Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- [X] 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. . . . . ▶ [X]

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/27/1956

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)
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

12 EIGHTH STREET, SUITE 500
PITTSBURGH, PA 15222

2b Employer Identification Number (EIN) 25-6135576

2c Plan Sponsor's telephone number 412-263-0900

2d Business code (see instructions) 561110

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.	10/17/2022	PAUL SCABILLONI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	

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

5 Total number of participants at the beginning of the plan year	**5**	16534
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)**	8141
a(2) Total number of active participants at the end of the plan year	**6a(2)**	7299
b Retired or separated participants receiving benefits	**6b**	4480
c Other retired or separated participants entitled to future benefits	**6c**	4665
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	16444
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	815
f Total. Add lines **6d** and **6e**	**6f**	17259
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	472

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

1B

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

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

a Pension Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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

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

A Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions

Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
THE UNION LABOR LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1423090	69744	GA-02095		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	(b) Total amount of fees paid
0	42135

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

THE UNION LABORER LIFE INSURANCE CO
8403 COLEVILLE ROAD 13TH FLOOR
SILVER SPRINGS, MD 20910

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
	42135	MANAGEMENT FEES	0

(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		
	(c) Amount	(d) Purpose	(e) Organization code

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

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

Specify nature of costs ▶

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

(3) ☐ other (specify) ▶

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

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

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

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

b	Balance at the end of the previous year		7b	6166838
c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	217391	
	(4) Transferred from separate account	7c(4)		
	(5) Other (specify below)	7c(5)	5720	
	▶ REALIZED & UNREALIZED GAINS			
	(6) Total additions		7c(6)	223111
d	Total of balance and additions (add lines **7b** and **7c(6)**)		7d	6389949
e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
	(2) Administration charge made by carrier	7e(2)	42135	
	(3) Transferred to separate account	7e(3)		
	(4) Other (specify below)	7e(4)		
	▶			
	(5) Total deductions		7e(5)	42135
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)		7f	6347814

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.			**10b**	

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE MB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information

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

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

OMB No. 1210-0110

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

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

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

A Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

E Type of plan: **(1)** [X] Multiemployer Defined Benefit **(2)** [ ] Money Purchase (see instructions)

1a	Enter the valuation date: Month 01 Day 01 Year 2021		
b	Assets		
(1)	Current value of assets	**1b(1)**	817998454
(2)	Actuarial value of assets for funding standard account	**1b(2)**	801680506
c	**(1)** Accrued liability for plan using immediate gain methods	**1c(1)**	1262477275
(2)	Information for plans using spread gain methods:		
(a)	Unfunded liability for methods with bases	**1c(2)(a)**	
(b)	Accrued liability under entry age normal method	**1c(2)(b)**	
(c)	Normal cost under entry age normal method	**1c(2)(c)**	
(3)	Accrued liability under unit credit cost method	**1c(3)**	1262477275
d	Information on current liabilities of the plan:		
(1)	Amount excluded from current liability attributable to pre-participation service (see instructions)	**1d(1)**	
(2)	"RPA '94" information:		
(a)	Current liability	**1d(2)(a)**	2566319857
(b)	Expected increase in current liability due to benefits accruing during the plan year	**1d(2)(b)**	53258198
(c)	Expected release from "RPA '94" current liability for the plan year	**1d(2)(c)**	108245659
(3)	Expected plan disbursements for the plan year	**1d(3)**	108245659

Statement by Enrolled Actuary

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

SIGN HERE

	10/12/2022
Signature of actuary	Date
BRADFORD L. RIGBY	20-07217
Type or print name of actuary	Most recent enrollment number
COWDEN ASSOCIATES, INC.	412-394-9980
Firm name	Telephone number (including area code)
FOUR GATEWAY CENTER, SUITE 605, 444 LIBERTY AVENUE, PITTSBURGH, PA 15222	
Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	**2a**		817998454
b "RPA '94" current liability/participant count breakdown:		**(1)** Number of participants	**(2)** Current liability
(1) For retired participants and beneficiaries receiving payment		5232	1349545779
(2) For terminated vested participants		3161	305317656
(3) For active participants:			
(a) Non-vested benefits			42939300
(b) Vested benefits			868517122
(c) Total active		8141	911456422
(4) Total		16534	2566319857
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	**2c**		31.87 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	**(b)** Amount paid by employer(s)	**(c)** Amount paid by employees	**(a)** Date (MM-DD-YYYY)	**(b)** Amount paid by employer(s)	**c)** Amount paid by employees
07/01/2021	78296655	0			
			Totals ► **3(b)**	78296655	**3(c)** 0

(d) Total withdrawal liability amounts included in line 3(b) total	**3(d)**	238404

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	**4a**	63.5 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	**4b**	E

c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? [X] Yes [ ] No

d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? [ ] Yes [ ] No

e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	**4e**	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here [ ]	**4f**	

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

a [ ] Attained age normal **b** [ ] Entry age normal **c** [X] Accrued benefit (unit credit) **d** [ ] Aggregate

e [ ] Frozen initial liability **f** [ ] Individual level premium **g** [ ] Individual aggregate **h** [ ] Shortfall

i [ ] Other (specify):

j If box h is checked, enter period of use of shortfall method	**5j**	

k Has a change been made in funding method for this plan year? [ ] Yes [X] No

l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval? [ ] Yes [ ] No

m If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method	**5m**	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability				**6a**	2.43 %
		Pre-retirement		Post-retirement	
b Rates specified in insurance or annuity contracts		☐ Yes ☐ No ☒ N/A		☐ Yes ☐ No ☒ N/A	
c Mortality table code for valuation purposes:					
(1) Males	**6c(1)**	11P		11P	
(2) Females	**6c(2)**	11FP		11FP	
d Valuation liability interest rate	**6d**	7.50 %		7.50 %	
e Expense loading	**6e**	15.6 %	☐ N/A	0.0 %	☐ N/A
f Salary scale	**6f**	%	☒ N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date				**6g**	7.8 %
h Estimated investment return on current value of assets for year ending on the valuation date				**6h**	9.1 %

7 New amortization bases established in the current plan year:

(1) Type of base	**(2)** Initial balance	**(3)** Amortization Charge/Credit
1	14168223	1493097

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval	**8a**	
b(1) Is the plan required to provide a projection of expected benefit payments? (See the instructions.) If "Yes," attach a schedule		☒ Yes ☐ No
b(2) Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach a schedule		☒ Yes ☐ No
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?		☐ Yes ☒ No
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?		☐ Yes ☐ No
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended	**8d(2)**	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?		☐ Yes ☐ No
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	**8d(4)**	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	**8d(5)**	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?		☐ Yes ☐ No
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	**8e**	

9 Funding standard account statement for this plan year:

Charges to funding standard account:

a Prior year funding deficiency, if any			**9a**
b Employer's normal cost for plan year as of valuation date			**9b** 19108934
c Amortization charges as of valuation date:		Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	**9c(1)**	519319445	68095112
(2) Funding waivers	**9c(2)**	0	0
(3) Certain bases for which the amortization period has been extended	**9c(3)**	0	0
d Interest as applicable on lines 9a, 9b, and 9c			**9d** 6540303
e Total charges. Add lines 9a through 9d			**9e** 93744349

Credits to funding standard account:

f	Prior year credit balance, if any		**9f**	58522677
g	Employer contributions. Total from column (b) of line 3		**9g**	78296655
		Outstanding balance		
h	Amortization credits as of valuation date	**9h** 0		0
i	Interest as applicable to end of plan year on lines 9f, 9g, and 9h		**9i**	6852077
j	Full funding limitation (FFL) and credits:			
	(1) ERISA FFL (accrued liability FFL)	**9j(1)** 578810509		
	(2) "RPA '94" override (90% current liability FFL)	**9j(2)** 1567043619		
	(3) FFL credit		**9j(3)**	0
k	**(1)** Waived funding deficiency		**9k(1)**	0
	(2) Other credits		**9k(2)**	0
l	Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)		**9l**	143671409
m	Credit balance: If line 9l is greater than line 9e, enter the difference		**9m**	49927060
n	Funding deficiency: If line 9e is greater than line 9l, enter the difference		**9n**	
9o	Current year's accumulated reconciliation account:			
	(1) Due to waived funding deficiency accumulated prior to the 2021 plan year		**9o(1)**	0
	(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
	(a) Reconciliation outstanding balance as of valuation date		**9o(2)(a)**	0
	(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))		**9o(2)(b)**	0
	(3) Total as of valuation date		**9o(3)**	0
10	Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)		**10**	
11	Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			[X] Yes [ ] No

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

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

MONDRIAN INTERNATIONAL EQUITY FUND

23-2651513

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

MORGAN STANLEY

23-3060887

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

AMERISERV TRUST & FINANCIAL SERVICE

25-1689052

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

GMO BENCHMARK-FREE ALLOCATION FUND

72-1566419

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

SIGULER GUFF & COMPANY LLC

26-1412407

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

TCW CRESCENT MEZZANINE

26-1326951

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

CAPITAL INSTITUTIONAL SERVICES INC.

75-1565705

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

SIGULER GUFF OPP FUND IV

27-2203321

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

TCW CAPITAL

95-2749628

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

CCA SILVER, LP

27-1295789

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

SIGULER GUFF DISTRESSED OPP III

26-1412407

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

LEXINGTON CAPITAL PARTNERS VII LP

26-4057076

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

LOOMIS, SAYLES & COMPANY LP

04-3200030

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

LEXINGTON PARTNERS

26-4057076

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

ARES SPECIAL OPPORTUNITIES FUND

98-1463109

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

VICTORY CAPITAL

13-2700161

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

ENTRUST REAL ESTATE ADV. SERVICE

25-1561667

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

ENTRUST PARTNERS OFFSHORE LP

90-0644478

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

FRANKLIN BSP CAPITAL LLC

85-2950084

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

U. S. REAL ESTATE INVESTMENT FUND

11-3786306

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

PARTNERS GROUP DIRECT EQUITY IV

98-1438090

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

GLOBAL TRUST COMPANY

26-3761443

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

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

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

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

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

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

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

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

LABORERS COMBINED FUNDS

25-1333639

(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?
14 50	NONE	2115164	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

J.P. MORGAN INVESTMENT MANAGEMENT

13-4994650

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 27 50 51	NONE	488879	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SILCHESTER INTERN'L INVESTORS LLP

36-7045759

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68 71	NONE	483042	Yes [ ] No [X]	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)

BNYMELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50 64 71	NONE	239248	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

CALAMOS ADVISORS LLC

30-6130253

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	221112	Yes [X] No [ ]	Yes [X] No [ ]	4637	Yes [ ] No [ ]

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

PRUDENTIAL REAL ESTATE INVESTORS

22-1211670

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	178786	Yes [ ] No [X]	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)

MORGAN STANLEY DOMESTIC HOLDINGS IN

20-8764829

(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 70	NONE	178000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BOYD WATTERSON

34-1922005

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	144161	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

COWDEN ASSOCIATES INC.

25-1750131

(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?
16 50 70	NONE	144000	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)

RHUMBLINE ADVISORS LIMITED

04-3118582

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	122907	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SEGAL SELECT INSURANCE SERVICES, IN

46-0169194

(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?
53	NONE	82296	Yes [X] No [ ]	Yes [X] No [ ]	15136	Yes [ ] No [ ]

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

CHARTWELL INVESTMENT PARTNERS INC.

13-3800295

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	70330	Yes [ ] No [X]	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)

GOEHRING RUTTER & BOEHM

25-1291135

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	65180	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

HOWARD GROSSINGER

25-1266288

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	51418	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ULLICO INVESTMENT COMPANY

13-1423090

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	42237	Yes [X] No [ ]	Yes [X] No [ ]	6258	Yes [X] 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)

PNC ADVISORS

25-1211909

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 72	NONE	37450	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

VICTORY CAPITAL

13-2700161

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	33333	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SISTERSON & CO. LLP

25-1467156

(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 50	NONE	26215	Yes [ ] No [X]	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)

TCW

27-6148636

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	21959	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PENSION BENEFIT INFORMATION, LLC

82-2042737

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 49	NONE	15709	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

WODARCZYK & ASSOCIATES, LLC

46-1702961

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	13984	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)

FOUNDRY PARTNERS LLC

46-1184506

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	12073	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NCCMP

52-1041104

(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?
17 49	NONE	7165	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

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
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: S&P 500 POOLED INDEX FUND L811

b Name of sponsor of entity listed in (a): RHUMBLINE ADVISERS LIMITED PARTNERS

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)
04-3118582-001	C	315396828

a Name of MTIA, CCT, PSA, or 103-12 IE: AMERICAN FEDERATION OF LABOR & CONG

b Name of sponsor of entity listed in (a): AFL-CIO HOUSING INVESTMENT TRUST

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-6220193-001	C	160465

a Name of MTIA, CCT, PSA, or 103-12 IE: RHUMBLINE S&P SMALL CAP 600 POOL ID

b Name of sponsor of entity listed in (a): RHUMBLINE ADVISORS LIMITED PARTNERS

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)
04-3118582-001	C	54696871

a Name of MTIA, CCT, PSA, or 103-12 IE: CALAMOS GLOBAL OPPORTUNISTIC TRUST

b Name of sponsor of entity listed in (a): CALAMOS ADVISORS LLC

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)
30-6130253-001	C	26845962

a Name of MTIA, CCT, PSA, or 103-12 IE: LABORERS PROPRIETORY CASH FUND

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

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)
25-6078093-101	C	33467215

a Name of MTIA, CCT, PSA, or 103-12 IE: EMPLOYEE REAL EST CONSTR II EQUITY

b Name of sponsor of entity listed in (a): AMERISERV TRUST & FINANCIAL SERVICE

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)
25-1689052-002	C	11661740

a Name of MTIA, CCT, PSA, or 103-12 IE: US BANKCORP ERECT FUND

b Name of sponsor of entity listed in (a): AMERISERV TRUST & FINANCIAL SERVICE

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)
25-1689052-001	C	10070158

a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB MGT STRATEGIC PROPERTY FD

b Name of sponsor of entity listed in (a): J.P. MORGAN

c EIN-PN 13-6038770-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24028434

a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB SPECIAL SITUATION PROPERTY FD

b Name of sponsor of entity listed in (a): J.P. MORGAN

c EIN-PN 13-3980309-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18439762

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

b Name of sponsor of entity listed in (a): SILCHESTER INTL INVESTORS LLP

c EIN-PN 36-7045783-001	**d** Entity code E	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63664073

a Name of MTIA, CCT, PSA, or 103-12 IE: ULLICO MTG SEPARATE ACCOUNT J

b Name of sponsor of entity listed in (a): ULLICO INVESTMENT COMPANY

c EIN-PN 13-1423090-203	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6347814

a Name of MTIA, CCT, PSA, or 103-12 IE: RHUMBLINE S&P MID CAP 400 POOL ID

b Name of sponsor of entity listed in (a): RHUMBLINE ADVISORS LIMITED PARTNERS

c EIN-PN 04-3118582-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45249741

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

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

c EIN-PN 80-6249702-006	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5825681

a Name of MTIA, CCT, PSA, or 103-12 IE: FBO FRANKLIN BSP CAPITAL CORP

b Name of sponsor of entity listed in (a): FBO FRANKLIN BSP CAPITAL CORP

c EIN-PN 85-2950084-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5347166

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

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
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

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	648203	-699079
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	7073522	7924123
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	2047551	4582563
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		14709
(2) U.S. Government securities	1c(2)	52780513	56464632
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	34544636	29147028
(B) All other	1c(3)(B)	44106695	42142625
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	4876127	36925
(5) Partnership/joint venture interests	1c(5)	44503994	50452688
(6) Real estate (other than employer real property)	1c(6)	13111975	14455017
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	445653403	557537836
(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)	57015381	63664073
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	112443900	101772765
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	45134	42017

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	818851034	927537922
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h	852580	1120226
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		14072
k	Total liabilities (add all amounts in lines 1g through1j)	1k	852580	1134298
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	817998454	926403624

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)	78296655	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		78296655
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	-4771	
	(B) U.S. Government securities	2b(1)(B)	891239	
	(C) Corporate debt instruments	2b(1)(C)	2273146	
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)	3948	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		3163562
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)	30007	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3070378	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		3100385
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	92972557	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	90231977	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		2740580
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	3253034	
	(B) Other	2b(5)(B)	-2126993	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		1126041

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		109985506
(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)		6648692
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4289034
c Other income	2c		188870
d Total income. Add all **income** amounts in column (b) and enter total	2d		209539325
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	95816728	
(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)		95816728
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)	309295	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	2273516	
(4) Other	2i(4)	2734616	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		5317427
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		101134155
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		108405170
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: SISTERSON & CO LLP **(2)** EIN: 25-1467156

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:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	

			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?	**4e**	X		3500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**	X		
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ 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 446625.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection.

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

A Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
LABORERS DISTRICT COUNCIL OF W PA P PENSION FUND BOARD OF TRUSTEES

D Employer Identification Number (EIN)
25-6135576

Part I Distributions

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

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

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

EIN(s): _____ _____

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

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | **3** | 61

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

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

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

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

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

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) ..... | **6a** |

b Enter the amount contributed by the employer to the plan for this plan year ..... | **6b** |

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... | **6c** |

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that 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: [X] last contributing employer [ ] alternative [ ] reasonable approximation (see instructions for required attachment)	**14a**	54
b The plan year immediately preceding the current plan year. [X] Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	49
c The second preceding plan year. [X] Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	46

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**	1.10
b The corresponding number for the second preceding plan year	**15b**	1.17

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: 62 % Investment-Grade Debt: 16 % High-Yield Debt: 8 % Real Estate: 12 % Other: 2 %

b Provide the average duration of the combined investment-grade and high-yield debt:
[ ] 0-3 years [X] 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)?
[X] 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 _____

SISTERSON
CERTIFIED PUBLIC
ACCOUNTANTS & CONSULTANTS

Sisterson & Co. LLP
310 Grant Street, Suite 2100
Pittsburgh, Pennsylvania
15219-2300

Phone 412 281 2025
Fax 412 338 4597
Web www.sisterson.com

INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees of
Laborers' District Council of Western Pennsylvania Pension Fund

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, 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 the Fund'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.

