

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>	
A This return/report is for:	☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	▶ ☒
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	▶ ☐

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>MIDWEST PENSION PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/1967</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>07/01/1967</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>07/01/1967</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BOARD OF TRUSTEES - MIDWEST PENSION PLAN</u> <u>245 FENCL LANE</u> <u>HILLSIDE, IL 60162</u> <u>245 FENCL LANE</u> <u>HILLSIDE, IL 60162</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>36-6512748</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>312-738-0822</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>326100</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>36-6512748</u>	2c Plan Sponsor's telephone number <u>312-738-0822</u>	2d Business code (see instructions) <u>326100</u>	
2b Employer Identification Number (EIN) <u>36-6512748</u>					
2c Plan Sponsor's telephone number <u>312-738-0822</u>					
2d Business code (see instructions) <u>326100</u>					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2022	MARK SPANO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.		10142022
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 11775
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..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	 6a(1) 1846 6a(2) 1758 6b 3677 6c 5388 6d 10823 6e 608 6f 11431 6g 6h 133
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7 52

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) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

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

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2021 Form M-1 annual report. If the plan was not required to file the 2021 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE 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
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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 MIDWEST PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOARD OF TRUSTEES - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748

E Type of plan: (1) ☒ 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)	134436435
(2) Actuarial value of assets for funding standard account	1b(2)	135737913
c (1) Accrued liability for plan using immediate gain methods	1c(1)	124591247
(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)	124591247
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)	227988404
(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	1275962
(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	9906921
(3) Expected plan disbursements for the plan year.....	1d(3)	11165009

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	10/13/2022
Signature of actuary	Date
KEVIN CAMPE	20-05356
Type or print name of actuary	Most recent enrollment number
MILLIMAN	312-726-0677
Firm name	Telephone number (including area code)
71 S. WACKER DR., 31ST FLOOR, CHICAGO, IL 60606	
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 ☐

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Schedule MB (Form 5500) 2021
v. 201209

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	134436435
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	4030	107710423
(2) For terminated vested participants	5902	99278476
(3) For active participants:		
(a) Non-vested benefits.....		818228
(b) Vested benefits.....		20181277
(c) Total active	1846	20999505
(4) Total	11778	227988404
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	58.97 %

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	1621039				
			Totals ▶	3(b)	1621039
				3(c)	
				3(d)	521346

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

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	108.9 %
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	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		☐ 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 ☒ 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	2.08 %
	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)	13	13	
(2) Females	6c(2)	13	13	
d Valuation liability interest rate	6d	7.50 %	7.50 %	
e Expense loading	6e	293.9 % ☐ N/A	%	☒ 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	6.8 %		
h Estimated investment return on current value of assets for year ending on the valuation date	6h	6.1 %		

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	86610	9127

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	0
b Employer's normal cost for plan year as of valuation date.....	9b	1686177
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)	37161986
(2) Funding waivers	9c(2)	
(3) Certain bases for which the amortization period has been extended	9c(3)	
d Interest as applicable on lines 9a, 9b, and 9c.....	9d	672180
e Total charges. Add lines 9a through 9d.....	9e	9634581

Credits to funding standard account:

f Prior year credit balance, if any.....	9f	43559899
g Employer contributions. Total from column (b) of line 3.....	9g	1621039
	Outstanding balance	
h Amortization credits as of valuation date.....	9h	4748753
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....	9i	3405870
j Full funding limitation (FFL) and credits:		
(1) ERISA FFL (accrued liability FFL).....	9j(1)	38055955
(2) "RPA '94" override (90% current liability FFL)	9j(2)	67130566
(3) FFL credit	9j(3)	
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	49635972
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m	40001391
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)	
(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)	
(3) Total as of valuation date	9o(3)	
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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan MIDWEST PENSION PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BOARD OF TRUSTEES - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
WELLINGTON MANAGEMENT COMPANY LLP	280 CONGRESS STREET BOSTON, MA 02210

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
NEWTOWER TRUST COMPANY	
30-0872552	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
JMB INSURANCE AGENCY, INC	
36-2711359	

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
ALERA GROUP - GCG FINANCIAL	
81-4473358	

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

CHEVY CHASE TRUST

52-2037618

(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

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

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

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

INTERCONTINENTAL REAL ESTATE CORP.

