02/2022: Asset Class: Equities								
ASSTEAD GROUP PLC ADR (ASHTY)	552-030185-644	36.000	328.780	7,263.24	7,379.36	11,836.08	4,572.84	4,456.72
Asset Class: Equities								
ASML HOLDING NV NY REG NEW (ASML)	552-030185-644	19.000	796.140	6,471.59	9,669.15	15,126.66	8,655.07	5,457.51
Asset Class: Equities								
AT&T INC (T)	552-038456-644	2,382.000	24.600	70,241.36	66,424.25	58,597.20	(11,644.16)	(7,827.05)
Next Dividend Payable 02/2022: Asset Class: Equities								
ATLANTIC UN BANKSHARES CORP (AUB)	552-038332-644	173.000	37.290	6,459.15	6,459.15	6,451.17	(7.98)	(7.98)
Next Dividend Payable 02/2022: Asset Class: Equities								
AZENTA INC (AZTA)	552-038332-644	54.000	103.110	4,250.48	4,250.48	5,567.94	1,317.46	1,317.46
Next Dividend Payable 03/2022: Asset Class: Equities								
BANK OF AMERICA CORP (BAC)	552-038456-644	1,459.000	44.490	40,149.53	44,222.29	64,910.91	24,761.38	20,688.62
Next Dividend Payable 03/2022: Asset Class: Equities								
BANK OF NOVA SCOTIA (BNS)	552-030185-644	134.000	71.690	8,652.31	8,652.31	9,606.46	954.15	954.15
Next Dividend Payable 01/27/22: Asset Class: Equities								
BCE INC (BCE)	552-038456-644	1,189.000	52.040	53,325.53	52,450.74	61,875.56	8,550.03	9,424.82
Next Dividend Payable 01/15/22: Asset Class: Equities								
BEIERSDORF AG UNSPONS ADR (BDRFY)	552-030185-644	333.000	20.590	7,128.07	7,662.66	6,856.47	(271.60)	(806.19)
Asset Class: Equities								
BIO RAD LAB A (BIO)	552-038332-644	16.000	755.570	12,422.44	12,452.28	12,089.12	(333.32)	(363.16)
Asset Class: Equities								
BIOHAVEN PHARMA HLDG CO LTD (BHVN)	552-038332-644	42.000	137.810	5,088.72	5,088.72	5,788.02	699.30	699.30
Asset Class: Equities								
BJS WHSL CLUB HLDGS INC (BJ)	552-038332-644	237.000	66.970	13,391.17	13,391.17	15,871.89	2,480.72	2,480.72
Asset Class: Equities								
BOOZ ALLEN HAMILTON HLDG CL-A (BAH)	552-038332-644	66.000	84.790	5,399.66	5,399.66	5,596.14	196.48	196.48
Next Dividend Payable 03/2022: Asset Class: Equities								
BRIGHT HORIZONS FAMILY SOLUT (BFAM)	552-038332-644	43.000	125.880	5,898.31	5,898.31	5,412.84	(485.47)	(485.47)
Asset Class: Equities								
BROADCOM INC (AVGO)	552-030185-644	40.000	665.410	5,502.82	17,854.50	26,616.40	21,113.58	8,761.90
Next Dividend Payable 03/2022: Asset Class: Equities								
BROADCOM INC (AVGO)	552-038456-644	98.000	665.410	35,197.34	43,430.75	65,210.18	30,012.84	21,779.43
Next Dividend Payable 03/2022: Asset Class: Equities								