Auditor's Responsibility 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 the Fund's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Fund'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.

Gelman & Co LLP

October 12, 2022

PPA Funded Percentage

Projection of Liability to January 1, 2021	
Actuarial Accrued Liability, January 1, 2020	$ 1,232,342,717
Normal Cost	16,200,279
Estimated Benefit Payments	93,191,825
Interest at 7.50% to End of Year	
On Actuarial Accrued Liability and Normal Cost	93,640,725
On Estimated Benefit Payments	3,785,918
Estimated Actuarial Accrued Liability, January 1, 2021	1,245,205,978
Estimated Actuarial Value of Plan Assets, January 1, 2021	801,689,997
Funded Percentage (Ratio of Assets to Liabilities), January 1, 2021	64.38%

A funded percentage of less than 80% indicates that the plan is endangered, depending on whether the plan also satisfies the credit balance requirement detailed on the following page.

Projected Funded Percentage

The projected funded percentages shown below do not affect the determination of whether the plan is endangered or critical for 2021. They are shown to give an indication of anticipated future progress.

January 1, 2022	68%
January 1, 2023	72%
January 1, 2024	77%
January 1, 2025	81%
January 1, 2026	86%
January 1, 2027	91%
January 1, 2028	96%
January 1, 2029	101%
January 1, 2030	107%
January 1, 2031	113%
January 1, 2032	120%

Credit Balance Projection and Conclusion

The following table shows the estimated credit balance for the next 7 years. To avoid the endangered or critical categories, the credit balance must be expected to remain positive for the current year and the following six years.

Estimated Credit Balance

December 31, 2020	$ 58,990,000
December 31, 2021	67,550,000
December 31, 2022	77,800,000
December 31, 2023	88,980,000
December 31, 2024	103,610,000
December 31, 2025	119,550,000
December 31, 2026	138,880,000
December 31, 2027	169,160,000
December 31, 2028	206,210,000

The above projections were developed from January 1, 2020 census data and estimated December 31, 2020 plan assets. As indicated, the credit balance is expected to remain positive for at least the current and following six years.

Conclusion

The plan does not satisfy the funded percentage test for 2021. Consequently, the plan is in the yellow zone for 2021.

Actuarial Methods and Assumptions

As of January 1, 2021

Interest Rates

	Current Year	Prior Year
Minimum/Maximum Funding	7.50%	7.50%
Present Value of Accrued Benefits	7.50%	7.50%
Full Funding Limitation		
Maximum Basis	2.43%	2.95%
RPA Current Liability	2.43%	2.95%

Mortality

Healthy: RP-2000 Combined Healthy Blue Collar Mortality Table, generational by scale AA.

Disabled: RP-2000 Disabled Mortality Table

RPA '94: RP-2000 Mortality tables projected past the valuation date by 7 years for retirees and by 15 years for those not in payment, according to IRS regulations.

Turnover

Based on age as follows:

Age	Rate
20	11.94%
30	11.21
40	9.40
50	4.83

Disability

Based on age as follows:

Age	Rate
20	0.05%
30	0.05
40	0.11
50	0.30
60	0.97

Expenses

The normal cost is increased by the prior year's non-investment related expenses rounded to the nearest $1,000. For projections, this amount has been increased by 2.00% annually.

Percent Married

80% of the participants are assumed to be married at death, with the female spouse three years younger than the male spouse.

Actuarial Methods and Assumptions (continued)

Retirement

For active participants at least age 45 with 20+ years of service on 1/1/2011, based on year since attainment of age 55 with 30 years of service, as follows:

Years Since 55/30	Rate
<1	40%
1-7	10
8+	100

100% of participants are assumed to retire at age 62.

For all other active participants, based on age as follows:

Age	Rate
60	50%
61	10
62	100

Terminated vested participants are assumed to retire at age 62.

Asset Valuation

Plan assets are carried at market value with a 5 year averaging of the difference between actual and expected investment performance. The trustees elected to apply relief options made available by the Pension Relief Act of 2010, which spread investment losses during the 2008 plan year over a 10 year period. The Actuarial Value of Assets is subject to limits of 80% and 120% of Market Value.

Funding Method

Unit Credit. The unit credit actuarial cost method develops normal cost and actuarial accrued liability separately for each individual in the plan. The normal cost is the present value of the individual's benefits expected to be earned in the current year. The individual's actuarial accrued liability is the present value of the individual's benefits earned in previous years.

Incomplete Data

Missing Dates of Birth for 180 participants. Actives were assumed to be 40 years old, Terminated Vested participants were assumed to be 45 years old, Disabled participants were assumed to be 65 years old, and Retirees were assumed to be 75 years old.

Benefit Accrual Rate

Pension credits and expected contributions were projected on the assumption that all active participants would work the hours equal to the average of the prior three years. Contribution levels are assumed to be equal to the same rate per hour as was earned in the prior year.

Actuarial Methods and Assumptions (continued)

Calculation of Actuarial Present Value of Accrued Plan Benefits

The actuarial present value of accrued benefits has been calculated as of the valuation date, based upon the Plan specifications then in effect and upon each participant's age and service as of that date. These calculations consider the same actuarial assumptions as were used in the actuarial valuation.

Models Used in Preparing Results

Cowden Associates, Inc. uses valuation and projection software to model benefit cash flows, present values, and attribution to various periods based on deterministic or stochastic assumption sets and benefit parameters provided by the user. The software model also supports comparisons between periods to measure gains and losses and compile plan experience data to support or modify demographic and certain economic assumptions.

In the absence of adequate review, the model's complexity and flexibility could lead to unintentional results. However, the model contains robust tools to test and verify the reasonableness of results. Our internal technical review utilizes these tools.

We have reviewed the model's documentation, and have relied on the expertise of the software vendor for underlying structure, methodology, and extensive supporting calculations. We have not performed a substantial audit of the model or its structure beyond typical use in preparing results as this is typically not done by plan actuaries. However, we expect that the very deep market of qualified users for this same model ensures that no materially significant issues can or will persist.

Plan Provisions

Effective January 1, 1960
Last Amendment Effective May 27, 2015

The following is a summary of the major provisions of the plan as of January 1, 2021. Refer to the plan document for a more complete description of the most recent plan provisions.

Participation

First day of plan year in which 300 hours of employment are credited in Fund on employee's behalf.

Credited Service

The lesser of:
a) The number of complete years and quarters from first day of month of hire to break in service or retirement,
or
b) The total number of hours worked divided by 1,000 and rounded to the next lower quarter.

Accrued Benefit

A monthly benefit equal to the following:

a) $15.00 per year of Credited Service prior to June 27, 1956, plus
b) 4% of all contributions prior to January 1, 2002, plus
c) 3.35% of all contributions during 2003, plus
d) 2.25% of all contributions during 2004, plus
e) 1% of all contributions on or after January 1, 2005.

Normal Retirement

Eligibility: Age 62 and 1 year of Credited Service (5 years if participation begins on or after January 1, 1999).

Benefit: The Accrued Benefit

Vested Termination

Eligibility: Any of the following:

a) Five Years of Credited Service
b) Age 52 with 1 year of Credited Service (5 years if participation begins on or after January 1, 1999)
c) Age plus Credited Service equal to or greater than 62.

Benefit: The Accrued Benefit payable at age 62 or, for those with at least 10 pension credits, as early as age 57 reduced for early commencement.

Plan Provisions (continued)

Early Retirement

Eligibility: Age 52 with 1 year of Credited Service (5 years if participation begins on or after January 1, 1999).

Benefit: The Accrued Benefit reduced according to the following:

a) Grandfathered Participants
   - The 12/31/2010 amount reduced by 3% per year prior to age 60 (age 62 if not retirement eligible and age plus credited service was less than 62) until age 57 and 6% per year thereafter.
   - The amount accrued after 12/31/2010 reduced by 6% per year before age 60, but without reduction if the participant has attained age 55 and been credited with 30 or more years of service.

b) Non-grandfathered Participants
   - 6% per year

Disability Retirement

Eligibility: Total and Permanent Disability at any age with at least 10 years of Credited Service with eligibility based on Social Security approval.

Benefit: The Accrued Benefit. Effective January 1, 2011, the Accrued Benefit is reduced by 0.50% (maximum of 50%) for each month in which commencement precedes the Normal Retirement.

Pre-Retirement Death – Spouse's Benefit

Eligibility: Married at the time of death and eligible for a Vested Termination Benefit.

Benefit: The standard Qualified Preretirement Survivor Annuity. 50% of the benefit the employee would have received had retired before the date of death and elected the standard joint and survivor option. If the participant died prior to the earliest date eligible for an early retirement benefit, the spouse's benefit is deferred to the date the employee would have been 52.

Laborers' District Council of Western Pennsylvania Pension Fund
EIN: 25-6135576; Plan Number: 001
Attachment to 2021 Schedule MB, line 9c and 9h - Schedule of Funding Standard Account Bases

Schedule of Actuarial Liabilities and Amortization Payments

MINIMUM FUNDING

	Initial Amount	Date Established	Remaining Period	Balance	Payment
Charges					
Amendment 92	$ 1,227,719	1/1/1992	1.0	$ 96,700	$ 96,700
Amendment 93	6,628,668	1/1/1993	2.0	1,010,497	522,100
Amendment 93	1,333,097	1/1/1993	2.0	206,483	105,000
Amendment 94	1,136,307	1/1/1994	3.0	250,203	89,500
Amendment 95	5,569,808	1/1/1995	4.0	1,580,720	438,700
Amendment 96	26,557,838	1/1/1996	5.0	9,098,264	2,091,800
Amendment 98	39,033,217	1/1/1998	7.0	17,505,570	3,074,410
Assumption 99	20,883,871	1/1/1999	8.0	10,357,597	1,644,896
Amendment 00	32,608,869	1/1/2000	10.0	18,952,299	2,568,403
Amendment 01	3,642,441	1/1/2001	10.0	2,117,279	286,893
Assumption 04	18,727,288	1/1/2004	13.0	12,885,185	1,475,035
Assumption 06	44,967,811	1/1/2006	15.0	33,609,427	3,541,842
Experience Loss 07	5,522,291	1/1/2007	1.0	581,958	581,958
Experience Loss 09	10,423,676	1/1/2009	3.0	3,070,885	1,098,483
PRA Relief 09	110,377,115	1/1/2009	17.0	89,028,949	8,778,637
PRA Relief 10	16,813,045	1/1/2010	17.0	13,705,383	1,351,381
PRA Relief 11	15,171,136	1/1/2011	17.0	12,509,666	1,233,477
Assumption 12	46,719,562	1/1/2012	6.0	18,114,991	3,589,984
Experience Loss 12	50,896,464	1/1/2012	6.0	27,149,292	5,380,426
PRA Relief 12	16,566,609	1/1/2012	17.0	13,831,825	1,363,850
Experience Loss 13	8,779,113	1/1/2013	7.0	6,658,046	1,169,301
Experience Loss 14	10,189,432	1/1/2014	8.0	6,761,480	1,073,798
Experience Loss 15	4,529,194	1/1/2015	9.0	3,273,007	477,302
Experience Loss 16	48,176,965	1/1/2016	10.0	37,463,022	5,077,056
Experience Loss 17	47,012,246	1/1/2017	11.0	38,961,126	4,954,314
Experience Loss 18	46,239,249	1/1/2018	12.0	40,519,837	4,872,853
Experience Loss 19	56,848,510	1/1/2019	13.0	52,332,121	5,990,894
Experience Loss 20	34,853,820	1/1/2020	14.0	33,519,363	3,673,017
Experience Loss 21	14,168,223	1/1/2021	15.0	14,168,223	1,493,097
Subtotal				$ 519,319,445	$ 68,095,112
Credits					
None					
Subtotal					
Net Amortization Balance and Payment				$ 519,319,445	$ 68,095,112
Credit Balance as of January 1, 2021				58,522,677	
Unfunded Liability				$ 460,796,769	

Remarks

Plan Changes

None

Method Changes

None

Assumption Changes

The assumptions have been reviewed, and the following changes made:

- The interest rate used to calculate RPA ’94 current liability has been changed from 2.95% to 2.43% to fall within prescribed limitations that fluctuate yearly. The mortality assumption for RPA ’94 current liability has also been updated as mandated.

Laborers' District Council of Western Pennsylvania Pension Fund
EIN: 25-6135576; Plan Number: 001
Attachment to 2021 Schedule MB, Line 8b(1) - Schedule of Projection of Expected Benefit Payments

Plan Year	Expected Annual Benefit Payments
2021	107,340,392
2022	103,465,049
2023	104,514,451
2024	107,070,394
2025	105,981,768
2026	106,778,425
2027	109,127,304
2028	109,813,103
2029	110,939,454
2030	111,918,586

LABORERS' DISTRICT COUNCIL OF WESTERN PA PENSION FUND
Attachment for Form 5500
25-6135576
For the Year Ending 12/31/2021

Form 5500

Schedule H Part I Line 1,b (3)

Prepaid Expenses	25,238	
Accrued Interest & Dividends	715,224	
Retirement Benefits Receivable	19,011	
Sales Pending	3,822,400	
Accounts Receivables	690	
TOTAL OTHER RECEIVABLES	**4,582,563**	**1,b,3**

Form 5500

Schedule H Part II Line 2,i,(1) Professional Fees

Actuarial Services	144,000	
Legal Services	135,652	
Auditing and Accounting ``	29,643	
	309,295	**i,2**

Schedule H Part II Line 2,i,(3) Other

Investment Manager Expenses	2,095,516	
Investment Advisory Expenses	178,000	
	2,273,516	**i,3**

Schedule H Part II Line 2,i,(4) Other

Adminstrative Services	2,115,164	
Pension Benefit Guaranty Ins.	512,740	
Fiduciary Resposibility Ins.	82,296	
Retiree Research Fees	15,709	
Miscellaneous Expense	4	
NCCMP Membership	7,165	
990T Taxes	1,538	
TOTAL OTHER EXPENSES	**2,734,616**	**i ,4**

EXTENDED UNTIL 10/17/2022

Form 5500	Annual Return/Report of Employee Benefit Plan	OMB Nos. 1210-0110 1210-0089
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	2021 This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for: [X] 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. ▶ [X]

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/27/1956

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)
LABORERS DISTRICT COUNCIL OF W PA P
PENSION FUND BOARD OF TRUSTEES

12 EIGHTH STREET, SUITE 500

PITTSBURGH PA 15222

2b Employer Identification Number (EIN) 25-6135576

2c Plan Sponsor's telephone number 412-263-0900

2d Business code (see instructions) 561110

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	[signature]	10/04/2022	Philip Ameris, Chairman
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	[signature]	10-4-22	Paul V. Scabilloni, Sec. Treasurer
	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

Laborers' District Council of Western Pennsylvania Pension Fund
EIN: 25-6135576; Plan Number: 001
Attachment to 2021 Schedule MB, Line 8b – Schedule of Active Participant Data

Attained	Years of Service (elapsed time service from hire)										
Age	< 1	1-4	5-9	10-14	15-19	20-24	25-29	30-34	35-39	40+	Total
< 25	267	682	67	-	-	-	-	-	-	-	1,016
25-30	298	744	281	30	-	-	-	-	-	-	1,353
30-35	143	490	273	145	17	-	-	-	-	-	1,068
35-40	93	358	189	162	88	31	-	-	-	-	921
40-45	77	287	131	114	108	108	5	-	-	-	830
45-50	57	204	105	102	106	137	53	15	-	-	779
50-55	38	200	107	98	96	129	68	67	25	-	828
55-60	33	133	95	88	104	137	67	92	56	10	815
60-65	8	74	51	60	67	77	37	46	22	29	471
65-70	3	13	7	6	5	7	2	4	4	6	57
70+	-	1	-	1	-	-	1	-	-	-	3
unknown	-	-	-	-	-	-	-	-	-	-	-
Total	1,017	3,186	1,306	806	591	626	233	224	107	45	8,141

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31, 2021	December 31, 2020
ASSETS		
Investments (Note 4)	$ 915,031,236	$ 809,729,960
Receivables		
Contributions receivable	7,924,123	7,073,522
Due from broker for securities sold	3,822,400	12,190
Accrued interest and dividends receivable	715,224	853,808
Other	44,939	49,411
	12,506,686	7,988,931
Prepaid pension retirement benefit	--	1,132,143
Total assets	$ 927,537,922	$ 818,851,034
LIABILITIES		
Current liabilities		
Accounts payable	$ 576,055	$ 618,864
Amount due to Laborers' Combined Funds	544,171	233,716
Payable for investments purchased	14,072	--
Total liabilities	1,134,298	852,580
Net assets available for benefits	$ 926,403,624	$ 817,998,454

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

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	Year ended December 31, 2021	2020
Investment income		
Net appreciation in fair value of investments	$ 124,978,723	$ 64,171,106
Interest and dividends	6,263,947	6,825,572
Less investment expense	(2,095,516)	(2,047,064)
Net investment income	129,147,154	68,949,614
Employer contributions	78,296,655	76,418,892
Total additions	207,443,809	145,368,506
Benefits paid		
Pension retirement benefits	93,543,794	91,325,387
Lump-sum pension benefits	3,862	5,411
Death benefits	2,269,072	1,861,027
Total benefits paid	95,816,728	93,191,825
Administrative expenses		
Administrative services	2,115,161	2,046,584
Pension benefit guaranty insurance	512,740	516,210
Investment performance evaluation	178,000	178,000
Actuarial services	144,000	140,000
Legal services	135,652	132,930
Fiduciary responsibility insurance	82,296	82,155
Auditing and accounting services	29,643	29,586
Miscellaneous expense	17,254	18,871
Trustees expenses	7,165	7,165
Total administrative expenses	3,221,911	3,151,501
Total deductions	99,038,639	96,343,326
Net increase	108,405,170	49,025,180
Net assets available for benefits, beginning of year	817,998,454	768,973,274
Net assets available for benefits, end of year	$ 926,403,624	$ 817,998,454

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

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN

The following brief description of the Laborers' District Council of Western Pennsylvania Pension Fund (the "Fund") provides only general information. Additional information about the vesting and benefit provisions and the Pension Benefit Guaranty Corporation's ("PBGC") benefit guarantee is contained in the Plan Document and Summary Plan Description, which are available from the plan administrator.