04-2895544

(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?
51	NONE	274789	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ASB CAPITAL MANAGEMENT

80-0618452

(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?
51	SEE ATTACHED (2)	196458	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GLOUSTON CAPITAL PARTNERS, LLC

98-1445316

(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?
51	NONE	116345	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

ADP

13-3036745

(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?
49	SEE ATTACHED (2)	133007	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LOOMIS SAYLES & COMPANY LP

04-3200030

(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?
51 68	NONE	103872	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

BROWN ADVISORY, LLC

26-4560299

(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?
51	SEE ATTACHED - 2	91281	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

LSV ASSET MANAGEMENT

23-2772200

(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?
51	NONE	79238	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

AMALGAMATED BANK OF CHICAGO

36-0721895

(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?
51 19	SEE ATTACHED (2)	76950	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BASYS, LLC

52-1796473

(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	SEE ATTACHED (2)	74669	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)

DEARBORN PARTNERS

36-4145621

(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?
51	NONE	73885	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BUCHBINDER TUNICK & COMPANY LLP

13-1578842

(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	SEE ATTACHED (1)	68000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INVESTMENT PERFORMANCE SERVICES LLC

58-2432390

(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?
51	SEE ATTACHED (2)	62282	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)

MILLIMAN

91-0675641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	SEE ATTACHED (1)	60409	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

JOHNSON & KROL, ATTORNEY AT LAW, LLC

36-4342024

(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	SEE ATTACHED (1)	59835	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

HARDMAN JOHNSTON GLOBAL ADVISORS

13-3257590

(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?
51	SEE ATTACHED (2)	55877	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)

HAMILTON LANE ADVISORS

23-2962336

(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?
51	SEE ATTACHED (2)	49055	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

NATIONAL INVESTMENT SERVICES INC

84-3937993

(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?
51	NONE	45111	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NYDIA ORTIZ

36-6512748

(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?
30	SEE ATTACHED (2)	41172	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)

INGRID ESCOBAR

36-6512748

(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?
30	SEE ATTACHED (2)	34310	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GABRIELA RAMIREZ

36-6512748

(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?
30	SEE ATTACHED (2)	32653	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GROSVENOR CAPITAL MANAGEMENT, LP

36-3795985

(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?
51	SEE ATTACHED (2)	31252	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

EVERACTIVE SOLUTIONS, INC

27-0988892

(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	SEE ATTACHED (2)	25546	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GLOBAL TRUST COMPANY

26-3761443

(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?
51	NONE	16662	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

WELLINGTON TRUST COMPANY, NA

04-2755549

(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?
51	SEE ATTACHED (2)	16169	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:	ROBERT A. BEHAR	b EIN:	91-0675641
c Position:	ACTUARY		
d Address:	71 SOUTH WACKER DRIVE, SUITE 3100 CHICAGO, IL 60606	e Telephone:	312-726-0677

Explanation: NO LONGER WITH MILLIMAN, INC.

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

A Name of plan <u>MIDWEST PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES - MIDWEST PENSION PLAN</u>	D Employer Identification Number (EIN) <u>36-6512748</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: ASB ALLEGIANCE REAL ESTATE FUND

b Name of sponsor of entity listed in (a): CHEVY CHASE TRUST COMPANY

c EIN-PN <u>52-6257033-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>20522973</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: COLLECTIVE INTL EQUITY FUND

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

c EIN-PN <u>36-6052183-094</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8629068</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MULTI-EMPLOYER PROPERTY TRUST

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

c EIN-PN <u>52-6218800-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3836098</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: NIS INTERMEDIATE FIXED INCOME FUND

b Name of sponsor of entity listed in (a): NATIONAL INVESTMENT SERVICES, INC

c EIN-PN <u>20-0065449-004</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>11159963</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: UTC-CIF OPPORTUNISTIC INV

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

c EIN-PN <u>04-2767481-076</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1932300</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: VICTORY TRIVALENT INTL SMALL-CAP CO

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

c EIN-PN <u>80-6249702-006</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>6623854</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: HARDMAN JOHNSTON INTL EQUITY GRP

b Name of sponsor of entity listed in (a): HARDMAN JOHNSTON GLOBAL ADVISORS LLC

c EIN-PN <u>26-6493485-001</u>	d Entity code <u>E</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10406660</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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
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For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>		
A Name of plan <u>MIDWEST PENSION PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES - MIDWEST PENSION PLAN</u>	D Employer Identification Number (EIN) <u>36-6512748</u>	

Part I	Asset and Liability Statement
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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	7126	75357
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	777006	285968
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	917507	1157709
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	2056662	2283878
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	11249681	13518059
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	32102995	35238155
(5) Partnership/joint venture interests	1c(5)	15627798	31831740
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts.....	1c(9)	72676653	52704256
(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)		10406660
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	38242 25678
f	Total assets (add all amounts in lines 1a through 1e)	1f	135453670 147527460
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	209770 188539
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	53536 69498
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	263306 258037
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	135190364 147269423