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
BURLINGTON STORES INC (BURL) Asset Class: Equities	552-038332-644	22.000	291.510	7,574.38	7,574.38	6,413.22	(1,161.16)	(1,161.16)
CARLSBERG AS (CABGY) Asset Class: Equities	552-030185-644	226.000	34.720	4,302.54	7,296.72	7,846.72	3,544.18	550.00
CARTER'S (CRI) Next Dividend Payable 03/2022; Asset Class: Equities	552-038332-644	46.000	101.220	4,784.98	4,784.98	4,656.12	(128.86)	(128.86)
CATALENT INC (CTLT) Asset Class: Equities	552-038332-644	95.000	128.030	11,820.12	11,820.12	12,162.85	342.73	342.73
CAVCO INDUSTRIES INC (CVCO) Asset Class: Equities	552-038332-644	32.000	317.650	8,046.49	8,046.49	10,164.80	2,118.31	2,118.31
CERENCE INC (CRNC) Asset Class: Equities	552-038332-644	90.000	76.640	9,837.21	9,837.21	6,897.60	(2,939.61)	(2,939.61)
CGI INC CL A SUB VTG (GIB) Asset Class: Equities	552-030185-644	242.000	88.500	12,195.80	19,267.83	21,417.00	9,221.20	2,149.17
CHEVRON CORP (CVX) Next Dividend Payable 03/2022; Asset Class: Equities	552-038456-644	502.000	117.350	50,658.65	42,393.90	58,909.70	8,251.05	16,515.80
CHINA FEIHE LTD ADR (CFEY) Asset Class: Equities	552-030185-644	384.000	13.300	6,823.41	6,823.41	5,107.20	(1,716.21)	(1,716.21)
CHINA MENGNIU DAIRY CO LTD ADR (CIADY) Asset Class: Equities	552-030185-644	229.000	57.448	9,982.84	13,592.57	13,155.48	3,172.65	(437.09)
CHINA RES BEER HLDG CO LTD ADR (CRHKY) Asset Class: Equities	552-030185-644	287.000	16.420	4,714.49	4,714.49	4,712.54	(1.95)	(1.95)
CHUBB LTD (CB) Next Dividend Payable 01/07/22; Asset Class: Equities	552-038456-644	325.000	193.310	34,462.39	50,024.00	62,825.75	28,363.36	12,801.75
CISCO SYS INC (CSCO) Next Dividend Payable 01/2022; Asset Class: Equities	552-038456-644	863.000	63.370	18,590.31	38,619.25	54,688.31	36,098.00	16,069.06
CITIGROUP INC NEW (C) Next Dividend Payable 02/2022; Asset Class: Equities	552-038456-644	703.000	60.390	46,271.69	43,346.98	42,454.17	(3,817.52)	(892.81)
COGNEX CORP (CGNX) Next Dividend Payable 03/2022; Asset Class: Equities	552-038332-644	110.000	77.760	9,176.00	9,176.00	8,553.60	(622.40)	(622.40)
COLUMBUS MCKINNON CORP (CMCO) Next Dividend Payable 02/2022; Asset Class: Equities	552-038332-644	109.000	46.260	5,352.26	5,352.26	5,042.34	(309.92)	(309.92)
COMFORT SYSTEMS USA INC (FIX) Next Dividend Payable 02/2022; Asset Class: Equities	552-038332-644	75.000	98.940	5,570.35	5,570.35	7,420.50	1,850.15	1,850.15
CONOCOPHILLIPS (COP) Next Dividend Payable 01/14/22; Asset Class: Equities	552-038456-644	500.000	72.180	20,582.75	19,995.00	36,090.00	15,507.25	16,095.00
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Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
CRH PLC ADR (CRH)	552-030185-644	352.000	52.800	15,636.82	15,893.25	18,585.60	2,948.78	2,692.35
Asset Class: Equities								
CRITEO S.A. ADR (CRTO)	552-030185-644	482.000	38.870	10,826.18	13,136.27	18,735.34	7,909.16	5,599.07
Asset Class: Equities								
CSL LTD (CSLLY)	552-030185-644	63.000	105.800	4,556.26	6,929.61	6,665.40	2,109.14	(264.21)
Asset Class: Equities								
DEUTSCHE BOERSE AG UNSPON ADR (DBOEY)	552-030185-644	887.000	16.610	12,345.32	14,922.24	14,733.07	2,387.75	(189.17)
Asset Class: Equities								
DEVON ENERGY CORP NEW (DVN)	552-038332-644	149.000	44.050	4,199.52	4,199.52	6,563.45	2,363.93	2,363.93
Next Dividend Payable 03/2022: Asset Class: Equities								
DIAGEO PLC SPON ADR NEW (DEO)	552-038456-644	181.000	220.140	13,367.63	28,744.61	39,845.34	26,477.71	11,100.73
Asset Class: Equities								
DIAMONDBACK ENERGY INC (FANG)	552-038332-644	117.000	107.850	10,546.15	5,795.61	12,618.45	2,072.30	6,822.84
Next Dividend Payable 02/2022: Asset Class: Equities								
DORMAN PRODUCTS, INC (DORM)	552-038332-644	69.000	113.010	6,676.14	6,676.14	7,797.69	1,121.55	1,121.55
Asset Class: Equities								
DOW INC (DOW)	552-038456-644	459.000	56.720	20,325.72	25,741.90	26,034.48	5,708.76	292.58
Next Dividend Payable 03/2022: Asset Class: Equities								
DUKE ENERGY CORPORATION (DUK)	552-038456-644	498.000	104.900	44,409.16	47,485.01	52,240.20	7,831.04	4,755.19
Next Dividend Payable 03/2022: Asset Class: Equities								
EAGLE MATLS INC (EXP)	552-038332-644	60.000	166.460	9,002.02	9,002.02	9,987.60	985.58	985.58
Next Dividend Payable 01/14/22: Asset Class: Equities								
EASTERLY GOVT PPTYS INC COM (DEA)	552-038332-644	299.000	22.920	6,516.47	6,516.47	6,853.08	336.61	336.61
Next Dividend Payable 02/2022: Asset Class: Alt								
ELEMENT SOLUTIONS INC (ESI)	552-038332-644	477.000	24.280	10,817.39	10,817.39	11,581.56	764.17	764.17
Next Dividend Payable 03/2022: Asset Class: Equities								
ELI LILLY & CO (LLY)	552-038456-644	112.000	276.220	4,502.13	18,910.08	30,936.64	26,434.51	12,026.56
Next Dividend Payable 03/2022: Asset Class: Equities								
ENTERGRIS INC (ENTG)	552-038332-644	76.000	138.580	8,508.47	8,508.47	10,532.08	2,023.61	2,023.61
Next Dividend Payable 02/2022: Asset Class: Equities								
EXPONENT INC (EXPO)	552-038332-644	61.000	116.730	7,046.24	7,048.04	7,120.53	74.29	72.49
Next Dividend Payable 03/2022: Asset Class: Equities								
EXXON MOBIL CORP (XOM)	552-038456-644	1,109.000	61.190	65,417.87	45,712.98	67,859.71	2,441.84	22,146.73
Next Dividend Payable 03/2022: Asset Class: Equities								
FANUC CORPORATION UNSP ADR (FANUY)	552-030185-644	344.000	21.290	5,867.40	8,623.36	7,323.76	1,456.36	(1,299.60)
Asset Class: Equities								
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Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644