General

The Fund, a multi-employer defined benefit pension fund, was formed in 1956 under an agreement between the Master Builders Association of Western Pennsylvania and the Laborers' District Council of Western Pennsylvania (the "Council"). The agreement provides, among other things, that employers of individuals who are covered under collective bargaining agreements with the Council contribute various amounts for each hour worked. The Fund is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Bank of New York Mellon Corporation ("BNY Mellon") serves as the custodian of substantially all of the Fund's investment assets and, together with several investment managers, manages substantially all of the Fund's investments.

Contributions

For the years ended December 31, 2021 and 2020, the Fund's contributions met the minimum funding requirements of the ERISA, as amended by the Pension Protection Act of 2006 ("PPA"). The PPA requires an annual actuarial status determination for multi-employer pension plans.

Effective January 1, 2021, the actuary estimated the funding percentage at less than 80% however, the Fund satisfies the credit balance requirement as it is expected to remain positive for at least the current and following six years, which indicates that the Fund is in Endangered status, as defined by PPA, for the year ended December 31, 2021. The PPA requires that the Fund's trustees of a multi-employer pension plan, that has been certified by its actuary as being in endangered status, to adopt a Funding Improvement Plan that is intended to restore the financial health of the plan. The Funding Improvement Plan adopted in January 2018 remains in effect.

Effective January 1, 2019, the actuary estimated the funding percentage at less than 80%, however, the Fund satisfied the credit balance requirement as it was expected to remain positive for at least the current and following six years, which indicates that the Fund had emerged from Critical status into Endangered status, as defined by PPA, for the year ended December 31, 2020. The PPA requires that the Fund's trustees of a multi-employer pension plan, that has been certified by its actuary as being in endangered status, to adopt a Funding Improvement Plan that is intended to restore the financial health of the plan. Effective January 31, 2018 the Fund, adopted a plan with no changes to benefits or contributions as structured under the Rehabilitation Plan that was established in 2017.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Payments of benefits

The Fund provides for benefits to or on behalf of covered participants based upon contributions credited to a member's account and years of service as defined in the Fund's agreement. The Fund provides for actuarially equivalent benefits for early retirement and joint survivor options.

Vesting

A participant is 100% vested in earned benefits when his age plus his credited service units (both past and future) equal 62 with one service credit. A participant is also 100% vested at age 52 with one year of credited service prior to January 1, 1999, or at any time with five or more years of service credit. Service credits are determined by either the number of complete years and quarters of covered service or the number of years without a break in service determined by dividing the number of hours worked by 1,000.

Plan termination

In the event the Plan terminates, the net assets of the Plan will be allocated, as prescribed by ERISA and its related regulations, generally to provide the following benefits in the order indicated:

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

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

c. Other vested benefits insured by the PBGC up to the applicable limitations discussed below.

d. Vested benefits not insured by the PBGC.

e. All nonvested benefits.

NOTE 1 - DESCRIPTION OF THE PLAN (continued)

Plan termination (continued)

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits and certain disability and survivor's pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination. However, there is a statutory ceiling, which is adjusted periodically, on the amount of an individual's monthly benefit that the PBGC guarantees.

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

NOTE 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 accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, benefit obligations and changes therein, eligibility credits, claims payable and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Valuation of investments and income recognition

Interest and non-interest bearing cash is valued at cost, which approximates fair value. Registered investment companies and common stocks are valued based on publicly available prices in active markets. 103-12 investment entities and limited partnerships/joint venture interests are valued at their net asset value ("NAV"). The NAV is determined based on the number of units/shares held by the fund times the fair value of the underlying investments held at the measurement date. The price per share is based on the value of the underlying assets owned by the Fund, minus its liabilities, and then divided by the number of shares outstanding. Private equity, real estate, and common collective trust funds are valued based on the estimated fair value of their underlying assets. Corporate securities (common stocks) and fixed income securities (U.S. government, international government, corporate bonds, and other) are valued based on closing market prices.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Valuation of investments and income recognition (continued)

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 in fair value of investments includes the Fund's gains and losses on investments bought and sold as well as held during the year.

Investments are exposed to various risks, such as interest rate, market and credit risk. Due to the level of risk associated with investments and the level of uncertainty related to changes in the value of individual investments, it is at least reasonably possible that significant changes can occur in fair value that may materially affect the amounts reported in the financial statements.

The Fund's investment policy allows the use of derivatives by investment managers for investment portfolio strategies that include managing interest rate or currency risk through hedging, reducing transaction costs by substituting stock or bond index futures or options for assets in the underlying cash market, enhancing returns, and facilitating shifts in asset allocation. The policy states that derivatives may not be used in a speculative manner or to leverage the investment portfolio. The Fund had foreign exchange contracts that are valued at fair value as of December 31, 2021 and 2020. Certain of these foreign exchange contracts are entered into with respect to pending settlements of foreign securities transactions.

Payment of benefits

Benefit payments to participants are recorded upon distribution.

Accumulated plan benefits

Accumulated plan benefits (see Note 3) are those future periodic payments, including distributions that are attributable under the Fund's provisions to the service participants have rendered. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated participants or their beneficiaries, (b) beneficiaries of participants who have died, and (c) present participants or their beneficiaries.

Benefits under the Plan are based on employees' compensation during their last five years of credited service. The accumulated plan benefits for active employees are based on their average compensation during the five years preceding the valuation date. Benefits payable under all circumstances – retirement, death, disability and termination of employment – are included, to the extent they are deemed attributable to employee service rendered to the valuation date. Benefits to be provided via annuity contracts excluded from plan assets are excluded from accumulated plan benefits.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (continued)

Plan tax status

The Fund obtained its latest determination letter on May 11, 2015. The Internal Revenue Service stated that the Fund and related trust, as then designed, were in compliance with the applicable requirements of the Internal Revenue Code and therefore not subject to tax. The Fund's tax returns for tax years 2018 and beyond remain subject to examination by the Internal Revenue Service.

Contributions

Employer contributions are recognized as additions to net assets when earned by participants on the basis of hours worked. Contributions receivable represent amounts collected subsequent to year end, but which are applicable to hours worked during the year.

Administrative expenses

Administrative expenses are paid by the Fund. Administrative services are provided by Laborers' Combined Funds of Western Pennsylvania ("LCFOWPA"), an organization affiliated with the Council. The Fund incurs an administrative fee equal to its proportionate share of direct and indirect costs for services provided by LCFOWPA.

Subsequent events

The Fund evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements consider events through October 12, 2022, the date on which the financial statements were available to be issued.

NOTE 3 - ACCUMULATED PLAN BENEFITS

An actuary determines the actuarial present value of accumulated plan benefits, which is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

NOTE 3 - ACCUMULATED PLAN BENEFITS (continued)

The accumulated plan benefit information as of the beginning of each plan year was as follows:

	2020	2019
Actuarial present value of accumulated plan benefits		
Vested benefits		
Participants currently receiving payments	$ 779,939,537	$ 755,163,049
Other participants	468,417,100	463,501,582
	1,248,356,637	1,218,664,631
Nonvested benefits	14,120,638	13,678,086
Total actuarial present value of accumulated plan benefits	$ 1,262,477,275	$ 1,232,342,717

Changes in the actuarial present value of accumulated plan benefits were as follows:

	2020	2019
Actuarial present value of accumulated plan benefits, beginning of year	$ 1,232,342,717	$ 1,208,992,887
Benefits accumulated and plan experience	34,332,195	37,447,847
Increase for interest due to the decrease in the discount period	88,994,188	86,953,539
Benefits paid	(93,191,825)	(101,051,556)
Net increase	30,134,558	23,349,830
Actuarial present value of accumulated plan benefits, end of year	$ 1,262,477,275	$ 1,232,342,717

The more significant assumptions underlying the actuarial computations for the years are as follows:

- Assumed rate of return on investments: 7.50%
- Present value of accumulated benefits: 7.50%
- Mortality basis: RP-2000 Combined Healthy Blue Collar Mortality Table

NOTE 3 - ACCUMULATED PLAN BENEFITS (continued)

• Turnover:

Age	Rate
20	11.94%
30	11.21%
40	9.40%
50	4.83%

• Retirement:

The following annual rates of retirement reflect the percentage of employees who will retire upon reaching eligibility for an unreduced early retirement benefit.

Age	Rate
55	40.00%
56-61	10.00%
62	100.00%

• Asset valuation: Market

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

NOTE 4 - INVESTMENTS

The fair values of investments for which market quotations are available are based on quoted market prices of such investments.

The fair values of all other investments are estimated in good faith by management due to the absence of quoted market values. These estimates of fair values are made primarily by using information provided by the general partners and by taking into consideration valuations reported by the Fund's custodian. The Fund has not adjusted any of the fair values provided by the general partners or its custodian. Because of the inherent uncertainty of valuation, those estimated fair values may differ significantly from the values that would have been used had a ready market for those investments existed, and the differences could be material.

The fair values of investments are subject to changes in market conditions, and as such, future fair values may differ significantly from those reported in the financial statements. Investments considered to be permanently impaired in value are written down to their estimated net realizable value and the write-down is recorded as a realized loss on investments.

NOTE 4 - INVESTMENTS (continued)

Investments measured and reported at fair value, except for those that are valued at NAV as a practical expedient, are classified and disclosed in one of the following categories based on the extent of market price observability:

Level I – Quoted prices are available in active markets for identical investments as of the reporting date. The types of investments in Level I include U.S. government securities, registered investment companies, and common stocks.

Level II – Pricing inputs are other than quoted market prices included in Level I however, are observable either directly or indirectly for the investment. The types of investments in Level II include U.S. government securities, international government bonds, interest and non-interest bearing cash, and corporate bonds.

Level III – Pricing inputs are unobservable for the investment and include situations where there is little, if any, market activity for the investment. The inputs into the determination of fair value require significant management judgment or estimation. The types of investments in Level III include common-collective trusts, and private equity and real estate.

NOTE 4 - INVESTMENTS (continued)

Investments consist of the following as of December 31:

	2021				
	Level I	Level II	Level III	NAV	Total
Interest and non-interest bearing cash	$ --	$ (684,370)	$ --	$ --	$ (684,370)
Common-collective trusts	--	--	557,537,836	--	557,537,836
Common stocks	36,925	--	--	--	36,925
Registered investment companies					
Equity mutual funds					
Global equity funds	101,772,765	--	--	--	101,772,765
Corporate bonds	--	71,289,653	--	--	71,289,653
U.S. governmental securities	47,150,979	9,313,653	--	--	56,464,632
103-12 investment entity	--	--	--	63,664,073	63,664,073
Limited partnership/joint venture interests	--	--	--	50,452,688	50,452,688
Private equity and real estate	--	--	14,455,017	--	14,455,017
Other	--	42,017	--	--	42,017
	$ 148,960,669	$ 79,960,953	$ 571,992,853	$ 114,116,761	$ 915,031,236

	2020				
	Level I	Level II	Level III	NAV	Total
Interest and non-interest bearing cash	$ --	$ 648,203	$ --	$ --	$ 648,203
Common-collective trusts	--	--	445,653,403	--	445,653,403
Common stocks	4,876,127	--	--	--	4,876,127
Registered investment companies					
Equity mutual funds					
Global equity funds	112,443,900	--	--	--	112,443,900
Corporate bonds	--	78,651,330	--	--	78,651,331
U.S. governmental securities	44,925,033	7,855,480	--	--	52,780,513
103-12 investment entity	--	--	--	57,015,381	57,015,381
Limited partnership/joint venture interests	--	--	--	44,503,994	44,503,994
Private equity and real estate	--	--	13,111,975	--	13,111,975
Other	--	45,134	--	--	45,134
	$ 162,245,060	$ 87,200,147	$ 458,765,378	$ 101,519,375	$ 809,729,960

NOTE 4 - INVESTMENTS (continued)

The following additional information is provided regarding the Fund's investments valued at NAV its equivalent.

Type	2021	2020	(if currently eligible)	notice period
103-12 investment entity	$ 63,664,073	$ 57,015,381	Monthly	10 days
Limited partnerships/joint venture interest	50,452,688	44,503,994	Quarterly or upon liquidation	90-95 days

These securities invest in equity of companies domiciled in developed markets outside the United States and Canada. They enter forward foreign exchange contracts and engage in derivatives.

As of December 31, 2021, the Fund has unfunded capital commitments of approximately $8,634,000 related to investments in limited partnerships.

The changes in investments measured at fair value for which the Fund has used Level III inputs to determine fair value are as follows:

	2021	2020
Opening balance	$ 458,765,378	$ 396,963,533
Purchases	185,978,658	251,078,049
Sales	(186,050,134)	(252,537,822)
Realized gain	11,146,898	20,347,026
Change in unrealized gain	102,152,053	42,914,592
	$ 571,992,853	$ 458,765,378

NOTE 5 - PARTY-IN-INTEREST TRANSACTIONS

Certain Fund investments consist of investments in funds administered by BNY Mellon. Therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Fund to BNY Mellon for investment management services were approximately $239,000 and $208,000 for the years ended December 31, 2021 and 2020, respectively.

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2021

Form 5500
Schedule H, Line 4i

Plan #: 001
EIN #: 25-6135576

See following schedule prepared by the Bank of New York Mellon.

See accompanying Independent Auditor's Report.

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
INTEREST-BEARING CASH						
LCPF07632502	NC9123455	CAD (CANADIAN DOLLARS)	3,400.560	2,669.20	2,692.13	22.93
LCPF07641902	996087094	BNY MELLON CASH RESERVE 0.100% 12/31/2049 DD 06/26/97	12,016.390	12,016.39	12,016.39	0.00
TOTAL INTEREST-BEARING CASH				**14,685.59**	**14,708.52**	**22.93**
U. S. GOVERNMENT SECURITIES						
LCPF07632502	31418DSL7	FNMA POOL #0MA4122 1.500% 09/01/2035 DD 08/01/20	976,051.430	1,004,561.89	979,643.30	(24,918.59)
LCPF07632502	31418DTL6	FNMA POOL #0MA4154 1.500% 10/01/2035 DD 09/01/20	1,582,262.610	1,628,069.10	1,588,085.34	(39,983.76)
LCPF07632502	36225BJB5	GNMA POOL #0781158 8.000% 04/15/2030 DD 04/01/00	6,206.680	7,503.50	7,169.09	(334.41)
LCPF07632502	912828B66	U S TREASURY NOTE 2.750% 02/15/2024 DD 02/15/14	2,410,000.000	2,528,008.60	2,510,448.80	(17,559.80)
LCPF07632502	912828J27	U S TREASURY NOTE 2.000% 02/15/2025 DD 02/15/15	5,560,000.000	5,930,650.44	5,728,523.60	(202,126.84)
LCPF07632502	912828K74	U S TREASURY NOTE 2.000% 08/15/2025 DD 08/15/15	4,265,000.000	4,590,187.85	4,400,285.80	(189,902.05)
LCPF07632502	912828P46	U S TREASURY NOTE 1.625% 02/15/2026 DD 02/15/16	5,690,000.000	6,021,319.64	5,790,485.40	(230,834.24)
LCPF07632502	912828WE6	U S TREASURY NOTE 2.750% 11/15/2023 DD 11/15/13	400,000.000	415,265.63	415,156.00	(109.63)
LCPF07632502	91282CAE1	U S TREASURY NOTE 0.625% 08/15/2030 DD 08/15/20	5,820,000.000	5,475,321.88	5,433,493.80	(41,828.08)
LCPF07632502	91282CBF7	US TREAS-CPI INFLAT 0.125%001/15/2031 DD 01/15/21	1,853,591.352	2,038,326.87	2,076,207.67	37,880.80
LCPF07641902	3128M9U26	FHLMC POOL #G0-7501 4.000% 10/01/2043 DD 10/01/13	11,718.794	12,894.04	12,878.25	(15.79)
LCPF07641902	3128MAAA7	FHLMC POOL #G0-7801 4.000% 10/01/2044 DD 09/01/14	20,259.590	22,233.07	22,218.29	(14.78)
LCPF07641902	3128MJQD5	FHLMC POOL #G0-8451 4.500% 06/01/2041 DD 06/01/11	11,138.250	12,466.71	12,287.16	(179.55)
LCPF07641902	31292LPX7	FHLMC POOL #C0-4038 3.500% 06/01/2042 DD 06/01/12	18,411.050	19,971.39	19,892.22	(79.17)
LCPF07641902	312945DS4	FHLMC POOL #A9-6413 4.000% 01/01/2041 DD 01/01/11	11,566.220	12,691.59	12,667.79	(23.80)
LCPF07641902	3132CWC69	FHLMC POOL #SB-0093 2.500% 12/01/2031 DD 10/01/19	86,898.496	90,782.85	90,232.79	(550.06)
LCPF07641902	3132KFYG1	FHLMC POOL #V6-1611 3.000% 04/01/2032 DD 04/01/17	43,792.925	46,714.78	46,088.11	(626.67)
LCPF07641902	3133AACP5	FHLMC POOL #QB-3678 2.000% 09/01/2050 DD 09/01/20	73,574.850	76,435.43	73,450.51	(2,984.92)
LCPF07641902	3133KJA69	FHLMC POOL #RA-2729 2.500% 06/01/2050 DD 05/01/20	78,949.640	83,590.30	80,879.96	(2,710.34)
LCPF07641902	3133KKD63	FHLMC POOL #RA-3725 2.000% 10/01/2050 DD 09/01/20	74,586.095	77,547.94	74,494.35	(3,053.59)
LCPF07641902	3133KMY58	FHLMC POOL #RA-6132 2.500% 10/01/2051 DD 10/01/21	112,443.050	115,377.11	114,991.01	(386.10)
LCPF07641902	3137F4VQ2	FHLMC MULTICLASS MTG 4774 LP 3.500% 09/15/2046 DD 03/01/18	44,092.917	46,418.37	45,349.57	(1,068.80)
LCPF07641902	3138ABYR4	FNMA POOL #0AH9719 4.500% 04/01/2041 DD 03/01/11	4,588.663	5,152.53	5,074.69	(77.84)
LCPF07641902	3138AKQW2	FNMA POOL #0AI5868 4.500% 07/01/2041 DD 06/01/11	10,340.624	11,611.28	11,432.90	(178.38)
LCPF07641902	3138ASS78	FNMA POOL #0AJ1441 3.500% 09/01/2026 DD 09/01/11	6,933.020	7,357.58	7,305.74	(51.84)
LCPF07641902	3138EJP44	FNMA POOL #0AL2242 4.000% 08/01/2042 DD 08/01/12	10,065.511	11,035.91	11,044.38	8.47
LCPF07641902	3138EJXN3	FNMA POOL #0AL2484 4.000% 07/01/2042 DD 09/01/12	41,380.067	45,381.94	45,365.80	(16.14)
LCPF07641902	3138EKB61	FNMA POOL #0AL2760 4.500% 08/01/2042 DD 11/01/12	26,232.318	29,454.44	28,997.20	(457.24)
LCPF07641902	3138EKRM9	FNMA POOL #0AL3191 3.500% 02/01/2028 DD 02/01/13	8,614.548	9,225.49	9,104.29	(121.20)
LCPF07641902	3138ERJN1	FNMA POOL #0AL9268 3.000% 10/01/2046 DD 10/01/16	41,569.819	44,501.33	43,707.75	(793.58)
LCPF07641902	3138LWS69	FNMA POOL #0AO5940 3.500% 06/01/2042 DD 06/01/12	11,266.640	12,167.08	12,087.53	(79.55)
LCPF07641902	3138M3RR7	FNMA POOL #0AP0495 3.500% 08/01/2042 DD 07/01/12	24,826.814	27,001.38	26,823.14	(178.24)
LCPF07641902	3138M5LP2	FNMA POOL #0AP2133 3.500% 08/01/2042 DD 08/01/12	18,945.210	20,526.00	20,465.37	(60.63)
LCPF07641902	3138MGBP9	FNMA POOL #0AQ0945 3.000% 11/01/2042 DD 11/01/12	22,998.100	24,448.83	24,270.12	(178.71)
LCPF07641902	3138W9A26	FNMA POOL #0AS0024 3.500% 07/01/2043 DD 06/01/13	13,883.151	14,973.68	14,994.08	20.40