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	1278429
	(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)	1278429
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	348
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	788783
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	
	(F) Other	2b(1)(F)	34408
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	823539
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	333822
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	333822
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	63013865
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	53915036
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	9098829
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	-392705
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	-392705

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		7036957
(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)		4530255
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		
c Other income.....	2c		10149
d Total income. Add all income amounts in column (b) and enter total.....	2d		22719275
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	8023110	
(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)		8023110
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)	396310	
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	1289226	
(4) Other.....	2i(4)	931570	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		2617106
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		10640216
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		12079059
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

(1) ☐ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☒ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: BUCHBINDER TUNICK & COMPANY LLP

(2) EIN: 13-1578842

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		750000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	
4n		X	
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.			
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)			
5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)	
5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☒ Yes ☐ No ☐ Not determined If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year <u>437330</u> .			

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>MIDWEST PENSION PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>BOARD OF TRUSTEES - MIDWEST PENSION PLAN</u>	D Employer Identification Number (EIN) <u>36-6512748</u>

Part I	Distributions
---------------	----------------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): _____ Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	<u>16</u>

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

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

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

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

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

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

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

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer FRESH EXPRESS CHIQUITA BRANDS

b EIN 94-2591533

c Dollar amount contributed by employer 123814

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 10 Day 27 Year 2023

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) 31.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

a Name of contributing employer CHICAGO STEEL HOLDINGS

b EIN 20-0836074

c Dollar amount contributed by employer 99306

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 10 Day 31 Year 2024

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) 180.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

a Name of contributing employer LA-CO INDUSTRIES

b EIN 36-2278494

c Dollar amount contributed by employer 87072

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 11 Day 30 Year 2023

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) 96.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

a Name of contributing employer GLOBAL MATERIAL TECHNOLOGY

b EIN 04-2624726

c Dollar amount contributed by employer 78225

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 10 Day 31 Year 2023

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) 75.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

a Name of contributing employer WERTHEIMER BOX

b EIN 36-2096689

c Dollar amount contributed by employer 80075

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 05 Day 14 Year 2024

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) 95.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

a Name of contributing employer BRETFORD FRANKLIN PARK

b EIN 36-2113703

c Dollar amount contributed by employer 74385

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 02 Day 28 Year 2023

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) 75.00

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (specify): MONTHLY

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year

15b

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

a Enter the number of employers who withdrew during the preceding plan year

16a

2

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

1300880

- 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: 38.8 % Investment-Grade Debt: 26.7 % High-Yield Debt: 0.0 % Real Estate: 26.0 % Other: 8.5 %

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

MIDWEST PENSION PLAN

**Financial Statements
and
Supplemental Schedules**

For the Years Ended December 31, 2021 and 2020

MIDWEST PENSION PLAN
Financial Statements and Supplemental Schedules
For the Years Ended December 31, 2021 and 2020

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INDEPENDENT AUDITOR'S REPORT

Board of Trustees
Midwest Pension Plan

Opinion

We have audited the accompanying financial statements of Midwest Pension Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 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 Midwest Pension Plan as of December 31, 2021 and 2020, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Midwest Pension Plan's ability to continue as a going concern within 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 that may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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, including omissions, 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 Midwest Pension Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Midwest Pension Plan's ability to continue as a going concern for a reasonable period of time.

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

Other Matter - Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules on pages 28 through 39 are presented for purposes of additional analysis and are not a required part of the financial statements. The supplemental schedules on pages 28 through 38 represent supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