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PN004

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
FEDERAL SIGNAL CORP (FSS)	552-038332-644	222.000	43.340	8,701.54	8,701.54	9,621.48	919.94	919.94
Next Dividend Payable 03/2022: Asset Class: Equities								
FIVE BELOW (FIVE)	552-038332-644	49.000	206.890	10,808.86	10,808.86	10,137.61	(671.25)	(671.25)
Asset Class: Equities								
FLUTTER ENTMT PLC ADR (PDVVP)	552-030185-644	203.000	79.660	12,111.42	20,441.91	16,170.98	4,059.57	(4,270.93)
Asset Class: Equities								
GARTNER INC (IT)	552-038332-644	31.000	334.320	9,381.67	9,401.92	10,363.92	982.25	982.00
Asset Class: Equities								
GATES INDUSTRIAL CORP PLC (GTES)	552-038332-644	635.000	15.910	10,207.53	10,207.53	10,102.85	(104.68)	(104.68)
Asset Class: Equities								
GENL DYNAMICS CORP (GD)	552-038456-644	215.000	208.470	34,666.43	32,050.39	44,821.05	10,154.62	12,770.66
Next Dividend Payable 02/2022: Asset Class: Equities								
GENTHERM INC COM (THRM)	552-038332-644	78.000	86.900	6,386.97	6,408.49	6,778.20	391.23	369.71
Asset Class: Equities								
GENUINE PARTS CO (GPC)	552-038456-644	340.000	140.200	18,186.42	34,453.17	47,668.00	29,481.58	13,214.83
Next Dividend Payable 01/04/22: Asset Class: Equities								
GIBALTAR INDUSTRIES INC (ROCK)	552-038332-644	118.000	66.680	8,450.15	8,450.15	7,868.24	(581.91)	(581.91)
Asset Class: Equities								
GLACIER BANCORP INC NEW (GBCI)	552-038332-644	91.000	56.700	4,833.53	4,833.53	5,159.70	326.17	326.17
Next Dividend Payable 03/2022: Asset Class: Equities								
GLOBANT S.A (GLOB)	552-038332-644	30.000	314.090	8,394.79	8,394.79	9,422.70	1,027.91	1,027.91
Asset Class: Equities								
GLOBUS MEDICAL INC A (GMED)	552-038332-644	84.000	72.200	6,568.89	6,568.89	6,064.80	(504.09)	(504.09)
Asset Class: Equities								
GRAND CANYON ED INC COM (LOPE)	552-038332-644	39.000	85.710	3,367.95	3,367.95	3,342.69	(25.26)	(25.26)
Asset Class: Equities								
GRUPO AEROPORTUARIO DEL (PAC)	552-030185-644	86.000	137.470	6,181.51	9,517.34	11,822.42	5,640.91	2,305.08
Asset Class: Equities								
HDFC BANK LTD ADR (HDB)	552-030185-644	340.000	65.070	16,238.12	24,682.66	22,123.80	5,885.68	(2,558.86)
Asset Class: Equities								
HEALTHPEAK PPTYS INC (PEAK)	552-038456-644	1,259.000	36.090	38,254.62	38,059.57	45,437.31	7,182.69	7,377.74
Next Dividend Payable 02/2022: Asset Class: Alt								
HEINEKEN NV SPN ADR (HEINY)	552-030185-644	297.000	56.550	14,969.30	16,227.69	16,795.35	1,826.05	567.66
Asset Class: Equities								
HEXCEL CORP NEW (HXL)	552-038332-644	100.000	51.800	5,467.17	5,467.17	5,180.00	(287.17)	(287.17)
Asset Class: Equities								