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07641902	3138WDHT1	FNMA POOL #0AS3841 3.000% 11/01/2029 DD 10/01/14	4,983.828	5,298.17	5,228.33	(69.84)
LCPF07641902	3138WE4S5	FNMA POOL #0AS5332 4.000% 07/01/2045 DD 06/01/15	34,741.822	37,948.14	38,106.22	158.08
LCPF07641902	3138WE6X2	FNMA POOL #0AS5385 4.000% 07/01/2045 DD 06/01/15	11,491.891	12,556.62	12,528.69	(27.93)
LCPF07641902	3138WFHF6	FNMA POOL #0AS5629 3.500% 08/01/2045 DD 07/01/15	34,654.414	37,490.52	37,097.55	(392.97)
LCPF07641902	3138WFYH3	FNMA POOL #0AS6111 4.000% 11/01/2045 DD 10/01/15	14,578.300	15,902.31	15,764.68	(137.63)
LCPF07641902	3138WG5R1	FNMA POOL #0AS7155 3.000% 05/01/2046 DD 04/01/16	21,387.748	22,507.39	22,480.66	(26.73)
LCPF07641902	3138WGAM6	FNMA POOL #0AS6311 3.500% 12/01/2045 DD 11/01/15	25,163.507	26,939.80	26,855.75	(84.05)
LCPF07641902	3138WPLH5	FNMA POOL #0AT2127 3.000% 04/01/2043 DD 03/01/13	52,773.670	56,262.52	55,931.12	(331.40)
LCPF07641902	3138WVX55	FNMA POOL #0AT7899 3.500% 07/01/2043 DD 07/01/13	23,087.519	25,126.83	24,966.84	(159.99)
LCPF07641902	31402DGA2	FNMA POOL #0725693 VAR RT 10/01/2033 DD 08/01/04	2,492.480	2,591.96	2,598.98	7.02
LCPF07641902	3140EY5C1	FNMA POOL #0BC4442 3.000% 04/01/2046 DD 03/01/16	19,318.505	20,263.38	20,255.07	(8.31)
LCPF07641902	3140J7TS4	FNMA POOL #0BM3260 3.500% 01/01/2048 DD 12/01/17	35,809.625	38,523.62	38,291.95	(231.67)
LCPF07641902	3140J9VB4	FNMA POOL #0BM5109 3.000% 12/01/2032 DD 12/01/18	32,897.897	34,562.87	34,499.37	(63.50)
LCPF07641902	3140KTPP4	FNMA POOL #0BQ7629 1.500% 11/01/2035 DD 11/01/20	60,482.490	61,866.98	60,723.82	(1,143.16)
LCPF07641902	3140L04D6	FNMA POOL #0BR2619 2.000% 02/01/2051 DD 01/01/21	67,962.090	70,425.72	68,042.96	(2,382.76)
LCPF07641902	3140Q74T1	FNMA POOL #0CA0833 3.500% 12/01/2047 DD 11/01/17	25,181.778	26,734.74	26,626.71	(108.03)
LCPF07641902	3140Q7TF4	FNMA POOL #0CA0549 4.000% 10/01/2047 DD 09/01/17	18,901.943	20,208.06	20,202.02	(6.04)
LCPF07641902	3140QC6X9	FNMA POOL #0CA5385 4.500% 03/01/2050 DD 02/01/20	20,799.271	22,577.60	22,375.65	(201.95)
LCPF07641902	3140QCMJ2	FNMA POOL #0CA4860 3.000% 12/01/2049 DD 11/01/19	36,037.819	38,252.02	37,603.66	(648.36)
LCPF07641902	3140QELU4	FNMA POOL #0CA6638 2.500% 08/01/2050 DD 07/01/20	61,402.319	64,816.90	62,735.36	(2,081.54)
LCPF07641902	3140QEWD0	FNMA POOL #0CA6943 2.000% 09/01/2050 DD 08/01/20	53,200.890	55,386.90	53,199.29	(2,187.61)
LCPF07641902	3140QFSY6	FNMA POOL #0CA7734 2.500% 11/01/2050 DD 10/01/20	45,071.143	47,553.22	46,069.02	(1,484.20)
LCPF07641902	3140X4DE3	FNMA POOL #0FM1000 3.000% 04/01/2047 DD 06/01/19	53,713.707	56,344.61	56,172.72	(171.89)
LCPF07641902	3140X4LB0	FNMA POOL #0FM1221 3.500% 07/01/2049 DD 07/01/19	24,168.798	26,057.11	25,870.28	(186.83)
LCPF07641902	3140X64G3	FNMA POOL #0FM3522 3.000% 02/01/2035 DD 06/01/20	63,146.327	67,536.90	66,429.94	(1,106.96)
LCPF07641902	3140X7S42	FNMA POOL #0FM4138 2.500% 09/01/2050 DD 08/01/20	38,866.849	41,180.59	39,852.51	(1,328.08)
LCPF07641902	3140X84N4	FNMA POOL #0FM5328 1.500% 01/01/2031 DD 12/01/20	55,864.524	57,317.88	56,426.52	(891.36)
LCPF07641902	3140XBGV6	FNMA POOL #0FM7411 2.000% 05/01/2051 DD 05/01/21	72,985.229	73,276.03	73,090.33	(185.70)
LCPF07641902	3140XCEW4	FNMA POOL #0FM8248 2.500% 08/01/2051 DD 07/01/21	112,593.550	117,853.78	115,197.84	(2,655.94)
LCPF07641902	31412REL7	FNMA POOL #0932639 5.000% 03/01/2040 DD 02/01/10	4,949.380	5,656.30	5,513.16	(143.14)
LCPF07641902	31413HCQ9	FNMA POOL #0945679 5.500% 09/01/2037 DD 09/01/07	3,392.470	3,988.14	3,875.56	(112.58)
LCPF07641902	31416LZQ2	FNMA POOL #0AA3450 4.500% 02/01/2039 DD 03/01/09	16,653.880	18,699.63	18,356.91	(342.72)
LCPF07641902	31416XBP4	FNMA POOL #0AB1845 4.000% 11/01/2040 DD 10/01/10	11,949.640	13,021.88	13,121.90	100.02
LCPF07641902	31416XJX9	FNMA POOL #0AB2077 4.000% 01/01/2041 DD 12/01/10	16,032.254	17,819.21	17,611.43	(207.78)
LCPF07641902	31416XQ52	FNMA POOL #0AB2275 4.500% 02/01/2041 DD 01/01/11	17,240.960	19,359.54	19,062.47	(297.07)
LCPF07641902	31416XSX9	FNMA POOL #0AB2333 4.000% 02/01/2041 DD 01/01/11	15,870.998	17,482.99	17,376.20	(106.79)
LCPF07641902	31417BA31	FNMA POOL #0AB4525 4.000% 02/01/2042 DD 01/01/12	13,189.070	14,412.74	14,483.45	70.71
LCPF07641902	31417EWV9	FNMA POOL #0AB7859 3.500% 02/01/2043 DD 01/01/13	20,478.460	22,397.07	22,123.90	(273.17)
LCPF07641902	31418ALS5	FNMA POOL #0MA1236 3.500% 11/01/2042 DD 10/01/12	30,933.920	33,356.04	33,421.01	64.97
LCPF07641902	31418ASU3	FNMA POOL #0MA1430 3.000% 05/01/2043 DD 04/01/13	23,438.913	24,985.41	24,735.79	(249.62)
LCPF07641902	31418AVT2	FNMA POOL #0MA1525 3.500% 08/01/2043 DD 07/01/13	23,428.136	25,478.55	25,215.23	(263.32)
LCPF07641902	31418DTP7	FNMA POOL #0MA4157 1.500% 09/01/2050 DD 09/01/20	53,666.580	54,240.29	51,900.41	(2,339.88)
LCPF07641902	31418DWX6	FNMA POOL #0MA4261 2.000% 01/01/2035 DD 01/01/21	71,875.330	75,199.56	73,682.99	(1,516.57)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07641902	31418U4U5	FNMA POOL #0AD7134 5.000% 07/01/2040 DD 07/01/10	6,926.362	8,032.78	7,857.27	(175.51)
LCPF07641902	31419BCT0	FNMA POOL #0AE0981 3.500% 03/01/2041 DD 02/01/11	13,047.030	14,087.51	14,040.43	(47.08)
LCPF07641902	31419GCH5	FNMA POOL #0AE5471 4.500% 10/01/2040 DD 10/01/10	7,348.100	8,245.69	8,123.91	(121.78)
LCPF07641902	36178GFN9	GNMA POOL #0AA8273 3.500% 07/15/2042 DD 07/01/12	11,046.650	11,774.08	11,804.12	30.04
LCPF07641902	36179NQ50	GNMA II POOL #0MA1376 4.000% 10/20/2043 DD 10/01/13	7,251.180	8,013.44	7,844.47	(168.97)
LCPF07641902	36179WQB7	GNMA II POOL #0MA7650 3.000% 10/20/2051 DD 10/01/21	108,676.310	113,668.63	112,788.62	(880.01)
LCPF07641902	912810FT0	U S TREASURY BOND 4.500% 02/15/2036 DD 02/15/06	75,000.000	108,099.78	103,271.25	(4,828.53)
LCPF07641902	912810QS0	U S TREASURY BOND 3.750% 08/15/2041 DD 08/15/11	200,000.000	268,990.70	261,976.00	(7,014.70)
LCPF07641902	912810RK6	U S TREASURY BOND 2.500% 02/15/2045 DD 02/15/15	475,000.000	553,522.32	524,300.25	(29,222.07)
LCPF07641902	912810SC3	U S TREASURY BOND 3.125% 05/15/2048 DD 05/15/18	320,000.000	402,426.00	401,500.80	(925.20)
LCPF07641902	912810SL3	U S TREASURY BOND 2.000% 02/15/2050 DD 02/15/20	45,000.000	45,662.11	45,912.15	250.04
LCPF07641902	9128284N7	U S TREASURY NOTE 2.875% 05/15/2028 DD 05/15/18	5,000.000	5,471.04	5,451.75	(19.29)
LCPF07641902	9128286T2	U S TREASURY NOTE 2.375% 05/15/2029 DD 05/15/19	10,000.000	10,757.03	10,667.60	(89.43)
LCPF07641902	912828M56	U S TREASURY NOTE 2.250% 11/15/2025 DD 11/15/15	605,000.000	652,808.39	630,403.95	(22,404.44)
LCPF07641902	912828R36	U S TREASURY NOTE 1.625% 05/15/2026 DD 05/15/16	270,000.000	280,718.40	274,673.70	(6,044.70)
LCPF07641902	912828U57	U S TREASURY NOTE 2.125% 11/30/2023 DD 11/30/16	15,000.000	15,433.01	15,404.25	(28.76)
LCPF07641902	912828VS6	U S TREASURY NOTE 2.500% 08/15/2023 DD 08/15/13	615,000.000	646,286.04	633,450.00	(12,836.04)
LCPF07641902	912828X88	U S TREASURY NOTE 2.375% 05/15/2027 DD 05/15/17	715,000.000	759,027.23	755,132.95	(3,894.28)
LCPF07641902	912828YM6	U S TREASURY NOTE 1.500% 10/31/2024 DD 10/31/19	180,000.000	185,732.13	182,862.00	(2,870.13)
LCPF07641902	912828ZQ6	U S TREASURY NOTE 0.625% 05/15/2030 DD 05/15/20	195,000.000	181,071.21	182,516.10	1,444.89
LCPF07641902	91282CBL4	U S TREASURY NOTE 1.125% 02/15/2031 DD 02/15/21	225,000.000	220,798.42	218,610.00	(2,188.42)
LCPF07645102	3130ALCZ5	FEDERAL HOME LN BK CONS BD STEP 02/26/2031 DD 02/26/2021	390,000.000	390,000.00	381,685.20	(8,314.80)
LCPF07645102	3130ALGJ7	FEDERAL HOME LN BK CONS BD 1.000% 03/23/2026 DD 03/23/21	360,750.000	360,750.00	356,893.58	(3,856.42)
LCPF07645102	3130ALK37	FEDERAL HOME LN BK CONS BD STEP 03/17/2031 DD 03/17/2021	565,000.000	565,000.00	558,762.40	(6,237.60)
LCPF07645102	3130AMXP2	FEDERAL HOME LN BK CONS BD STEP 07/07/2031 DD 07/07/2021	225,000.000	225,000.00	222,012.00	(2,988.00)
LCPF07645102	3130ANUH1	FEDERAL HOME LN BK CONS BD 0.550% 09/27/2024 DD 09/27/21	490,000.000	490,000.00	484,967.70	(5,032.30)
LCPF07645102	3130ANUR9	FEDERAL HOME LN BK CONS BD 0.650% 03/21/2025 DD 09/21/21	385,000.000	385,000.00	379,748.60	(5,251.40)
LCPF07645102	3130AP5E1	FEDERAL HOME LN BK CONS BD 1.150% 10/26/2026 DD 10/26/21	390,000.000	390,000.00	387,383.10	(2,616.90)
LCPF07645102	3130APQ40	FEDERAL HOME LN BK CONS BD 1.500% 11/23/2026 DD 11/23/21	465,000.000	465,000.00	464,353.65	(646.35)
LCPF07645102	3130AQAK9	FEDERAL HOME LN BK CONS BD 1.250% 12/20/2024 DD 12/30/21	370,000.000	370,000.00	370,218.30	218.30
LCPF07645102	3133EMCN0	FEDERAL FARM CR BK CONS BD 0.400% 10/15/2024 DD 10/15/20	385,000.000	385,000.00	378,997.85	(6,002.15)
LCPF07645102	83162CVE0	SBA GTD PARTN CTFS 2012-20L 1 1.930% 12/01/2032 DD 12/12/12	108,158.562	110,996.64	109,411.04	(1,585.60)
LCPF07645102	83162CYQ0	SBA GTD PARTN CTFS 2017-20E 1 2.880% 05/01/2037 DD 05/17/17	104,051.800	113,209.40	110,055.59	(3,153.81)
LCPF07645102	912810PV4	US TREAS-CPI INFLAT 1.750% 01/15/2028 DD 01/15/08	356,375.700	432,389.22	427,629.46	(4,759.76)
LCPF07645102	9128284F4	U S TREASURY NOTE 2.625% 03/31/2025 DD 03/31/18	1,555,000.000	1,704,579.86	1,634,693.75	(69,886.11)
LCPF07645102	9128284H0	US TREAS-CPI INFLAT 0.625% 04/15/2023 DD 04/15/18	1,129,918.303	1,186,235.24	1,181,160.10	(5,075.14)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07645102	912828UN8	U S TREASURY NOTE 2.000% 02/15/2023 DD 02/15/13	1,800,000.000	1,867,719.66	1,831,086.00	(36,633.66)
LCPF07645102	912828YG9	U S TREASURY NOTE 1.625% 09/30/2026 DD 09/30/19	1,380,000.000	1,438,564.50	1,404,315.60	(34,248.90)
LCPF07645102	912828ZQ6	U S TREASURY NOTE 0.625% 05/15/2030 DD 05/15/20	255,000.000	249,303.30	238,674.90	(10,628.40)
LCPF07645102	91282CBL4	U S TREASURY NOTE 1.125% 02/15/2031 DD 02/15/21	540,000.000	528,786.52	524,664.00	(4,122.52)
LCPF07645102	91282CCG4	U S TREASURY NOTE 0.250% 06/15/2024 DD 06/15/21	395,000.000	393,256.64	389,260.65	(3,995.99)
LCPF07645102	91282CCV1	U S TREASURY NOTE 1.125% 08/31/2028 DD 08/31/21	270,000.000	266,158.59	264,999.60	(1,158.99)
LCPF07645102	91282CCX7	U S TREASURY NOTE 0.375% 09/15/2024 DD 09/15/21	30,000.000	29,880.47	29,582.70	(297.77)
LCPF07650002	912828SV3	U S TREASURY NOTE 1.750% 05/15/2022 DD 05/15/12	2,000,000.000	2,013,203.13	2,011,720.00	(1,483.13)
LCPF07650002	912828TJ9	U S TREASURY NOTE 1.625% 08/15/2023 DD 08/15/12	955,000.000	964,999.03	963,174.80	(1,824.23)
LCPF07650002	912828TY6	U S TREASURY NOTE 1.625% 11/15/2022 DD 11/15/12	1,745,000.000	1,783,225.60	1,763,671.50	(19,554.10)
LCPF07650002	912828UN8	U S TREASURY NOTE 2.000% 02/15/2023 DD 02/15/13	1,205,000.000	1,252,452.90	1,225,810.35	(26,642.55)
LCPF07650002	912828VB3	U S TREASURY NOTE 1.750% 05/15/2023 DD 05/15/13	1,350,000.000	1,396,783.01	1,372,302.00	(24,481.01)
LCPF07650002	912828VS6	U S TREASURY NOTE 2.500% 08/15/2023 DD 08/15/13	1,250,000.000	1,325,174.66	1,287,500.00	(37,674.66)
TOTAL U. S. GOVERNMENT SECURITIES				**57,631,931.28**	**56,464,632.04**	**(1,167,299.24)**
CORPORATE DEBT INSTRUMENTS - PREFERRED						
LCPF07632502	04010LBC6	ARES CAPITAL CORP 3.200% 11/15/2031 DD 11/04/21	940,000.000	934,162.60	925,260.80	(8,901.80)
LCPF07632502	06051GGT0	BANK OF AMERICA CORP VAR RT 10/01/2025 DD 09/18/17	1,185,000.000	1,282,718.77	1,233,241.35	(49,477.42)
LCPF07632502	15189TAZ0	CENTERPOINT ENERGY INC VAR RT 05/13/2024 DD 05/13/21	935,000.000	935,251.50	935,243.10	(8.40)
LCPF07632502	256746AH1	DOLLAR TREE INC 4.200% 05/15/2028 DD 04/19/18	830,000.000	987,566.60	925,732.20	(61,834.40)
LCPF07632502	38141GWQ3	GOLDMAN SACHS GROUP INC/THE VAR RT 09/29/2025 DD 09/29/17	885,000.000	969,447.45	928,780.95	(40,666.50)
LCPF07632502	46647PCG9	JPMORGAN CHASE & CO VAR RT 06/01/2025 DD 06/01/21	1,265,000.000	1,268,238.40	1,266,353.55	(1,884.85)
LCPF07632502	754730AG4	RAYMOND JAMES FINANCIAL INC 4.650% 04/01/2030 DD 03/31/20	795,000.000	975,065.25	922,716.75	(52,348.50)
LCPF07632502	80285HAG5	SANTANDER DRIVE AUTO RECEI 1 D 3.650% 04/15/2025 DD 02/20/19	780,000.000	813,382.09	790,974.60	(22,407.49)
LCPF07641902	001055BJ0	AFLAC INC 3.600% 04/01/2030 DD 04/01/20	30,000.000	35,310.60	33,101.10	(2,209.50)
LCPF07641902	00115AAN9	AEP TRANSMISSION CO LLC 2.750% 08/15/2051 DD 08/04/21	15,000.000	14,942.10	14,292.45	(649.65)
LCPF07641902	00206RKD3	AT&T INC 3.100% 02/01/2043 DD 08/04/20	10,000.000	10,149.70	9,750.90	(398.80)
LCPF07641902	023135AP1	AMAZON.COM INC 4.800% 12/05/2034 DD 12/05/14	15,000.000	20,581.65	19,182.75	(1,398.90)
LCPF07641902	023135BT2	AMAZON.COM INC 2.500% 06/03/2050 DD 06/03/20	45,000.000	46,690.65	43,022.25	(3,668.40)
LCPF07641902	03027XAJ9	AMERICAN TOWER CORP 4.400% 02/15/2026 DD 01/12/16	75,000.000	86,495.15	81,884.25	(4,610.90)
LCPF07641902	037833AL4	APPLE INC 3.850% 05/04/2043 DD 05/03/13	20,000.000	25,268.00	23,622.20	(1,645.80)
LCPF07641902	084664CQ2	BERKSHIRE HATHAWAY FINANCE COR 4.200% 08/15/2048 DD 08/15/18	25,000.000	33,013.25	30,442.50	(2,570.75)
LCPF07641902	10373QBJ8	BP CAPITAL MARKETS AMERICA INC 3.194% 04/06/2025 DD 04/06/20	55,000.000	59,282.85	57,989.80	(1,293.05)
LCPF07641902	12189LAU5	BURLINGTON NORTHERN SANTA FE L 4.550% 09/01/2044 DD 08/18/14	35,000.000	47,276.25	44,275.70	(3,000.55)
LCPF07641902	134429BF5	CAMPBELL SOUP CO 3.950% 03/15/2025 DD 03/16/18	55,000.000	59,735.40	58,828.00	(907.40)
LCPF07641902	13645RBD5	CANADIAN PACIFIC RAILWAY CO 1.350% 12/02/2024 DD 12/02/21	60,000.000	59,892.60	60,076.80	184.20
LCPF07641902	14042WAC4	CAPITAL ONE PRIME AUTO RE 1 A3 2.510% 11/15/2023 DD 05/30/19	13,085.820	13,309.98	13,182.39	(127.59)
LCPF07641902	20030NBP5	COMCAST CORP 4.400% 08/15/2035 DD 05/27/15	20,000.000	25,595.00	24,008.80	(1,586.20)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07641902	20030NBT7	COMCAST CORP 3.200% 07/15/2036 DD 07/19/16	5,000.000	5,680.35	5,343.30	(337.05)
LCPF07641902	20030NCJ8	COMCAST CORP 3.900% 03/01/2038 DD 02/08/18	45,000.000	53,600.60	51,034.95	(2,565.65)
LCPF07641902	23283PAR5	CYRUSONE LP / CYRUSONE FINANCE 3.450% 11/15/2029 DD 12/05/19	40,000.000	43,029.20	43,168.00	138.80
LCPF07641902	254687EH5	WALT DISNEY CO/THE 6.650% 11/15/2037 DD 11/15/19	25,000.000	39,508.00	37,130.25	(2,377.75)
LCPF07641902	31620MBQ8	FIDELITY NATIONAL INFORMATION 0.600% 03/01/2024 DD 03/02/21	35,000.000	35,010.50	34,459.95	(550.55)
LCPF07641902	31680YAD9	FIFTH THIRD AUTO TRUST 20 1 A3 2.640% 12/15/2023 DD 05/08/19	20,238.920	20,590.27	20,356.51	(233.76)
LCPF07641902	337738AR9	FISERV INC 4.200% 10/01/2028 DD 09/25/18	50,000.000	58,973.50	56,095.50	(2,878.00)
LCPF07641902	36257FAD2	GM FINANCIAL CONSUMER AUT 2 A3 2.650% 02/16/2024 DD 04/17/19	15,849.710	16,125.98	15,950.36	(175.62)
LCPF07641902	38141GWJ9	GOLDMAN SACHS GROUP INC/THE VAR RT 06/05/2023 DD 06/05/17	70,000.000	72,139.75	70,584.50	(1,555.25)
LCPF07641902	38141GXJ8	GOLDMAN SACHS GROUP INC/THE 3.500% 04/01/2025 DD 03/30/20	25,000.000	27,774.75	26,444.25	(1,330.50)
LCPF07641902	444859BP6	HUMANA INC 0.650% 08/03/2023 DD 08/03/21	35,000.000	35,004.20	34,821.50	(182.70)
LCPF07641902	458140BJ8	INTEL CORP 3.250% 11/15/2049 DD 11/21/19	35,000.000	39,174.10	37,078.65	(2,095.45)
LCPF07641902	46647PAJ5	JPMORGAN CHASE & CO VAR RT 07/24/2038 DD 07/24/17	35,000.000	42,623.70	39,810.05	(2,813.65)
LCPF07641902	46647PAY2	JPMORGAN CHASE & CO VAR RT 12/05/2024 DD 12/05/18	25,000.000	27,540.75	26,362.25	(1,178.50)
LCPF07641902	46647PBP0	JPMORGAN CHASE & CO VAR RT 05/13/2031 DD 05/13/20	45,000.000	49,346.55	46,639.35	(2,707.20)
LCPF07641902	46647PCJ3	JPMORGAN CHASE & CO VAR RT 06/01/2029 DD 06/01/21	50,000.000	50,000.00	49,634.50	(365.50)
LCPF07641902	478160BU7	JOHNSON & JOHNSON 3.550% 03/01/2036 DD 03/01/16	50,000.000	61,748.00	57,281.50	(4,466.50)
LCPF07641902	571903BE2	MARRIOTT INTERNATIONAL INC/MD 4.625% 06/15/2030 DD 06/01/20	25,000.000	28,427.00	28,150.50	(276.50)
LCPF07641902	57636QAL8	MASTERCARD INC 3.650% 06/01/2049 DD 05/31/19	10,000.000	12,423.30	11,615.30	(808.00)
LCPF07641902	594918BS2	MICROSOFT CORP 3.450% 08/08/2036 DD 08/08/16	45,000.000	55,490.85	51,905.25	(3,585.60)
LCPF07641902	595620AS4	MIDAMERICAN ENERGY CO 3.650% 08/01/2048 DD 02/01/18	15,000.000	18,339.90	16,919.55	(1,420.35)
LCPF07641902	61744YAP3	MORGAN STANLEY VAR RT 01/24/2029 DD 01/23/18	55,000.000	62,951.90	59,894.45	(3,057.45)
LCPF07641902	61747YEF8	MORGAN STANLEY VAR RT 09/16/2036 DD 09/16/21	55,000.000	55,257.40	52,956.75	(2,300.65)
LCPF07641902	637417AG1	NATIONAL RETAIL PROPERTIES INC 3.900% 06/15/2024 DD 05/14/14	55,000.000	59,830.75	58,083.30	(1,747.45)
LCPF07641902	64110LAL0	NETFLIX INC 5.875% 02/15/2025 DD 02/05/15	50,000.000	57,312.50	56,190.00	(1,122.50)
LCPF07641902	654106AL7	NIKE INC 3.250% 03/27/2040 DD 03/27/20	15,000.000	17,447.85	16,361.70	(1,086.15)
LCPF07641902	718546BA1	PHILLIPS 66 3.300% 03/15/2052 DD 11/15/21	30,000.000	29,955.30	30,083.40	128.10
LCPF07641902	87264ABW4	T-MOBILE USA INC 3.500% 04/15/2031 DD 03/23/21	60,000.000	60,000.00	62,400.00	2,400.00
LCPF07641902	89352HAD1	TRANSCANADA PIPELINES LTD 6.200% 10/15/2037 DD 10/05/07	15,000.000	20,886.30	20,441.55	(444.75)
LCPF07641902	907818FD5	UNION PACIFIC CORP 3.550% 08/15/2039 DD 08/05/19	20,000.000	23,150.20	22,221.00	(929.20)
LCPF07641902	910047AK5	UNITED AIRLINES HOLDINGS INC 4.875% 01/15/2025 DD 05/09/19	35,000.000	35,393.75	36,006.25	612.50
LCPF07641902	918204BA5	VF CORP 2.400% 04/23/2025 DD 04/23/20	55,000.000	58,669.05	56,601.60	(2,067.45)
LCPF07641902	92347YAA2	VERIZON OWNER TRUST 2019 A A1A 2.930% 09/20/2023 DD 03/13/19	23,008.640	23,455.01	23,134.73	(320.28)
LCPF07641902	92826CAE2	VISA INC 4.150% 12/14/2035 DD 12/14/15	25,000.000	32,494.75	29,962.00	(2,532.75)
LCPF07641902	931142EV1	WALMART INC 2.650% 09/22/2051 DD 09/22/21	50,000.000	50,018.10	51,336.50	1,318.40
LCPF07641902	94974BFY1	WELLS FARGO & CO 4.100% 06/03/2026 DD 06/03/14	20,000.000	22,928.60	21,809.40	(1,119.20)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07641902	95000U2F9	WELLS FARGO & CO VAR RT 06/17/2027 DD 06/17/19	35,000.000	38,813.60	36,917.30	(1,896.30)
LCPF07641902	95000U2R3	WELLS FARGO & CO VAR RT 06/02/2024 DD 06/02/20	45,000.000	46,254.60	45,384.75	(869.85)
LCPF07645102	037833BG4	APPLE INC 3.200% 05/13/2025 DD 05/13/15	290,000.000	323,341.30	308,699.20	(14,642.10)
LCPF07645102	04010LAY9	ARES CAPITAL CORP 3.250% 07/15/2025 DD 01/15/20	585,000.000	611,343.30	604,433.70	(6,909.60)
LCPF07645102	040555DD3	ARIZONA PUBLIC SERVICE CO 2.200% 12/15/2031 DD 08/16/21	360,000.000	361,388.45	349,786.80	(11,601.65)
LCPF07645102	06051GHB8	BANK OF AMERICA CORP VAR RT 02/05/2026 DD 02/05/18	355,000.000	357,101.60	360,168.80	3,067.20
LCPF07645102	06051GJG5	BANK OF AMERICA CORP VAR RT 09/25/2025 DD 09/25/20	660,000.000	667,180.80	652,126.20	(15,054.60)
LCPF07645102	12592BAK0	CNH INDUSTRIAL CAPITAL LLC 1.950% 07/02/2023 DD 07/02/20	15,000.000	15,441.75	15,196.50	(245.25)
LCPF07645102	166764AB6	CHEVRON CORP 2.355% 12/05/2022 DD 12/05/12	355,000.000	367,623.80	359,501.40	(8,122.40)
LCPF07645102	172967MF5	CITIGROUP INC VAR RT 04/24/2025 DD 04/24/19	565,000.000	614,256.70	590,052.10	(24,204.60)
LCPF07645102	20030NCU3	COMCAST CORP 4.250% 10/15/2030 DD 10/05/18	420,000.000	517,167.00	485,196.60	(31,970.40)
LCPF07645102	244199BE4	DEERE & CO 2.600% 06/08/2022 DD 06/08/12	450,000.000	462,906.00	451,998.00	(10,908.00)
LCPF07645102	254687DK9	WALT DISNEY CO/THE 3.375% 11/15/2026 DD 11/15/19	345,000.000	389,763.75	371,323.50	(18,440.25)
LCPF07645102	37045XCS3	GENERAL MOTORS FINANCIAL CO IN 5.650% 01/17/2029 DD 01/17/19	235,000.000	291,186.15	278,900.35	(12,285.80)
LCPF07645102	38141GWL4	GOLDMAN SACHS GROUP INC/THE VAR RT 06/05/2028 DD 06/05/17	645,000.000	743,052.90	695,013.30	(48,039.60)
LCPF07645102	438516CC8	HONEYWELL INTERNATIONAL INC 0.483% 08/19/2022 DD 08/19/20	68,000.000	68,108.80	68,000.68	(108.12)
LCPF07645102	458140BR0	INTEL CORP 3.900% 03/25/2030 DD 03/25/20	335,000.000	402,010.05	380,831.35	(21,178.70)
LCPF07645102	46625HRW2	JPMORGAN CHASE & CO VAR RT 10/24/2023 DD 10/24/16	175,000.000	178,134.25	176,048.25	(2,086.00)
LCPF07645102	46647PAP1	JPMORGAN CHASE & CO VAR RT 04/23/2024 DD 04/23/18	260,000.000	278,673.20	268,702.20	(9,971.00)
LCPF07645102	46647PAX4	JPMORGAN CHASE & CO VAR RT 12/05/2029 DD 12/05/18	420,000.000	502,767.60	477,052.80	(25,714.80)
LCPF07645102	46647PBB1	JPMORGAN CHASE & CO VAR RT 04/01/2023 DD 03/22/19	685,000.000	709,872.35	689,089.45	(20,782.90)
LCPF07645102	534187BK4	LINCOLN NATIONAL CORP 3.400% 01/15/2031 DD 05/15/20	395,000.000	452,642.35	424,348.50	(28,293.85)
LCPF07645102	594918BR4	MICROSOFT CORP 2.400% 08/08/2026 DD 08/08/16	235,000.000	256,382.65	246,056.75	(10,325.90)
LCPF07645102	6174468Q5	MORGAN STANLEY VAR RT 04/28/2026 DD 04/28/20	450,000.000	475,308.00	459,022.50	(16,285.50)
LCPF07645102	69121KAE4	OWL ROCK CAPITAL CORP 3.400% 07/15/2026 DD 12/08/20	325,000.000	330,629.00	330,398.25	(230.75)
LCPF07645102	740189AM7	PRECISION CASTPARTS CORP 3.250% 06/15/2025 DD 06/10/15	180,000.000	194,896.80	190,897.20	(3,999.60)
LCPF07645102	773903AH2	ROCKWELL AUTOMATION INC 3.500% 03/01/2029 DD 03/01/19	440,000.000	512,868.40	482,693.20	(30,175.20)
LCPF07645102	78486QAE1	SVB FINANCIAL GROUP 3.125% 06/05/2030 DD 06/05/20	320,000.000	360,300.80	336,169.60	(24,131.20)
LCPF07645102	78646UAA7	SAFEHOLD OPERATING PARTNERSHIP 2.800% 06/15/2031 DD 05/07/21	460,000.000	455,143.90	454,351.20	(792.70)
LCPF07645102	808513BN4	CHARLES SCHWAB CORP/THE 0.750% 03/18/2024 DD 03/18/21	440,000.000	439,939.60	438,112.40	(1,827.20)
LCPF07645102	828807CV7	SIMON PROPERTY GROUP LP 3.500% 09/01/2025 DD 08/17/15	170,000.000	188,786.70	181,248.90	(7,537.80)
LCPF07645102	828807DF1	SIMON PROPERTY GROUP LP 2.450% 09/13/2029 DD 09/13/19	635,000.000	667,023.05	639,921.25	(27,101.80)
LCPF07645102	854502AK7	STANLEY BLACK & DECKER INC 3.400% 03/01/2026 DD 03/01/19	300,000.000	339,708.00	320,004.00	(19,704.00)
LCPF07645102	89114QCD8	TORONTO-DOMINION BANK/THE 1.900% 12/01/2022 DD 10/10/19	385,000.000	396,973.50	389,793.25	(7,180.25)
LCPF07645102	89788KAA4	TRUIST BANK 2.250% 03/11/2030 DD 03/09/20	390,000.000	409,172.40	389,376.00	(19,796.40)
LCPF07645102	927804FQ2	VIRGINIA ELECTRIC AND POWER CO 3.450% 02/15/2024 DD 02/07/14	190,000.000	204,966.30	198,018.00	(6,948.30)
LCPF07645102	927804FX7	VIRGINIA ELECTRIC AND POWER CO 3.500% 03/15/2027 DD 03/16/17	310,000.000	353,920.80	334,161.40	(19,759.40)
LCPF07645102	95000U2R3	WELLS FARGO & CO VAR RT 06/02/2024 DD 06/02/20	445,000.000	457,406.60	448,804.75	(8,601.85)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07650002	04010LAY9	ARES CAPITAL CORP 3.250% 07/15/2025 DD 01/15/20	340,000.000	350,757.00	351,294.80	537.80
LCPF07650002	053332AX0	AUTOZONE INC 3.125% 04/18/2024 DD 04/18/19	325,000.000	350,483.25	339,579.50	(10,903.75)
LCPF07650002	13607HVD1	CANADIAN IMPERIAL BANK OF COMM VAR RT 06/22/2023 DD 06/22/21	205,000.000	205,000.00	205,061.50	61.50
LCPF07650002	14315VAH5	CARMAX AUTO OWNER TRUST 20 2 D 5.750% 05/17/2027 DD 04/29/20	250,000.000	280,302.50	269,372.50	(10,930.00)
LCPF07650002	256746AG3	DOLLAR TREE INC 4.000% 05/15/2025 DD 04/19/18	315,000.000	345,687.30	338,527.35	(7,159.95)
LCPF07650002	26208GAG4	DRIVE AUTO RECEIVABLES TRU 1 D 3.810% 05/15/2024 DD 02/21/18	84,347.230	86,013.92	84,703.18	(1,310.74)
LCPF07650002	26208RAG0	DRIVE AUTO RECEIVABLES TRU 2 D 3.690% 08/17/2026 DD 03/20/19	265,000.000	277,318.36	270,898.90	(6,419.46)
LCPF07650002	26208VAF3	DRIVE AUTO RECEIVABLES TRU 2 C 2.280% 08/17/2026 DD 06/17/20	340,000.000	351,009.20	344,477.80	(6,531.40)
LCPF07650002	38141GVM3	GOLDMAN SACHS GROUP INC/THE 4.000% 03/03/2024 DD 03/03/14	320,000.000	353,590.40	339,315.20	(14,275.20)
LCPF07650002	444859BP6	HUMANA INC 0.650% 08/03/2023 DD 08/03/21	215,000.000	214,855.95	213,903.50	(952.45)
LCPF07650002	446150AM6	HUNTINGTON BANCSHARES INC/OH 4.000% 05/15/2025 DD 05/15/18	315,000.000	345,866.85	338,933.70	(6,933.15)
LCPF07650002	46647PAY2	JPMORGAN CHASE & CO VAR RT 12/05/2024 DD 12/05/18	435,000.000	471,157.20	458,703.15	(12,454.05)
LCPF07650002	756109BD5	REALTY INCOME CORP 4.600% 02/06/2024 DD 08/06/21	315,000.000	339,957.45	335,074.95	(4,882.50)
LCPF07650002	80285HAG5	SANTANDER DRIVE AUTO RECEI 1 D 3.650% 04/15/2025 DD 02/20/19	225,000.000	234,677.25	228,165.75	(6,511.50)
LCPF07650002	80285RAF5	SANTANDER DRIVE AUTO RECEI 2 C 1.460% 09/15/2025 DD 07/22/20	500,000.000	506,625.00	502,330.00	(4,295.00)
LCPF07650002	91159HHK9	US BANCORP 3.600% 09/11/2024 DD 09/11/14	430,000.000	474,999.50	456,810.50	(18,189.00)
LCPF07650002	91913YAY6	VALERO ENERGY CORP 2.850% 04/15/2025 DD 04/16/20	330,000.000	343,645.50	341,843.70	(1,801.80)
TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED				**30,080,081.98**	**29,147,028.15**	**(933,053.83)**
CORPORATE DEBT INSTRUMENTS						
LCPF07632502	00510RAD5	ACUITY BRANDS LIGHTING INC 2.150% 12/15/2030 DD 11/10/20	965,000.000	975,676.15	941,627.70	(34,048.45)
LCPF07632502	099724AL0	BORGWARNER INC 2.650% 07/01/2027 DD 06/19/20	905,000.000	973,137.45	935,589.00	(37,548.45)
LCPF07632502	115236AB7	BROWN & BROWN INC 4.500% 03/15/2029 DD 03/11/19	830,000.000	970,716.45	934,007.30	(36,709.15)
LCPF07632502	126650CX6	CVS HEALTH CORP 4.300% 03/25/2028 DD 03/09/18	825,000.000	981,635.05	926,483.25	(55,151.80)
LCPF07632502	153527AM8	CENTRAL GARDEN & PET CO 5.125% 02/01/2028 DD 12/14/17	660,000.000	701,870.40	689,700.00	(12,170.40)
LCPF07632502	161175BR4	CHARTER COMMUNICATIONS OPERATI 5.050% 03/30/2029 DD 01/17/19	580,000.000	675,218.60	664,535.00	(10,683.60)
LCPF07632502	172967MW8	CITIGROUP INC VAR RT 05/01/2025 DD 05/04/21	930,000.000	930,440.85	936,482.10	6,041.25
LCPF07632502	320517AC9	FIRST HORIZON CORP 3.550% 05/26/2023 DD 05/26/20	890,000.000	944,349.45	917,109.40	(27,240.05)
LCPF07632502	40410KAA3	HB FULLER CO 4.250% 10/15/2028 DD 10/20/20	670,000.000	686,750.00	690,100.00	3,350.00
LCPF07632502	52107QAJ4	LAZARD GROUP LLC 4.500% 09/19/2028 DD 09/19/18	830,000.000	985,068.90	949,935.00	(35,133.90)
LCPF07632502	67401PAB4	OAKTREE SPECIALTY LENDING CORP 3.500% 02/25/2025 DD 02/25/20	905,000.000	939,584.10	943,281.50	3,697.40
LCPF07632502	688239AF9	OSHKOSH CORP 4.600% 05/15/2028 DD 05/17/18	835,000.000	985,592.25	941,779.80	(43,812.45)
LCPF07632502	72650RBM3	PLAINS ALL AMERICAN PIPELINE L 3.550% 12/15/2029 DD 09/16/19	905,000.000	944,576.60	938,385.45	(6,191.15)
LCPF07632502	776743AF3	ROPER TECHNOLOGIES INC 4.200% 09/15/2028 DD 08/28/18	825,000.000	983,705.45	926,854.50	(56,850.95)
LCPF07632502	78572XAG6	SABRA HEALTH CARE LP 3.900% 10/15/2029 DD 10/07/19	665,000.000	697,299.05	696,893.40	(405.65)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07632502	80285FAH7	SANTANDER DRIVE AUTO RECEI 2 E 5.020% 09/15/2025 DD 04/18/18	670,000.000	697,771.50	679,788.70	(17,982.80)
LCPF07632502	81180WAR2	SEAGATE HDD CAYMAN 4.875% 06/01/2027 DD 05/14/15	625,000.000	703,212.90	681,250.00	(21,962.90)
LCPF07632502	91529YAK2	UNUM GROUP 4.000% 03/15/2024 DD 03/14/14	867,000.000	944,859.89	915,491.31	(29,368.58)
LCPF07632502	92343EAH5	VERISIGN INC 5.250% 04/01/2025 DD 03/27/15	835,000.000	943,630.25	920,587.50	(23,042.75)
LCPF07641902	00206RDR0	AT&T INC 5.250% 03/01/2037 DD 02/09/17	40,000.000	52,058.40	49,581.60	(2,476.80)
LCPF07641902	00206RML3	AT&T INC 1.700% 03/25/2026 DD 03/23/21	40,000.000	39,933.20	39,814.80	(118.40)
LCPF07641902	00287YAR0	ABBVIE INC 4.500% 05/14/2035 DD 05/14/15	20,000.000	25,121.40	23,993.40	(1,128.00)
LCPF07641902	00287YAS8	ABBVIE INC 4.700% 05/14/2045 DD 05/14/15	15,000.000	19,623.30	18,666.60	(956.70)
LCPF07641902	024836AB4	AMERICAN CAMPUS COMMUNITIES OP 4.125% 07/01/2024 DD 06/24/14	45,000.000	49,115.70	48,068.55	(1,047.15)
LCPF07641902	03027XBC3	AMERICAN TOWER CORP 2.100% 06/15/2030 DD 06/03/20	15,000.000	15,396.15	14,457.90	(938.25)
LCPF07641902	031162CU2	AMGEN INC 2.450% 02/21/2030 DD 02/21/20	35,000.000	36,250.90	35,656.60	(594.30)
LCPF07641902	035242AM8	ANHEUSER-BUSCH INBEV FINANCE I 4.700% 02/01/2036 DD 01/25/16	60,000.000	75,247.80	71,535.00	(3,712.80)
LCPF07641902	06051GFH7	BANK OF AMERICA CORP 4.200% 08/26/2024 DD 08/26/14	55,000.000	58,917.10	58,966.60	49.50
LCPF07641902	06051GJZ3	BANK OF AMERICA CORP VAR RT 06/14/2029 DD 06/14/21	55,000.000	55,469.15	54,660.10	(809.05)
LCPF07641902	080555AE5	BELO CORP 7.750% 06/01/2027 DD 06/01/97	30,000.000	34,950.00	35,025.00	75.00
LCPF07641902	097023CD5	BOEING CO/THE 3.200% 03/01/2029 DD 02/15/19	60,000.000	62,464.50	61,803.60	(660.90)
LCPF07641902	097023DG7	BOEING CO/THE 2.196% 02/04/2026 DD 02/04/21	20,000.000	20,091.60	20,000.80	(90.80)
LCPF07641902	117043AS8	BRUNSWICK CORP/DE 0.850% 08/18/2024 DD 08/18/21	25,000.000	24,970.50	24,647.75	(322.75)
LCPF07641902	12513GBF5	CDW LLC / CDW FINANCE CORP 3.250% 02/15/2029 DD 08/13/20	25,000.000	25,492.50	25,223.25	(269.25)
LCPF07641902	12592BAH7	CNH INDUSTRIAL CAPITAL LLC 4.375% 04/05/2022 DD 04/10/17	35,000.000	36,591.10	35,312.20	(1,278.90)
LCPF07641902	126650CY4	CVS HEALTH CORP 4.780% 03/25/2038 DD 03/09/18	15,000.000	19,004.70	18,332.85	(671.85)
LCPF07641902	14040HCH6	CAPITAL ONE FINANCIAL CORP VAR RT 11/02/2027 DD 11/02/21	90,000.000	90,000.00	89,594.10	(405.90)
LCPF07641902	15135BAR2	CENTENE CORP 4.250% 12/15/2027 DD 12/06/19	55,000.000	58,175.15	57,337.50	(837.65)
LCPF07641902	16411QAG6	CHENIERE ENERGY PARTNERS LP 4.500% 10/01/2029 DD 04/01/20	55,000.000	58,025.00	58,300.00	275.00
LCPF07641902	172967JL6	CITIGROUP INC 3.875% 03/26/2025 DD 03/26/15	35,000.000	39,060.35	37,364.25	(1,696.10)
LCPF07641902	172967LD1	CITIGROUP INC VAR RT 01/10/2028 DD 01/10/17	25,000.000	28,553.00	27,120.50	(1,432.50)
LCPF07641902	172967LM1	CITIGROUP INC VAR RT 07/24/2023 DD 07/24/17	70,000.000	72,714.60	70,842.80	(1,871.80)
LCPF07641902	172967MG3	CITIGROUP INC VAR RT 12/31/2049 DD 09/12/19	40,000.000	41,575.20	41,200.00	(375.20)
LCPF07641902	172967MK4	CITIGROUP INC VAR RT 12/31/2049 DD 01/23/20	25,000.000	25,689.75	25,255.00	(434.75)
LCPF07641902	20825CAQ7	CONOCOPHILLIPS 6.500% 02/01/2039 DD 02/03/09	20,000.000	30,931.40	29,119.40	(1,812.00)
LCPF07641902	209115AE4	CONSOLIDATED EDISON INC 0.650% 12/01/2023 DD 12/03/20	60,000.000	60,119.40	59,515.80	(603.60)
LCPF07641902	22822VAB7	CROWN CASTLE INC 4.450% 02/15/2026 DD 02/08/16	35,000.000	40,499.20	38,320.80	(2,178.40)
LCPF07641902	247361ZU5	DELTA AIR LINES INC 2.900% 10/28/2024 DD 10/28/19	55,000.000	54,264.65	56,087.90	1,823.25
LCPF07641902	260543CL5	DOW CHEMICAL CO/THE 4.625% 10/01/2044 DD 09/16/14	15,000.000	18,956.15	18,185.40	(770.75)
LCPF07641902	26884UAG4	EPR PROPERTIES 3.600% 11/15/2031 DD 10/27/21	20,000.000	19,834.80	19,809.40	(25.40)
LCPF07641902	29273RAR0	ENERGY TRANSFER LP 6.500% 02/01/2042 DD 01/17/12	25,000.000	30,746.00	32,286.50	1,540.50
LCPF07641902	29278NAN3	ENERGY TRANSFER LP 5.500% 06/01/2027 DD 12/01/18	45,000.000	52,965.00	51,333.75	(1,631.25)
LCPF07641902	29379VAY9	ENTERPRISE PRODUCTS OPERATING 4.450% 02/15/2043 DD 08/13/12	20,000.000	24,241.40	22,879.60	(1,361.80)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07641902	37940XAA0	GLOBAL PAYMENTS INC 2.650% 02/15/2025 DD 08/14/19	60,000.000	61,771.50	61,684.20	(87.30)
LCPF07641902	404121AG0	HCA INC 5.875% 05/01/2023 DD 10/23/12	30,000.000	32,962.50	31,762.50	(1,200.00)
LCPF07641902	432891AK5	HILTON WORLDWIDE FINANCE LLC / 4.875% 04/01/2027 DD 03/16/17	55,000.000	57,064.15	56,650.00	(414.15)
LCPF07641902	436106AA6	HOLLYFRONTIER CORP 5.875% 04/01/2026 DD 03/22/16	44,000.000	49,134.80	49,368.88	234.08
LCPF07641902	436106AB4	HOLLYFRONTIER CORP 2.625% 10/01/2023 DD 09/28/20	25,000.000	25,550.25	25,474.50	(75.75)
LCPF07641902	460690BL3	INTERPUBLIC GROUP OF COS INC/T 4.200% 04/15/2024 DD 04/03/14	45,000.000	49,390.75	48,028.05	(1,362.70)
LCPF07641902	48666KAV1	KB HOME 7.625% 05/15/2023 DD 02/17/15	25,000.000	27,625.00	26,281.25	(1,343.75)
LCPF07641902	494550AW6	KINDER MORGAN ENERGY PARTNERS 6.950% 01/15/2038 DD 06/21/07	40,000.000	54,732.40	55,461.20	728.80
LCPF07641902	50077LAD8	KRAFT HEINZ FOODS CO 3.000% 06/01/2026 DD 05/24/16	24,000.000	25,062.48	25,112.88	50.40
LCPF07641902	50077LAM8	KRAFT HEINZ FOODS CO 5.200% 07/15/2045 DD 07/15/16	20,000.000	23,781.20	25,463.00	1,681.80
LCPF07641902	501044DG3	KROGER CO/THE 4.450% 02/01/2047 DD 01/24/17	20,000.000	25,169.40	24,342.00	(827.40)
LCPF07641902	513075BR1	LAMAR MEDIA CORP 3.750% 02/15/2028 DD 07/15/20	20,000.000	20,450.00	20,050.00	(400.00)
LCPF07641902	55336VAK6	MPLX LP 4.125% 03/01/2027 DD 02/10/17	60,000.000	69,200.40	65,683.20	(3,517.20)
LCPF07641902	55336VAS9	MPLX LP 4.800% 02/15/2029 DD 11/15/18	40,000.000	47,444.40	45,713.20	(1,731.20)
LCPF07641902	59156RAP3	METLIFE INC 6.400% 12/15/2066 DD 12/21/06	30,000.000	38,803.20	36,893.70	(1,909.50)
LCPF07641902	595112BN2	MICRON TECHNOLOGY INC 5.327% 02/06/2029 DD 02/06/19	30,000.000	35,382.55	35,533.50	150.95
LCPF07641902	61747YDU6	MORGAN STANLEY 4.100% 05/22/2023 DD 05/21/13	60,000.000	64,679.20	62,484.60	(2,194.60)
LCPF07641902	61747YEA9	MORGAN STANLEY VAR RT 05/30/2025 DD 06/01/21	40,000.000	40,443.60	39,484.80	(958.80)
LCPF07641902	64110LAT3	NETFLIX INC 5.875% 11/15/2028 DD 04/26/18	25,000.000	30,155.25	30,062.50	(92.75)
LCPF07641902	65339KBU3	NEXTERA ENERGY CAPITAL HOLDING 0.650% 03/01/2023 DD 03/17/21	30,000.000	29,997.00	29,941.50	(55.50)
LCPF07641902	67059TAE5	NUSTAR LOGISTICS LP 5.625% 04/28/2027 DD 04/28/17	15,000.000	15,975.00	15,862.50	(112.50)
LCPF07641902	67066GAH7	NVIDIA CORP 3.500% 04/01/2050 DD 03/31/20	25,000.000	30,327.25	28,607.00	(1,720.25)
LCPF07641902	68389XBW4	ORACLE CORP 3.600% 04/01/2040 DD 04/01/20	15,000.000	17,567.85	15,102.15	(2,465.70)
LCPF07641902	68389XCA1	ORACLE CORP 3.950% 03/25/2051 DD 03/24/21	45,000.000	44,921.25	46,888.20	1,966.95
LCPF07641902	713448DP0	PEPSICO INC 3.450% 10/06/2046 DD 10/06/16	25,000.000	30,228.50	28,259.50	(1,969.00)
LCPF07641902	745867AM3	PULTEGROUP INC 7.875% 06/15/2032 DD 06/12/02	25,000.000	37,406.25	35,524.00	(1,882.25)
LCPF07641902	817565CF9	SERVICE CORP INTERNATIONAL/US 3.375% 08/15/2030 DD 08/10/20	30,000.000	31,206.30	29,479.50	(1,726.80)
LCPF07641902	824348AU0	SHERWIN-WILLIAMS CO/THE 2.750% 06/01/2022 DD 05/16/17	2,000.000	2,063.70	2,013.76	(49.94)
LCPF07641902	842587CV7	SOUTHERN CO/THE 3.250% 07/01/2026 DD 05/24/16	25,000.000	27,358.00	26,459.75	(898.25)
LCPF07641902	845467AL3	SOUTHWESTERN ENERGY CO VAR RT 01/23/2025 DD 01/23/15	4,000.000	4,160.00	4,396.00	236.00
LCPF07641902	84861TAE8	SPIRIT REALTY LP 3.200% 01/15/2027 DD 09/16/19	45,000.000	47,800.35	47,065.50	(734.85)
LCPF07641902	871829BL0	SYSCO CORP 5.950% 04/01/2030 DD 04/02/20	15,000.000	19,710.75	18,739.95	(970.80)
LCPF07641902	871829BN6	SYSCO CORP 6.600% 04/01/2050 DD 04/02/20	15,000.000	23,102.40	23,376.75	274.35
LCPF07641902	87264AAV7	T-MOBILE USA INC 4.750% 02/01/2028 DD 01/25/18	50,000.000	53,500.00	52,625.00	(875.00)
LCPF07641902	88731EAF7	TIME WARNER ENTERTAINMENT CO L 8.375% 03/15/2023 DD 09/15/93	55,000.000	64,287.85	59,643.10	(4,644.75)
LCPF07641902	88732JBD9	TIME WARNER CABLE LLC 4.500% 09/15/2042 DD 08/10/12	45,000.000	52,731.00	49,191.30	(3,539.70)
LCPF07641902	88947EAN0	TOLL BROTHERS FINANCE CORP 4.375% 04/15/2023 DD 04/10/13	55,000.000	57,808.10	56,787.50	(1,020.60)
LCPF07641902	910047AJ8	UNITED AIRLINES HOLDINGS INC 4.250% 10/01/2022 DD	35,000.000	35,174.99	35,525.00	350.01