Buchbinder Tunick & Company LLP

BUCHBINDER TUNICK & COMPANY LLP

New York, NY
June 13, 2022

MIDWEST PENSION PLAN
Statements of Net Assets Available for Benefits
December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Assets:		
Investments, at fair value:		
Common stocks	\$ 35,238,155	\$ 32,102,995
Corporate and other bonds and notes	13,518,059	11,249,681
Short-term investment funds	1,540,530	1,716,717
Common/collective trusts	77,510,943	79,041,400
Hedge funds	<u>17,431,713</u>	<u>9,263,051</u>
Total investments	<u>145,239,400</u>	<u>133,373,844</u>
Receivables:		
Accrued interest	188,935	152,518
Accrued dividends	15,817	15,793
Employers' contributions	15,952	23,077
Withdrawal liability receivable, net of allowance of \$-0- in 2021 and \$735,449 in 2020	270,016	753,929
Due from related entities	-	1,171
Due from broker for pending security trades	<u>174,160</u>	<u>18,569</u>
Total receivables	<u>664,880</u>	<u>965,057</u>
Cash	<u>818,705</u>	<u>347,071</u>
Prepaid expenses	<u>90,593</u>	<u>67,404</u>
Prepaid pension benefits	<u>688,204</u>	<u>662,052</u>
Other assets:		
Computer software costs, net of accumulated amortization of \$568,138 and \$553,992 at December 31, 2021 and 2020, respectively	<u>25,678</u>	<u>38,242</u>
Total assets	<u>147,527,460</u>	<u>135,453,670</u>
Liabilities:		
Accounts payable	188,539	209,770
Due to related entities	52,073	40,389
Due to broker for pending security trades	<u>17,425</u>	<u>13,147</u>
Total liabilities	<u>258,037</u>	<u>263,306</u>
Net assets available for benefits	<u>\$ 147,269,423</u>	<u>\$ 135,190,364</u>

See notes to financial statements.

MIDWEST PENSION PLAN
Statements of Changes in Net Assets Available for Benefits
For the years ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
Additions:		
Investment income:		
Net appreciation in fair value of investments	\$ 20,273,336	\$ 7,697,996
Interest and dividends	<u>1,157,361</u>	<u>1,266,275</u>
	21,430,697	8,964,271
Less: investment expenses	<u>(1,289,226)</u>	<u>(1,042,630)</u>
Net investment income	20,141,471	7,921,641
Contributions from employers	1,242,576	1,341,031
Withdrawal liability income	35,853	1,301,895
Other income	<u>10,149</u>	<u>14,068</u>
Total additions	<u>21,430,049</u>	<u>10,578,635</u>
Deductions:		
Benefits paid directly to participants	8,023,110	7,901,894
Administrative expenses	<u>1,327,880</u>	<u>2,085,491</u>
Total deductions	<u>9,350,990</u>	<u>9,987,385</u>
Net increase	12,079,059	591,250
Net assets available for benefits:		
Beginning of year	<u>135,190,364</u>	<u>134,599,114</u>
End of year	<u>\$ 147,269,423</u>	<u>\$ 135,190,364</u>

See notes to financial statements.

MIDWEST PENSION PLAN
Notes to Financial Statements
December 31, 2021 and 2020

Note 1 - Description of the Plan

The following brief description of the Midwest Pension Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan regulations for more complete information.

General

The Plan is a multi-employer, defined benefit pension plan covering all eligible employees of contributing employers under the provisions of various collective bargaining agreements entered into by the employers and the Central States Joint Board, AFL-CIO (the "Union") and its affiliated locals. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Pension Benefits

The Plan provides for normal, early retirement, late retirement, vested benefits and disability pensions to employees who meet specific requirements as to age and years of service.

Death Benefits

- (a) Spouse survivorship pension is payable upon the death of an employee: (i) receiving a disability pension before age 65, or (ii) after at least 10 years of vested service and before the employee received a pension.
- (b) Monthly pension amount to the employee's spouse is that which would have been payable had the employee retired with a joint and survivor pension, as described below, beginning at the later of the employee's death or age 55.

Optional Benefits

Unless a married employee elects a single-life pension, subject to the consent of spouse to waive the joint and survivor pension, the pension benefit shall be actuarially reduced and payable in the form of a joint and survivor pension, under which the spouse will receive 50% thereof as a survivorship pension payable upon death (or deferred to the 55th birthday, if later). No death benefits are payable on behalf of a retired employee receiving a single-life pension.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

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

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See note 5 for discussion of fair value measurements.

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

Use of Estimates

The preparation of financial statements in accordance 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 and liabilities, and changes therein, disclosure of contingent assets and liabilities and the actuarial present value of accumulated plan benefits at the date of the financial statements. Actual results could differ from those estimates.

Funding Policy

In accordance with the terms of the Trust Agreement, the Plan shall receive contributions from the employers pursuant to their respective collective bargaining agreements with the Union.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 2 - Summary of Significant Accounting Policies (Continued)

Contributions

Employer contributions are recorded for payroll periods which ended on or before the financial statements' date.

Reserves for potential uncollectible contributions are established based on expectations of future payments to be received. As of December 31, 2021 and 2020, no allowance was deemed necessary by management.

Depreciation and Amortization

Computer software costs are amortized by the straight-line method over three years.

Depreciation and amortization totaled \$14,146 and \$12,586 for the years ended December 31, 2021 and 2020, respectively.

Subsequent Events

The Plan has evaluated subsequent events and transactions through June 13, 2022, the date that the financial statements were available to be issued.