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Morgan Stanley

IBEW Local 1158
Annuity Plan

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
HORIZON THERAPEUTICS PUB LTD (HZNP)	552-038332-644	116.000	107.760	12,215.64	12,215.64	12,500.16	284.52	284.52
Asset Class: Equities								
HOYA CORP SPONS ADR (HOCVY)	552-030185-644	82.000	149.570	5,055.44	11,236.13	12,264.74	7,209.30	1,028.61
Asset Class: Equities								
HUBSPOT, INC. (HUBS)	552-038332-644	11.000	659.150	7,280.24	7,297.66	7,250.65	(29.59)	(47.01)
Asset Class: Equities								
HUDSON PACIFIC PROPERTIES (HPP)	552-038332-644	248.000	24.710	6,418.16	6,418.16	6,128.08	(290.08)	(290.08)
Next Dividend Payable 03/2022; Asset Class: Alt								
ICON PLC (ICLR)	552-030185-644	41.000	309.700	6,645.24	8,162.50	12,697.70	6,052.46	4,535.20
Asset Class: Equities								
IDACORP INC (IDA)	552-038332-644	67.000	113.310	7,298.43	7,298.43	7,591.77	293.34	293.34
Next Dividend Payable 02/2022; Asset Class: Equities								
INGERSOLL RAND INC (IR)	552-038332-644	210.000	61.870	10,504.45	10,504.45	12,992.70	2,488.25	2,488.25
Next Dividend Payable 03/2022; Asset Class: Equities								
INTEGRER HOLDINGS CORP (ITGR)	552-038332-644	54.000	85.590	5,271.55	5,271.55	4,621.86	(649.69)	(649.69)
Asset Class: Equities								
INTEL CORP (INTC)	552-038456-644	1,259.000	51.500	51,381.72	62,647.62	64,838.50	13,456.78	2,190.88
Next Dividend Payable 03/2022; Asset Class: Equities								
JAZZ PHARMACEUTICALS PLC (JAZZ)	552-038332-644	56.000	127.400	7,539.58	7,539.58	7,134.40	(405.18)	(405.18)
Asset Class: Equities								
JD COM INC SPON ADR CL A (JD)	552-030185-644	134.000	70.070	8,140.54	12,315.63	9,389.38	1,248.84	(2,926.25)
Asset Class: Equities								
JOHNSON & JOHNSON (JNJ)	552-038456-644	400.000	171.070	32,798.95	63,488.80	68,428.00	35,629.05	4,939.20
Next Dividend Payable 03/2022; Asset Class: Equities								
JOHNSON CTLS INTL PLC (JCI)	552-038456-644	806.000	81.310	33,411.16	37,551.54	65,535.86	32,124.70	27,984.32
Next Dividend Payable 01/14/22; Asset Class: Equities								
JPMORGAN CHASE & CO (JPM)	552-038456-644	401.000	158.350	19,689.08	50,955.07	63,498.35	43,809.27	12,543.28
Next Dividend Payable 01/2022; Asset Class: Equities								
KEMPER CORP DEL COM (KMPR)	552-038332-644	67.000	58.790	4,559.82	4,559.82	3,938.93	(620.89)	(620.89)
Next Dividend Payable 03/2022; Asset Class: Equities								
KERING S A ADR NEW (PPRUV)	552-030185-644	125.000	80.510	10,677.94	10,677.94	10,063.75	(614.19)	(614.19)
Asset Class: Equities								
KIMBERLY CLARK CORP (KMB)	552-038456-644	354.000	142.920	33,392.01	47,732.56	50,593.68	17,201.67	2,861.12
Next Dividend Payable 01/04/22; Asset Class: Equities								
KINSALE CAP GROUP INC (KNSL)	552-038332-644	36.000	237.890	6,605.21	6,605.21	8,564.04	1,958.83	1,958.83
Next Dividend Payable 03/2022; Asset Class: Equities								

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
KNORR BREMSE AG ADR (KNRRY) Asset Class: Equities	552-030185-644	257.000	24.590	6,854.04	8,562.50	6,319.63	(534.41)	(2,242.87)
KOITO MANUFACTURING UNSP ADR (KOTMY) Asset Class: Equities	552-030185-644	250.000	54.580	12,014.03	16,623.79	13,645.00	1,630.97	(2,978.79)
KOMATSU LTD SPON ADR NEW (KMTUY) Asset Class: Equities	552-030185-644	209.000	23.370	3,889.16	5,880.45	4,884.33	995.17	(996.12)
KUEHNE & NAGEL INTL AG ADR (KHNGY) Asset Class: Equities	552-030185-644	196.000	63.240	8,223.88	10,210.47	12,395.04	4,171.16	2,184.57
LANCASTER COLONY CRP (LANC) Next Dividend Payable 03/2022; Asset Class: Equities	552-038332-644	40.000	165.600	7,425.39	7,425.39	6,624.00	(801.39)	(801.39)
LINDE PLC (LIN) Next Dividend Payable 03/2022; Asset Class: Equities	552-030185-644	33.000	345.766	6,500.63	8,690.62	11,410.27	4,909.65	2,719.65
LITHIA MTRS INC (LAD) Next Dividend Payable 02/2022; Asset Class: Equities	552-038332-644	31.000	296.950	10,185.96	10,185.96	9,205.45	(980.51)	(980.51)
LOGITECH INTL SA (LOGI) Next Dividend Payable 09/2022; Asset Class: Equities	552-030185-644	135.000	84.377	9,556.85	12,157.04	11,390.88	1,834.05	(766.16)
LOWES COMPANIES INC (LOW) Next Dividend Payable 02/2022; Asset Class: Equities	552-038456-644	160.000	258.480	14,915.98	25,681.60	41,356.80	26,440.82	15,675.20
LVMH MOET HENNESSY LOUIS VUITT (LVMUY) Asset Class: Equities	552-030185-644	73.000	165.500	6,360.93	9,179.34	12,081.50	5,720.57	2,902.16
MAGNA INTERNATIONAL INC (MGA) Next Dividend Payable 03/2022; Asset Class: Equities	552-030185-644	151.000	80.940	12,796.67	12,997.35	12,221.94	(574.73)	(775.41)
MANHATTAN ASSOC INC (MANH) Asset Class: Equities	552-038332-644	73.000	155.490	11,524.68	11,524.68	11,350.77	(173.91)	(173.91)
MEDTRONIC PLC SHS (MDT) Next Dividend Payable 01/14/22; Asset Class: Equities	552-038456-644	449.000	103.450	44,703.87	53,260.96	46,449.05	1,745.18	(6,811.91)
MERCK & CO INC NEW COM (MRK) Next Dividend Payable 01/07/22; Asset Class: Equities	552-038456-644	543.000	76.640	24,129.12	43,803.02	41,615.52	17,486.40	(2,187.50)
MICROSOFT CORP (MSFT) Next Dividend Payable 03/2022; Asset Class: Equities	552-038456-644	67.000	336.320	1,957.74	14,902.14	22,533.44	20,575.70	7,631.30
MOLINA HEALTHCARE INC (MOH) Asset Class: Equities	552-038332-644	28.000	318.080	7,436.08	7,436.08	8,906.24	1,470.16	1,470.16
MONDELEZ INTL INC COM (MDLZ) Next Dividend Payable 01/14/22; Asset Class: Equities	552-030185-644	235.000	66.310	11,159.23	13,620.98	15,582.85	4,423.62	1,961.87
MORGAN STANLEY (MS) Next Dividend Payable 02/2022; Asset Class: Equities	552-038456-644	671.000	98.160	26,503.09	45,983.63	65,865.36	39,362.27	19,881.73