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
		09/29/17				
LCPF07641902	911365BG8	UNITED RENTALS NORTH AMERICA I 4.875% 01/15/2028 DD 08/11/17	40,000.000	42,600.00	42,035.20	(564.80)
LCPF07641902	91913YAL4	VALERO ENERGY CORP 6.625% 06/15/2037 DD 06/08/07	25,000.000	33,141.65	33,749.50	607.85
LCPF07641902	91913YAV2	VALERO ENERGY CORP 4.350% 06/01/2028 DD 06/01/18	20,000.000	22,764.20	22,063.60	(700.60)
LCPF07641902	92343VDU5	VERIZON COMMUNICATIONS INC 5.250% 03/16/2037 DD 03/16/17	35,000.000	47,431.65	45,570.00	(1,861.65)
LCPF07641902	92343VEU4	VERIZON COMMUNICATIONS INC 4.016% 12/03/2029 DD 06/03/19	55,000.000	62,341.40	61,717.15	(624.25)
LCPF07641902	961214DF7	WESTPAC BANKING CORP VAR RT 11/23/2031 DD 11/23/16	55,000.000	62,715.40	59,514.95	(3,200.45)
LCPF07641902	98420EAC9	XLIT LTD 4.450% 03/31/2025 DD 03/30/15	45,000.000	51,353.55	48,798.45	(2,555.10)
LCPF07645102	035240AV2	ANHEUSER-BUSCH INBEV WORLDWIDE 3.500% 06/01/2030 DD 04/03/20	595,000.000	689,224.20	652,792.35	(36,431.85)
LCPF07645102	036752AB9	ELEVANCE HEALTH INC 3.650% 12/01/2027 DD 11/21/17	510,000.000	588,116.70	559,878.00	(28,238.70)
LCPF07645102	04010LAZ6	ARES CAPITAL CORP 3.875% 01/15/2026 DD 07/15/20	375,000.000	406,342.50	395,400.00	(10,942.50)
LCPF07645102	05329WAN2	AUTONATION INC 3.500% 11/15/2024 DD 11/10/17	630,000.000	679,927.50	660,800.70	(19,126.80)
LCPF07645102	05531FBG7	TRUIST FINANCIAL CORP 3.050% 06/20/2022 DD 03/18/19	470,000.000	487,813.00	474,610.70	(13,202.30)
LCPF07645102	064159MK9	BANK OF NOVA SCOTIA/THE 3.400% 02/11/2024 DD 02/11/19	150,000.000	163,225.50	157,408.50	(5,817.00)
LCPF07645102	084670BS6	BERKSHIRE HATHAWAY INC 3.125% 03/15/2026 DD 03/15/16	55,000.000	61,452.05	58,895.10	(2,556.95)
LCPF07645102	097023DE2	BOEING CO/THE 1.433% 02/04/2024 DD 02/04/21	165,000.000	165,000.00	164,775.60	(224.40)
LCPF07645102	126650CX6	CVS HEALTH CORP 4.300% 03/25/2028 DD 03/09/18	87,000.000	103,526.52	97,701.87	(5,824.65)
LCPF07645102	126650DG2	CVS HEALTH CORP 3.250% 08/15/2029 DD 08/15/19	450,000.000	503,357.40	480,222.00	(23,135.40)
LCPF07645102	169905AF3	CHOICE HOTELS INTERNATIONAL IN 3.700% 12/01/2029 DD 11/27/19	405,000.000	441,680.90	430,381.35	(11,299.55)
LCPF07645102	20030NCT6	COMCAST CORP 4.150% 10/15/2028 DD 10/05/18	605,000.000	728,280.85	687,364.70	(40,916.15)
LCPF07645102	254687FQ4	WALT DISNEY CO/THE 3.800% 03/22/2030 DD 03/23/20	325,000.000	387,292.75	364,926.25	(22,366.50)
LCPF07645102	302491AU9	FMC CORP 3.450% 10/01/2029 DD 09/20/19	220,000.000	250,454.60	234,462.80	(15,991.80)
LCPF07645102	37045XCZ7	GENERAL MOTORS FINANCIAL CO IN 1.700% 08/18/2023 DD 08/20/20	415,000.000	425,686.25	418,988.15	(6,698.10)
LCPF07645102	38141GXZ2	GOLDMAN SACHS GROUP INC/THE VAR RT 03/08/2024 DD 03/08/21	755,000.000	755,000.00	751,640.25	(3,359.75)
LCPF07645102	42250PAB9	HEALTHPEAK PROPERTIES INC 2.875% 01/15/2031 DD 06/23/20	375,000.000	404,186.25	390,386.25	(13,800.00)
LCPF07645102	494550BV7	KINDER MORGAN ENERGY PARTNERS 4.250% 09/01/2024 DD 09/11/14	135,000.000	150,770.69	143,932.95	(6,837.74)
LCPF07645102	53227JAC8	LIFE STORAGE LP 2.200% 10/15/2030 DD 09/23/20	345,000.000	352,165.65	339,224.70	(12,940.95)
LCPF07645102	59022CAA1	BANK OF AMERICA CORP VAR RT 09/15/2026 DD 09/12/06	345,000.000	338,103.45	343,526.85	5,423.40
LCPF07645102	61772BAA1	MORGAN STANLEY VAR RT 04/05/2024 DD 04/22/21	660,000.000	660,542.95	658,006.80	(2,536.15)
LCPF07645102	67066GAK0	NVIDIA CORP 0.309% 06/15/2023 DD 06/16/21	1,115,000.000	1,115,000.00	1,107,050.05	(7,949.95)
LCPF07645102	678858BW0	OKLAHOMA GAS AND ELECTRIC CO 0.553% 05/26/2023 DD 05/27/21	170,000.000	170,000.00	168,891.60	(1,108.40)
LCPF07645102	75886AAJ7	ENERGY TRANSFER LP / REGENCY E 4.500% 11/01/2023 DD 11/01/13	80,000.000	86,617.60	83,809.60	(2,808.00)
LCPF07645102	78015K7J7	ROYAL BANK OF CANADA 0.500% 10/26/2023 DD 10/26/20	970,000.000	975,354.40	964,267.30	(11,087.10)
LCPF07645102	78646UAB5	SAFEHOLD OPERATING PARTNERSHIP 2.850% 01/15/2032 DD 11/18/21	370,000.000	366,755.10	363,129.10	(3,626.00)
LCPF07645102	86787EBE6	TRUIST BANK 2.800% 05/17/2022 DD 05/17/19	305,000.000	315,025.35	307,223.45	(7,801.90)
LCPF07645102	883556CS9	THERMO FISHER SCIENTIFIC INC 1.215% 10/18/2024 DD	390,000.000	390,000.00	389,633.40	(366.60)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
		10/22/21				
LCPF07645102	92343VGJ7	VERIZON COMMUNICATIONS INC 2.550% 03/21/2031 DD 03/22/21	415,000.000	414,649.05	419,158.30	4,509.25
LCPF07650002	00206RDC3	AT&T INC 4.450% 04/01/2024 DD 10/01/15	315,000.000	351,785.70	336,275.10	(15,510.60)
LCPF07650002	023608AH5	AMEREN CORP 2.500% 09/15/2024 DD 09/16/19	330,000.000	351,826.20	338,946.30	(12,879.90)
LCPF07650002	03027XBB5	AMERICAN TOWER CORP 1.300% 09/15/2025 DD 06/03/20	350,000.000	344,778.00	344,827.00	49.00
LCPF07650002	06051GHC6	BANK OF AMERICA CORP VAR RT 12/20/2023 DD 12/20/17	450,000.000	473,629.50	459,328.50	(14,301.00)
LCPF07650002	11134LAF6	BROADCOM CORP / BROADCOM CAYMA 3.625% 01/15/2024 DD 01/15/18	325,000.000	351,279.50	339,956.50	(11,323.00)
LCPF07650002	115236AA9	BROWN & BROWN INC 4.200% 09/15/2024 DD 09/18/14	320,000.000	347,088.00	341,379.20	(5,708.80)
LCPF07650002	126650CL2	CVS HEALTH CORP 3.875% 07/20/2025 DD 07/20/15	315,000.000	343,942.20	338,665.95	(5,276.25)
LCPF07650002	14040HBZ7	CAPITAL ONE FINANCIAL CORP 4.250% 04/30/2025 DD 04/30/18	315,000.000	349,089.30	340,499.25	(8,590.05)
LCPF07650002	14315PAH8	CARMAX AUTO OWNER TRUST 20 3 D 2.850% 01/15/2026 DD 07/30/19	300,000.000	314,203.12	306,741.00	(7,462.12)
LCPF07650002	172967GT2	CITIGROUP INC 3.500% 05/15/2023 DD 05/14/13	330,000.000	353,568.60	341,167.20	(12,401.40)
LCPF07650002	233854AC2	*DAIMLER TRUCKS RETAIL TRU 1 A3 1.220% 09/15/2023 DD 03/18/20	483,404.460	487,919.46	484,927.18	(2,992.28)
LCPF07650002	254709AL2	DISCOVER FINANCIAL SERVICES 3.750% 03/04/2025 DD 03/04/15	320,000.000	347,523.20	338,662.40	(8,860.80)
LCPF07650002	26441CBK0	DUKE ENERGY CORP VAR RT 06/10/2023 DD 06/10/21	345,000.000	345,015.84	344,623.95	(391.89)
LCPF07650002	29444UBC9	EQUINIX INC 2.625% 11/18/2024 DD 11/18/19	330,000.000	350,463.30	340,094.70	(10,368.60)
LCPF07650002	445658CD7	JB HUNT TRANSPORT SERVICES INC 3.850% 03/15/2024 DD 03/06/14	320,000.000	349,468.80	334,982.40	(14,486.40)
LCPF07650002	462613AM2	IPALCO ENTERPRISES INC 3.700% 09/01/2024 DD 08/22/17	330,000.000	350,591.85	345,246.00	(5,345.85)
LCPF07650002	465685AJ4	ITC HOLDINGS CORP 3.650% 06/15/2024 DD 06/04/14	325,000.000	354,874.00	340,814.50	(14,059.50)
LCPF07650002	52107QAG0	LAZARD GROUP LLC 3.750% 02/13/2025 DD 02/13/15	315,000.000	343,894.95	335,056.05	(8,838.90)
LCPF07650002	526057BZ6	LENNAR CORP 4.500% 04/30/2024 DD 04/28/17	325,000.000	352,979.25	345,247.50	(7,731.75)
LCPF07650002	631103AF5	NASDAQ INC 4.250% 06/01/2024 DD 05/29/14	320,000.000	354,963.20	339,993.60	(14,969.60)
LCPF07650002	670837AC7	OGE ENERGY CORP 0.703% 05/26/2023 DD 05/27/21	355,000.000	355,000.00	353,391.85	(1,608.15)
LCPF07650002	681919BA3	OMNICOM GROUP INC / OMNICOM CA 3.650% 11/01/2024 DD 10/29/14	315,000.000	343,167.30	333,940.95	(9,226.35)
LCPF07650002	723787AS6	PIONEER NATURAL RESOURCES CO 0.750% 01/15/2024 DD 01/29/21	350,000.000	349,856.50	345,310.00	(4,546.50)
LCPF07650002	74762EAG7	QUANTA SERVICES INC 0.950% 10/01/2024 DD 09/23/21	350,000.000	349,990.40	346,276.00	(3,714.40)
LCPF07650002	760759AU4	REPUBLIC SERVICES INC 2.500% 08/15/2024 DD 08/07/19	330,000.000	348,324.90	339,659.10	(8,665.80)
LCPF07650002	776743AE6	ROPER TECHNOLOGIES INC 3.650% 09/15/2023 DD 08/28/18	325,000.000	352,638.00	338,347.75	(14,290.25)
LCPF07650002	84756NAF6	SPECTRA ENERGY PARTNERS LP 3.500% 03/15/2025 DD 03/12/15	325,000.000	352,946.75	341,773.25	(11,173.50)
LCPF07650002	89788MAF9	TRUIST FINANCIAL CORP VAR RT 06/09/2025 DD 06/07/21	475,000.000	475,000.00	473,679.50	(1,320.50)
LCPF07650002	91529YAK2	UNUM GROUP 4.000% 03/15/2024 DD 03/14/14	320,000.000	348,758.40	337,897.60	(10,860.80)
LCPF07650002	92343EAH5	VERISIGN INC 5.250% 04/01/2025 DD 03/27/15	310,000.000	353,666.60	341,775.00	(11,891.60)
	TOTAL CORPORATE DEBT INSTRUMENTS			**43,212,405.79**	**42,142,624.93**	**(1,069,780.86)**
CORPORATE STOCK - PREFERRED						
LCPF07641902	48126HAC4	JPMORGAN CHASE & CO VAR RT 12/31/2049 DD 09/23/14	35,000.000	38,386.60	36,925.00	(1,461.60)

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
TOTAL CORPORATE STOCK - PREFERRED				**38,386.60**	**36,925.00**	**(1,461.60)**
PARTNERSHIP/JOINT VENTURE INTEREST						
LCPF07641102	99VVAJMK0	MORGAN STANLEY IFHF SPV LP	54,184.910	52,426.74	54,184.91	1,758.17
LCPF07641302	999214240	SIGULER GUFF DIST OPP III	175,244.620	752,063.17	0.18	(752,062.99)
LCPF07641302	99VVAGP07	SIGULER GUFF DIST OPP FD IV	1,163,862.650	1,173,233.13	1,230,020.00	56,786.87
LCPF07641502	999254071	TCW CRESC MEZZ V	16,688.020	77,968.26	15,717.73	(62,250.53)
LCPF07643002	99VVABQ98	CCA SILVER	6,500,218.200	8,589,349.25	6,500,218.20	(2,089,131.05)
LCPF07644002	999287451	TCW CAPITAL TRUST	15,710.750	(72,625.17)	15,104.96	87,730.13
LCPF07644602	999292642	LEXINGTON CAPITAL PTNRS VII	674,442.000	759,330.14	707,274.00	(52,056.14)
LCPF07644702	99VVAK5Y6	ENTRUST SPECIAL OPPS FUND II	345,911.000	433,409.00	230,997.00	(202,412.00)
LCPF07645002	99VVA2RX4	ENTRUST SPECIAL OPP FUND III LTD	4,295,674.000	4,069,644.00	3,596,418.00	(473,226.00)
LCPF07645502	99VVBAXB6	BOYD WATTERSON GSA FUND LP	14,497.680	17,184,773.85	17,784,803.99	600,030.14
LCPF07650402	99VVA89V5	INTERCONTINENTAL US RE FD LLC	5,660,059.000	5,032,217.00	6,030,971.00	998,754.00
LCPF07650502	99VVB6S88	ARES MANAGEMENT LLC	11,351,856.550	9,081,323.44	11,724,778.00	2,643,454.56
LCPF07650702	99VVCFF73	PARTNERS GR PG DIR EQ 19 FD	2,254,798.110	2,254,798.11	2,562,200.00	307,401.89
TOTAL PARTNERSHIP/JOINT VENTURE INTEREST				**49,387,910.92**	**50,452,687.97**	**1,064,777.05**
REAL ESTATE						
LCPF07641202	999E98098	PRISA III	5,132.793	11,201,983.09	14,455,017.29	3,253,034.20
TOTAL REAL ESTATE				**11,201,983.09**	**14,455,017.29**	**3,253,034.20**
OTHER INVESTMENTS						
LCPF07641902	88283LHU3	TEXAS ST TRANSPRTN COMMISSIONS 5.178% 04/01/2030 DD 08/05/10	35,000.000	45,133.90	42,017.15	(3,116.75)
TOTAL OTHER INVESTMENTS				**45,133.90**	**42,017.15**	**(3,116.75)**
COMMON/COLLECTIVE TRUST						
LCPF07605102	999616105	JPMCB SPECIAL SITUATION PROPERTY FUND	1,409,843.186	9,693,662.33	18,439,761.97	8,746,099.64
LCPF07605102	999616113	JPMCB STRATEGIC PROPERTY FUND	1,914,509.541	15,659,332.42	24,028,434.28	8,369,101.86
LCPF07605402	996097770	LABORERS PROPRIETARY CASH FUND	25,274,348.230	25,274,348.23	25,274,348.23	0.00
LCPF07626802	999506926	U S BANCORP - ERECT FUND	2,582.310	3,361,537.63	10,070,158.04	6,708,620.41
LCPF07626902	999657398	ERECT CO-PARTICIPATION FUND	2,465.232	2,979,902.85	11,661,739.96	8,681,837.11
LCPF07632502	996097770	LABORERS PROPRIETARY CASH FUND	1,110,464.650	1,110,464.65	1,110,464.65	0.00
LCPF07632502	99A927088	AMERICAN FEDERATION OF LABOR & CONGRESS OF INDUS ORGANIZATION	141.123	157,327.45	160,464.90	3,137.45
LCPF07641402	999239288	CALAMOS GLOBAL OPPOR TRUST	832,992.019	8,343,491.86	26,845,961.67	18,502,469.81
LCPF07641902	996097770	LABORERS PROPRIETARY CASH FUND	69,806.270	69,806.27	69,806.27	0.00
LCPF07642002	999593361	ULLICO MTG SEPARATE ACCOUNT J	375,790.738	4,467,942.85	6,347,813.93	1,879,871.08
LCPF07644902	99VVATJY2	S&P 500 POOLED INDEX FUND-L811	1,734,948.608	148,979,386.42	315,396,827.93	166,417,441.51
LCPF07645102	996097770	LABORERS PROPRIETARY CASH FUND	658,965.030	658,965.03	658,965.03	0.00
LCPF07650002	996097770	LABORERS PROPRIETARY CASH FUND	142,955.710	142,955.71	142,955.71	0.00