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Plan Account Number: 552-112030-644 EIN: 22-0886457 PN004
For the Period: 01/01/2021 - 12/31/2021

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
NESTLE SPON ADR REP REG SHR (NSRGY)	552-030185-644	149.000	140.370	16,372.52	17,445.66	20,915.13	4,542.61	3,469.47
Asset Class: Equities								
NEUROCRINE BIOSCIENCES INC (NBIX)	552-038332-644	66.000	85.170	6,108.66	6,108.66	5,621.22	(487.44)	(487.44)
Asset Class: Equities								
NEXTERA ENERGY INC (NEE)	552-038456-644	710.000	93.360	16,773.12	55,638.34	66,285.60	49,512.48	10,647.26
Next Dividend Payable 03/2022; Asset Class: Equities								
NIDEC CORP (NIDCV)	552-030185-644	223.000	29.510	3,086.34	7,172.34	6,580.73	3,494.39	(591.61)
Asset Class: Equities								
NORDSON CP (NDSN)	552-038332-644	41.000	255.270	9,459.96	9,459.96	10,466.07	1,006.11	1,006.11
Next Dividend Payable 01/04/22; Asset Class: Equities								
NORDSTROM INC (JWN)	552-038332-644	141.000	22.620	4,835.90	4,835.90	3,189.42	(1,646.48)	(1,646.48)
Asset Class: Equities								
NOVARTIS AG ADR (NVS)	552-038456-644	683.000	87.470	49,579.44	63,030.16	59,742.01	10,162.57	(3,288.15)
Asset Class: Equities								
NOVO NORDISK A/S ADR (NVO)	552-030185-644	101.000	112.000	6,598.38	7,262.03	11,312.00	4,713.62	4,049.97
Asset Class: Equities								
OLYMPUS CORPORATION SPONS ADR (OLCPNY)	552-030185-644	1,074.000	23.130	22,361.62	23,288.06	24,841.62	2,480.00	1,553.56
Asset Class: Equities								
OPEN TEXT CORP (OTEX)	552-030185-644	305.000	47.480	11,731.42	14,241.51	14,481.40	2,749.98	239.89
Next Dividend Payable 03/2022; Asset Class: Equities								
PAYLOCITY HOLDING CORPORATION (PCTY)	552-038332-644	40.000	236.160	10,103.05	10,103.05	9,446.40	(656.65)	(656.65)
Asset Class: Equities								
PERFORMANCE FOOD GROUP CO (PFGC)	552-038332-644	115.000	45.890	5,034.79	5,034.79	5,277.35	242.56	242.56
Asset Class: Equities								
PERNOD RICARD SA ADR (PRNDY)	552-030185-644	226.000	48.480	6,385.02	8,761.15	10,956.48	4,571.46	2,195.33
Asset Class: Equities								
PFIZER INC (PFE)	552-038456-644	1,074.000	59.050	32,852.61	40,049.38	63,419.70	30,567.09	23,370.32
Next Dividend Payable 03/2022; Asset Class: Equities								
PHILIP MORRIS INTL INC (PM)	552-030185-644	221.000	95.000	17,190.27	18,527.81	20,995.00	3,804.73	2,467.19
Next Dividend Payable 01/10/22; Asset Class: Equities								
PHILIP MORRIS INTL INC (PM)	552-038456-644	633.000	95.000	52,677.93	53,314.27	60,135.00	7,457.07	6,820.73
Next Dividend Payable 01/10/22; Asset Class: Equities								
PHYSICIANS REALTY TRUST (DOC)	552-038332-644	321.000	18.830	5,958.85	5,958.85	6,044.43	85.58	85.58
Next Dividend Payable 01/18/22; Asset Class: Alt								
PINNACLE FINCL PARTNERS INC (PINFP)	552-038332-644	118.000	95.500	8,253.07	7,785.60	11,269.00	3,015.93	3,483.40
Next Dividend Payable 02/2022; Asset Class: Equities								
CONTINUED								