	Security ID	Security Description	Shares	Cost	Market Value	Unrealized Gain/Loss
LCPF07650102	99VVA42R0	RHUMBLINE S&P SMALL CAP 600 POOLED INDEX	670,667.975	29,582,001.44	54,696,871.28	25,114,869.84
LCPF07650202	996097770	LABORERS PROPRIETARY CASH FUND	6,210,674.710	6,210,674.71	6,210,674.71	0.00
LCPF07650202	99VVB1QV0	RHUMBLINE S&P MID CAP 400 POOLED INDEX FUND	280,097.506	30,214,292.81	45,249,740.61	15,035,447.80
LCPF07650602	99VVCBTC6	VICTORY CAPITAL	5,825,680.740	4,970,431.94	5,825,680.74	855,248.80
LCPF07650802	99VVCG9N3	FBO FRANKLIN BSP CAPITAL CORP	212,311.140	3,195,235.26	5,347,165.97	2,151,930.71
	TOTAL COMMON/COLLECTIVE TRUST			**295,071,759.86**	**557,537,835.88**	**262,466,076.02**
103-12 INVESTMENT ENTITIES						
LCPF07644502	999606882	SILCHESTER INTL INVESTORS INTL VALUE EQUITY GROUP TRUST	395,738.350	31,091,433.41	63,664,073.05	32,572,639.64
	TOTAL 103-12 INVESTMENT ENTITIES			**31,091,433.41**	**63,664,073.05**	**32,572,639.64**
REGISTERED INVESTMENT COMPANIES						
LCPF07632202	36381Y108	MONDRIAN INTL VAL EQTY-DPT	3,495,548.578	50,579,165.66	50,860,231.81	281,066.15
LCPF07632502	66538G171	BYD WTTERSN LTD DUR ENH-I2	1,359,000.000	13,706,216.33	13,698,720.00	(7,496.33)
LCPF07641902	78468R622	SPDR BLOOMBERG HIGH YIELD BO	160.000	16,253.07	17,371.20	1,118.13
LCPF07645402	362008310	GMO BENCHMARK-FREE ALLOC-III	1,261,202.627	33,256,618.69	32,185,891.04	(1,070,727.65)
LCPF07650302	543495717	LOOMIS SAYLES BOND FUND-N1	368,422.889	4,764,324.01	5,010,551.29	246,227.28
	TOTAL REGISTERED INVESTMENT COMPANIES			**102,322,577.76**	**101,772,765.34**	**(549,812.42)**
	GRAND TOTAL			**620,098,290.18**	**915,730,315.32**	**295,632,025.14**
			NON-INTEREST BEARING CASH		(699,079)	96.19 C
			TOTAL INVESTMENTS		$ 915,031,236	295,631,928.95 I