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2021 - 12/31/2021

EIN: 22-0886457

PN004

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
PIPER SANDLER COMPANIES (PIPR)	552-038332-644	53.000	178.510	7,442.23	7,442.23	9,461.03	2,018.80	2,018.80
Next Dividend Payable 03/2022: Asset Class: Equities								
POLARIS INC (PIL)	552-038332-644	72.000	109.910	8,954.55	8,954.55	7,913.52	(1,041.03)	(1,041.03)
Next Dividend Payable 03/2022: Asset Class: Equities								
PORTLAND GENERAL ELEC CO (POR)	552-038332-644	114.000	52.920	5,867.07	5,867.07	6,032.88	165.81	165.81
Next Dividend Payable 01/18/22: Asset Class: Equities								
POWER INTEGRATIONS INC (POWI)	552-038332-644	71.000	92.890	6,814.38	6,814.38	6,595.19	(219.19)	(219.19)
Next Dividend Payable 03/2022: Asset Class: Equities								
PROSUS N V SPONSORED ADR (PROSY)	552-030185-644	364.000	16.610	5,650.70	8,075.69	6,046.04	395.34	(2,029.65)
Asset Class: Equities								
PS BUSINESS PARKS INC CALIF (PSB)	552-038332-644	24.000	184.170	4,329.30	4,329.30	4,420.08	90.78	90.78
Next Dividend Payable 03/2022: Asset Class: Alt								
QUAKER HOUGHTON (KWR)	552-038332-644	34.000	230.780	8,231.84	8,231.84	7,846.52	(385.32)	(385.32)
Next Dividend Payable 01/2022: Asset Class: Equities								
R P M INC (RPM)	552-038332-644	78.000	101.000	6,569.91	6,569.91	7,878.00	1,308.09	1,308.09
Next Dividend Payable 01/2022: Asset Class: Equities								
RAPID7 INC (RPD)	552-038332-644	104.000	117.690	11,601.64	11,601.64	12,239.76	638.12	638.12
Asset Class: Equities								
RAYTHEON TECHNOLOGIES CORP (RTX)	552-038456-644	546.000	86.060	21,735.59	39,297.96	46,988.76	25,253.17	7,690.80
Next Dividend Payable 03/2022: Asset Class: Equities								
RBC BEARINGS INC (ROLL)	552-038332-644	51.000	201.970	11,122.80	11,122.80	10,300.47	(822.33)	(822.33)
Asset Class: Equities								
RECKITT BENCKISER PLC SPNS ADR (RBGLY)	552-030185-644	796.000	17.500	13,394.50	13,394.50	13,930.00	535.50	535.50
Asset Class: Equities								
RITCHIE BROTHERS AUCTIONEERS (RBA)	552-030185-644	197.000	61.210	11,696.46	11,788.52	12,058.37	361.91	269.85
Next Dividend Payable 03/2022: Asset Class: Equities								
RITCHIE BROTHERS AUCTIONEERS (RBA)	552-038332-644	102.000	61.210	6,289.68	6,294.42	6,243.42	(46.26)	(51.00)
Next Dividend Payable 03/2022: Asset Class: Equities								
ROCHE HOLDINGS ADR (RHHBY)	552-030185-644	225.000	51.690	9,375.85	9,865.44	11,630.25	2,254.40	1,764.81
Asset Class: Equities								
SANDS CHINA LTD UNSPONSORE ADR (SCHYY)	552-030185-644	355.000	23.050	12,757.48	14,476.80	8,182.75	(4,574.73)	(6,294.05)
Asset Class: Equities								
SANDVIK AB SPONS ADR (SDVKY)	552-030185-644	962.000	27.950	19,243.69	23,858.42	26,887.90	7,644.21	3,029.48
Asset Class: Equities								
SCHNEIDER ELEC SA UNSP ADR (SBGSY)	552-030185-644	571.000	39.210	9,103.78	16,782.30	22,388.91	13,285.13	5,606.61
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
SCHNEIDER NATIONAL INC CL B (SNDR)	552-038332-644	144.000	26.910	3,197.13	3,197.13	3,875.04	677.91	677.91
Next Dividend Payable 01/10/22; Asset Class: Equities								
SIEMENS AKTIENGESSELLSCHAFT (SIEGY)	552-038456-644	556.000	86.600	35,899.18	40,372.89	48,149.60	12,250.42	7,776.71
Asset Class: Equities								
SIGNATURE BK NEW YORK N Y COM (SBNY)	552-038332-644	54.000	323.470	13,266.49	13,266.49	17,467.38	4,200.89	4,200.89
Next Dividend Payable 02/2022; Asset Class: Equities								
SILICON LAB INC (SLAB)	552-038332-644	58.000	206.420	9,087.32	9,087.32	11,972.36	2,885.04	2,885.04
Asset Class: Equities								
SMC CORP JAPAN SPONSORED ADR (SMCAY)	552-030185-644	232.000	33.886	4,987.36	7,117.15	7,861.55	2,874.19	744.40
Asset Class: Equities								
SONY GROUP CORPORATION ADR (SONY)	552-030185-644	223.000	126.400	17,661.87	23,437.70	28,187.20	10,525.33	4,749.50
Asset Class: Equities								
STERIS PLC (STE)	552-038332-644	37.000	243.410	7,897.71	7,897.71	9,006.17	1,108.46	1,108.46
Next Dividend Payable 03/2022; Asset Class: Equities								
SUMMIT HOTEL PROPERTIES INC (INN)	552-038332-644	430.000	9.760	4,189.62	4,189.62	4,196.80	7.18	7.18
Asset Class: Alt								
SUN COMMUNITIES INC (SUI)	552-038332-644	57.000	209.970	11,392.14	11,392.14	11,968.29	576.15	576.15
Next Dividend Payable 01/18/22; Asset Class: Alt								
SYNEOS HEALTH INC CL A (SYNH)	552-038332-644	121.000	102.680	9,437.03	9,437.03	12,424.28	2,987.25	2,987.25
Asset Class: Equities								
TAIWAN SMCNDCR MFG CO LTD ADR (TSM)	552-030185-644	163.000	120.310	4,056.35	18,523.41	19,610.53	15,554.18	1,087.12
Next Dividend Payable 01/13/22; Asset Class: Equities								
TARGET CORPORATION (TGT)	552-038456-644	209.000	231.440	15,172.52	36,894.77	48,370.96	33,198.44	11,476.19
Next Dividend Payable 03/2022; Asset Class: Equities								
TENCENT HLDGS LTD UNSPON ADR (TCEHY)	552-030185-644	215.000	58.300	11,625.53	16,618.22	12,534.50	908.97	(4,083.72)
Asset Class: Equities								
TEXAS ROADHOUSE INC CL A (TXRH)	552-038332-644	93.000	89.280	8,407.30	8,407.30	8,303.04	(104.26)	(104.26)
Next Dividend Payable 03/2022; Asset Class: Equities								
TORO CO (TTC)	552-038332-644	91.000	99.910	9,948.55	9,948.55	9,091.81	(856.74)	(856.74)
Next Dividend Payable 01/11/22; Asset Class: Equities								
TRAVELERS COMPANIES INC COM (TRV)	552-038456-644	175.000	156.430	8,841.69	24,585.18	27,375.25	18,533.56	2,790.07
Next Dividend Payable 03/2022; Asset Class: Equities								
TRAVIS PERKINS PLC ADR NE (TPRKY)	552-030185-644	449.000	22.000	9,841.82	11,101.28	9,878.00	36.18	(1,223.28)
Asset Class: Equities								
TRUIST FINL CORP (TFC)	552-038456-644	840.000	58.550	42,991.68	40,261.20	49,182.00	6,190.32	8,920.80
Next Dividend Payable 03/2022; Asset Class: Equities								

CONTINUED

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Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
UNILEVER PLC (NEW) ADS (UL) Asset Class: Equities	552-038456-644	864.000	53.790	34,754.09	50,690.14	46,474.56	11,720.47	(4,215.58)
UNITED PARCEL SER INC CL-B (UPS) Next Dividend Payable 03/2022; Asset Class: Equities	552-038456-644	213.000	214.340	34,449.34	35,738.62	45,654.42	11,205.08	9,915.80
UTD OVERSEAS BK LTD SPON ADR (UOVEY) Asset Class: Equities	552-030185-644	395.000	40.050	13,424.48	14,593.71	15,819.75	2,395.27	1,226.04
VAIL RESORTS (MTN) Next Dividend Payable 01/11/22; Asset Class: Equities	552-038332-644	15.000	327.900	4,331.79	4,331.79	4,918.50	586.71	586.71
VICI PROPERTIES INC (VICI) Next Dividend Payable 01/06/22; Asset Class: Alt	552-038456-644	1,168.000	30.110	35,911.52	35,911.52	35,168.48	(743.04)	(743.04)
VOYA FINL INC (VOYA) Next Dividend Payable 03/2022; Asset Class: Equities	552-038332-644	154.000	66.310	9,833.14	9,833.14	10,211.74	378.60	378.60
WAL-MART DE MEXICO SA SPON ADR (WMMVY) Next Dividend Payable 01/07/22; Asset Class: Equities	552-030185-644	422.000	37.250	10,387.80	12,176.80	15,719.50	5,331.70	3,542.70
WALGREENS BOOTS ALLIANCE INC (WBA) Next Dividend Payable 03/2022; Asset Class: Equities	552-038456-644	833.000	52.160	44,650.91	33,783.33	43,449.28	(1,201.63)	9,665.95
WELLTOWER INC (WELL) Next Dividend Payable 02/2022; Asset Class: Alt	552-038456-644	501.000	85.770	28,937.55	33,129.61	42,970.77	14,033.22	9,841.16
WESTERN ALLIANCE BANCORP (WAL) Next Dividend Payable 03/2022; Asset Class: Equities	552-038332-644	131.000	107.650	12,336.53	12,336.53	14,102.15	1,765.62	1,765.62
WOLTERS KLUWER NV SPON ADR (WTKWY) Asset Class: Equities	552-030185-644	185.000	118.140	10,112.90	15,714.54	21,855.90	11,743.00	6,141.36
WPP PLC SPON NEW ADR (WPP) Asset Class: Equities	552-030185-644	138.000	75.550	8,493.16	8,677.07	10,425.90	1,932.74	1,748.83
YUM CHINA HLDGS (YUMC) Next Dividend Payable 03/2022; Asset Class: Equities	552-030185-644	331.000	49.840	15,506.89	19,211.34	16,497.04	990.15	(2,714.30)
ZEBRA TECH CL-A (ZBRA) Asset Class: Equities	552-038332-644	19.000	595.200	10,843.42	10,859.84	11,308.80	465.38	448.96
3M COMPANY (MMM) Next Dividend Payable 03/2022; Asset Class: Equities	552-038456-644	266.000	177.630	32,344.13	47,377.33	47,249.58	14,905.45	(127.75)
Total Common Stocks				\$2,639,910.30	\$3,178,612.17	\$3,645,568.38	\$1,005,658.13	\$466,956.21

Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
50.15%	\$2,639,910.30	\$3,178,612.17	\$3,645,568.38	\$1,005,658.13	\$466,956.21
Total Stocks					

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644 EIN: 22-0886457 PN004
For the Period: 01/01/2021 - 12/31/2021

Holdings

Exchange-Traded & Closed-End Funds

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ISHARES MSCI EAFE ETF (EFA)	552-071764-644	8,705.000	\$78.680	\$699,903.76	\$699,903.76	\$684,909.40	\$(14,994.36)	\$(14,994.36)
Next Dividend Payable 06/2022; Asset Class: Equities								
		Percentage of Assets		Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
		9.42%		\$699,903.76	\$699,903.76	\$684,909.40	\$(14,994.36)	\$(14,994.36)
Total Exchange-Traded & Closed-End Funds								

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Portfolio Statement

31 DEC 2021

IBEW Local 1158
Annuity Plan

EIN: 22-0886457

PN004

Account Name PASSAIC VALLEY SEWERAGE COMM

Account number 4469641

◆ Asset Detail - Base Currency

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Description/Asset ID Investment Mgr ID	Exchange rate/ Local market price	Accrued income/expense	Market value	Cost	Market	Unrealized gain/loss	Total
Shares/PAF value						Translation	