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

SCHEDULE OF INVESTMENT ASSETS BOTH ACQUIRED AND DISPOSED OF WITHIN THE PLAN YEAR

Year ended December 31, 2021

Form 5500
Schedule H, Line 4i

Plan #: 001
EIN #: 25-6135576

Identity of issuer, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost of acquisitions	Proceeds of dispositions
Amazon.com Inc.	Corporate Debt, par value $16,000, 1.650% due 05/12/2028 dated 05/12/2021	$ 64,962	$ 65,475
Apple Inc.	Corporate Debt, par value $115,000, 2.200% due 09/11/2029 dated 09/11/2019	120,829	118,644
Bank of America Corp.	Corporate Debt, par value $40,000, variable rate due 03/13/2052 dated 03/11/2021	40,561	43,290
Chevron USA Inc.	Corporate Debt, par value $15,000, 5.250% due 11/15/2043 dated 11/15/2020	22,472	20,553
Ford Motor Co.	Corporate Debt, par value $50,000, 9.000% due 04/22/2025 dated 04/22/2020	60,200	58,794
Goldman Sachs Group Inc.	Corporate Debt, par value $35,000, variable rate due 04/22/2042 dated 04/22/2021	35,015	34,939
Goldman Sachs Group Inc.	Corporate Debt, par value $40,000, variable rate due 07/21/2032 dated 07/21/2021	40,195	40,307
J. P. Morgan Chase & Co.	Corporate Debt, par value $40,000, variable rate due 07/23/2029 dated 07/23/2018	47,116	45,890
KLA Corp.	Corporate Debt, par value $25,000, 4.650% due 11/01/2024 dated 11/06/2014	27,982	27,903
PPL Capital Funding Inc.	Corporate Debt, par value $355,000, 3.950% due 03/15/2024 dated 03/10/2014	385,338	376,971
Westpac Banking Corp.	Corporate Debt, par value $40,000, 2.150% due 06/03/2031 dated 06/03/2021	39,975	41,015

See accompanying Independent Auditor's Report.

LABORERS' DISTRICT COUNCIL OF WESTERN PENNSYLVANIA PENSION FUND

SCHEDULE OF REPORTABLE TRANSACTIONS

Year ended December 31, 2021

Form 5500	Plan #:	001
Schedule H, Line 4j	EIN #:	25-6135576

See following schedule prepared by the Bank of New York Mellon.

See accompanying Independent Auditor's Report.

Tran Count	Security ID	Security Description	Shares	Cost of Acquisitions	Proceeds of Dispositions	Cost of Assets Disposed	Gain/Loss
5% VALUE :	**41,430,569.28**						
109	996087094	BNY MELLON CASH RESERVE 0.100% 12/31/2049 DD 06/26/97	45,143,084.890	45,143,084.89	0.00	0.00	0.00
112	996087094	BNY MELLON CASH RESERVE 0.100% 12/31/2049 DD 06/26/97	45,776,602.690	0.00	45,776,602.69	45,776,602.69	0.00
338	996097770	LABORERS PROPRIETARY CASH FUND	167,350,120.600	0.00	167,350,120.60	167,350,120.60	0.00
613	996097770	LABORERS PROPRIETARY CASH FUND	182,783,422.490	182,783,422.49	0.00	0.00	0.00

SCHEDULE MB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information

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

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

OMB No. 1210-0110

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

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

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

A Name of plan
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
LABORERS DISTRICT COUNCIL OF W PA PENSION FUND

D Employer Identification Number (EIN)
25-6135576

E Type of plan: **(1)** [X] Multiemployer Defined Benefit **(2)** [ ] Money Purchase (see instructions)

1a	Enter the valuation date: Month 01 Day 01 Year 2021		
b	Assets		
	(1) Current value of assets	**1b(1)**	817,998,454
	(2) Actuarial value of assets for funding standard account	**1b(2)**	801,680,506
c	**(1)** Accrued liability for plan using immediate gain methods	**1c(1)**	1,262,477,275
	(2) Information for plans using spread gain methods:		
	(a) Unfunded liability for methods with bases	**1c(2)(a)**	
	(b) Accrued liability under entry age normal method	**1c(2)(b)**	
	(c) Normal cost under entry age normal method	**1c(2)(c)**	
	(3) Accrued liability under unit credit cost method	**1c(3)**	1,262,477,275
d	Information on current liabilities of the plan:		
	(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	**1d(1)**	
	(2) "RPA '94" information:		
	(a) Current liability	**1d(2)(a)**	2,566,319,857
	(b) Expected increase in current liability due to benefits accruing during the plan year	**1d(2)(b)**	53,258,198
	(c) Expected release from "RPA '94" current liability for the plan year	**1d(2)(c)**	108,245,659
	(3) Expected plan disbursements for the plan year	**1d(3)**	108,245,659

Statement by Enrolled Actuary

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

SIGN HERE

BRADFORD L. RIGBY — Signature of actuary

10/12/2022 — Date

BRADFORD L. RIGBY — Type or print name of actuary

2007217 — Most recent enrollment number

COWDEN ASSOCIATES, INC. — Firm name

412-394-9330 — Telephone number (including area code)

FOUR GATEWAY CENTER, SUITE 605 444 LIBERTY AVENUE
PITTSBURGH PA 15222
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

2 Operational information as of beginning of this plan year:

		(1) Number of participants	(2) Current liability
a Current value of assets (see instructions)	2a		817,998,454
b "RPA '94" current liability/participant count breakdown:			
(1) For retired participants and beneficiaries receiving payment		5,232	1,349,545,779
(2) For terminated vested participants		3,161	305,317,656
(3) For active participants:			
(a) Non-vested benefits			42,939,300
(b) Vested benefits			868,517,122
(c) Total active		8,141	911,456,422
(4) Total		16,534	2,566,319,857
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c		31.87%

3 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	c) Amount paid by employees
07/01/2021	78,296,655	0			
		Totals ► 3(b)	78,296,655	3(c)	0
(d) Total withdrawal liability amounts included in line 3(b) total				3(d)	238,404

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	63.5 %
b Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If entered code is "N," go to line 5	4b	E

c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? [X] Yes [ ] No

d If the plan is in critical status or critical and declining status, were any benefits reduced (see instructions)? [ ] Yes [ ] No

e If line d is "Yes," enter the reduction in liability resulting from the reduction in benefits (see instructions), measured as of the valuation date	4e	
f If the rehabilitation plan projects emergence from critical status or critical and declining status, enter the plan year in which it is projected to emerge. If the rehabilitation plan is based on forestalling possible insolvency, enter the plan year in which insolvency is expected and check here [ ]	4f	

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

a [ ] Attained age normal **b** [ ] Entry age normal **c** [X] Accrued benefit (unit credit) **d** [ ] Aggregate

e [ ] Frozen initial liability **f** [ ] Individual level premium **g** [ ] Individual aggregate **h** [ ] Shortfall

i [ ] Other (specify):

j If box h is checked, enter period of use of shortfall method	**5j**	
k Has a change been made in funding method for this plan year?		☐ Yes ☒ No
l If line k is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?		☐ Yes ☐ No
m If line k is "Yes," and line l is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method	**5m**	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	**6a**	2.43 %			
		Pre-retirement		Post-retirement	
b Rates specified in insurance or annuity contracts		☐ Yes ☐ No ☒ N/A		☐ Yes ☐ No ☒ N/A	
c Mortality table code for valuation purposes:					
(1) Males	**6c(1)**	AP		AP	
(2) Females	**6c(2)**	AFP		AFP	
d Valuation liability interest rate	**6d**	7.50%		7.50%	
e Expense loading	**6e**	15.6 %	☐ N/A	0.0%	☐ N/A
f Salary scale	**6f**	0.00 %	☐ N/A		
g Estimated investment return on actuarial value of assets for year ending on the valuation date	**6g**	7.8%			
h Estimated investment return on current value of assets for year ending on the valuation date	**6h**	9.1%			

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	14,168,223	1,493,097

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval	**8a**	
b(1) Is the plan required to provide a projection of expected benefit payments? (See the instructions.) If "Yes," attach a schedule.		☒ Yes ☐ No
b(2) Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach a schedule.		☒ Yes ☐ No
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?		☐ Yes ☒ No
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?		☐ Yes ☐ No
(2) If line 8d(1) is "Yes," enter the number of years by which the amortization period was extended	**8d(2)**	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?		☐ Yes ☐ No
(4) If line 8d(3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	**8d(4)**	
(5) If line 8d(3) is "Yes," enter the date of the ruling letter approving the extension	**8d(5)**	
(6) If line 8d(3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?		☐ Yes ☐ No
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	**8e**	

9 Funding standard account statement for this plan year:				
Charges to funding standard account:				
a Prior year funding deficiency, if any			9a	
b Employer's normal cost for plan year as of valuation date			9b	19,108,934
c Amortization charges as of valuation date:		Outstanding balance		
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	519,319,445		68,095,112
(2) Funding waivers	9c(2)	0		0
(3) Certain bases for which the amortization period has been extended	9c(3)	0		0
d Interest as applicable on lines 9a, 9b, and 9c			9d	6,540,303
e Total charges. Add lines 9a through 9d			9e	93,744,349
Credits to funding standard account:				
f Prior year credit balance, if any			9f	58,522,677
g Employer contributions. Total from column (b) of line 3			9g	78,296,655
		Outstanding balance		
h Amortization credits as of valuation date	9h	0		0
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h			9i	6,852,077
j Full funding limitation (FFL) and credits:				
(1) ERISA FFL (accrued liability FFL)	9j(1)	578,810,509		
(2) "RPA '94" override (90% current liability FFL)	9j(2)	1,567,043,619		
(3) FFL credit			9j(3)	0
k (1) Waived funding deficiency			9k(1)	
(2) Other credits			9k(2)	
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)			9l	143,671,409
m Credit balance: If line 9l is greater than line 9e, enter the difference			9m	49,927,060
n Funding deficiency: If line 9e is greater than line 9l, enter the difference			9n	

9 o Current year's accumulated reconciliation account:			
(1) Due to waived funding deficiency accumulated prior to the 2021 plan year	9o(1)		
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:			
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)		
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)		0
(3) Total as of valuation date	9o(3)		0
10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10		
11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions			☒ Yes ☐ No

SCHEDULE R, LINE 14

Information on Inactive Participants Whose Contributing Employers are No Longer Making Contributions to the Plan

Employer Withdrawal	Count of Employee
Azcon Scrap Corp	13
Bluelinx Corp	6
KIMs Nursery	4
Marous Bros Construction	12
Rennekamp Supply Co.	3
Showman Ray Jr Excavating Inc.	11
Winfield Lime-Stone Inc.	5

Schedule MB, Line 3
Withdrawal Liability Amounts

EMPLOYER NAME	DATE	Total
BLUELINX CORPORATION	1/15/2021	6,891.57
	3/23/2021	6,891.57
	6/15/2021	6,891.57
	9/16/2021	6,891.56
	12/10/2021	6,891.57
BLUELINX CORPORATION Total		**34,457.84**
INCHES NURSERY	12/13/2021	203,946.12
INCHES NURSERY Total		**203,946.12**
Grand Total		**238,403.96**