Equities

Funds - common stock

United States - USD

MFB NT COLLECTIVE S&P500 INDEX FUND-NON LENDING CUSIP: 658991310

61.95	17,531.7720000	0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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Total USD		0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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Total United States		0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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Total Funds - Common Stock

61.95		0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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Total Equities

61.95		0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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Total	61.95	0.00	1,086,093.28	448,551.80	637,541.48	0.00	637,541.48
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++ Informational Only Asset - an asset that is not held in the account but that is included in Northern Trust's reports at the client's request solely as a matter of convenience to the client. Custodial and other responsibilities for this asset rest solely with the client or another custodian. Northern Trust has no custodial or other responsibilities for this asset, and the asset is not an asset of any Northern Trust account for purposes of the applicable account agreement.

Northern Trust

Generated by Northern Trust from reviewed periodic data on 7 Jan 22



Plan Administration Report

EIN: 22-0886457 PN004

I.B.E.W. LOCAL 1158
Plan 874041
01/01/2021 through 12/31/2021

Run Date: January 13, 2022

Overview - Summary By Fund							
Fund Name	Beginning Balance	Contributions	Fund Transfers	Internal Transfers	Misc	Gain/Loss	Ending Balance
American Funds Am Balanced R3	\$4,880.85	\$0.00	\$0.00	\$0.00	\$0.00	\$727.39	\$5,608.24
American Funds Fdmntl Inv R3	\$7,430.88	\$0.00	\$0.00	\$0.00	\$0.00	\$1,604.29	\$9,035.17
BlkRck Equity Dividend Fnd R	\$63,292.97	\$2,454.40	\$0.00	\$0.00	\$0.00	\$12,294.07	\$78,041.44
Carillon Eagle Sm Cap Grw R3	\$8,627.40	\$0.00	\$0.00	\$0.00	\$0.00	\$69.47	\$8,696.87
Dodge & Cox Intl Stock Fnd	\$1,736.22	\$0.00	\$0.00	\$0.00	\$0.00	\$172.27	\$1,908.49
Fidelity Adv Nw Insight Fd M	\$134,365.72	\$4,634.44	\$0.00	\$0.00	\$0.00	\$31,746.30	\$170,746.46
Invesco Small Cap Eqty Fnd R	\$11,416.59	\$416.00	\$0.00	\$0.00	\$0.00	\$2,209.48	\$14,042.07
Voya Fixed Account	\$69,356.04	\$2,364.16	(\$3,914.62)	\$0.00	\$0.00	\$703.95	\$68,509.53
Voya Gov Money Market Port I	\$233.10	\$0.00	\$0.00	\$0.00	\$0.00	(\$2.23)	\$230.87
Voya High Yield Port Srv	\$2,449.64	\$832.00	\$1,285.81	\$0.00	\$0.00	\$122.62	\$4,690.07
Voya Indx Solution 2025 P Adv	\$38,769.48	\$2,426.00	\$0.00	\$0.00	\$0.00	\$3,892.64	\$45,088.12
Voya Indx Solution 2035 P Adv	\$18,113.77	\$4,160.00	\$0.00	\$0.00	\$0.00	\$2,556.94	\$24,830.71
Voya Indx Solution 2040 Pt Adv	\$6,784.92	\$2,080.00	\$1,685.91	\$0.00	\$0.00	\$1,155.75	\$11,706.58
Voya Indx Solution 2050 Pt Adv	\$4,079.37	\$1,248.00	\$942.90	\$0.00	\$0.00	\$750.75	\$7,021.02
Voya Indx Solution Inc P Adv	\$2,616.52	\$832.00	\$0.00	\$0.00	\$0.00	\$154.60	\$3,603.12
Voya Intermediate Bond Port I	\$116,260.35	\$5,057.54	\$0.00	\$0.00	\$0.00	(\$2,009.71)	\$119,308.18
Voya Mid Cap Opport Port I	\$100,811.36	\$3,355.46	\$0.00	\$0.00	\$0.00	\$11,315.72	\$115,482.54
Voya Russell MidCap Indx Prt I	\$46,053.72	\$624.00	\$0.00	\$0.00	\$0.00	\$9,773.51	\$56,451.23
Plan Total	\$637,278.90	\$30,484.00	\$0.00	\$0.00	\$0.00	\$77,237.81	\$745,000.71

Summary By Fund

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
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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 Passaic Valley Sewerage Commission / I.B.E.W 1158 Annuity Plan and Trust 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) Passaic Valley Sewerage Commission / I.B.E.W. Local 1158 1149 Bloonfield Avenue US Clifton NJ 07012	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ►</td> <td style="width: 20%; text-align: center;">004</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/01/2002</td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) 22-0886457</td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number (973) 344-1800</td> </tr> <tr> <td colspan="2">2d Business code (see instructions) 813930</td> </tr> </table>	1b Three-digit plan number (PN) ►	004	1c Effective date of plan 01/01/2002		2b Employer Identification Number (EIN) 22-0886457		2c Plan Sponsor's telephone number (973) 344-1800		2d Business code (see instructions) 813930	
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2c Plan Sponsor's telephone number (973) 344-1800											
2d Business code (see instructions) 813930											

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		<u>10-10-22</u>	George Serio
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE		<u>10-10-22</u>	George Serio
	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

[illegible]

Schedule H, line 4j
Schedule of Reportable Transactions.

[illegible]