Note 3 - Concentrations of Credit Risk

Financial instruments that subject the Plan to concentrations of credit risk include cash, a short-term investment fund and contributions receivable from employers. While the Plan attempts to limit any financial exposure by maintaining accounts at several financial institutions, its deposit balances may, at times, exceed federally insured limits. The Plan has not experienced any losses on such accounts.

In connection with the participants of the Plan, two employers represented approximately 19% of total contributions for the year ended December 31, 2020.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 4 - Investments

During 2021 and 2020, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$20,273,336 and \$7,697,996, respectively.

Note 5 - Fair Value Measurements

Financial Accounting Standards Board ("FASB") *Accounting Standards Codification* ("ASC") 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. It defines fair value as an exit price, which is the price that would be received for an asset or paid to transfer a liability in the Plan's principal or most advantageous market for the asset or liability, in an orderly transaction between market participants on the measurement date.

The fair value hierarchy generally requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. Observable inputs reflect the assumptions market participants would use in pricing the asset or liability and are developed based on market data obtained from sources independent of the reporting entity. Unobservable inputs reflect the entity's own assumptions based on market data and the entity's judgments about the assumptions that market participants would use in pricing the asset or liability, and are to be developed based on the best information available in the circumstances.

The Plan determines the fair market value of its investment in securities based on the established fair value definition and hierarchy levels. The three levels within the hierarchy that may be used to measure fair value are:

Level 1: Unadjusted quoted prices in active markets for identical assets or liabilities.

Level 2: Observable inputs, including Level 1 prices that have been adjusted; quoted prices for similar assets or liabilities; quoted prices in markets that are less active than traded exchanges; and other inputs that are observable or can be substantially corroborated by observable market data.

Level 3: Unobservable inputs that are supported by little or no market activity and that are a significant component of the fair value of the assets or liabilities.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

The lowest level of input that is a significant component of the fair value measurements determines the placement of the entire fair value measurement in the hierarchy. The Plan's assessment of the significance of a particular input to the fair value measurement requires judgment, and may affect the classification of fair value assets and liabilities within the fair value hierarchy levels.

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

Common stocks:

Common stocks are valued by quoted market prices in active markets.

Corporate and other bonds and notes:

The fair value of corporate and other bonds and notes is determined using recently executed transactions provided by the National Association of Securities Dealers Trade Reporting and Compliance Engine and the Securities Rulemaking Board, bid/ask markets reported by industry participants, bids from market participants, levels at which market participants would offer the security, comparable trades, dealer quotes, and news media.

Short-term investment funds:

Short-term investment funds are stated at cost which approximates fair value.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

Common/collective trusts:

The common/collective trusts are valued at the net asset value ("NAV") of the units of the common/collective trusts. The NAV, as provided by the common/collective trusts, is used as a practical expedient to estimating fair value. The NAV is based on the fair value of the underlying investments held by the trusts less its liabilities. This practical expedient is not used when it is determined to be probable that the trusts will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the common/collective trusts, the investment adviser reserves the right to temporarily delay withdrawal from the common/collective trusts in order to ensure that securities liquidations will be carried out in an orderly business manner.

Hedge funds:

The hedge funds are valued at the net asset value ("NAV") of the units of the hedge funds. The NAV, as provided by the hedge fund, is used as a practical expedient to estimating fair value. The NAV is based on the fair value of the underlying investments held by the funds less its liabilities. This practical expedient is not used when it is determined to be probable that the funds will sell the investment for an amount different than the reported NAV. Were the Plan to initiate a full redemption of the hedge funds, the investment adviser reserves the right to temporarily delay withdrawal from the hedge funds in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

The following table sets forth, by level, the Plan's assets that were accounted for at fair value on a recurring basis as of December 31, 2021:

Investments in securities:

	<u>Total Fair Value</u>	<u>Quoted Prices (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Other Unobservable Inputs (Level 3)</u>
Investments at fair value:				
Common stocks	\$ 35,238,155	\$ 35,238,155	\$ -	\$ -
Corporate and other bonds and notes	13,518,059	-	13,518,059	-
Short-term investment funds	1,540,530	-	1,540,530	-
Investments measured at net asset value (NAV):				
Common/collective trusts*	77,510,943	-	-	-
Hedge funds*	<u>17,431,713</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total investments	<u>\$ 145,239,400</u>	<u>\$ 35,238,155</u>	<u>\$ 15,058,589</u>	<u>\$ -</u>

* Certain investments that are measured at fair value using the net assets value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

The following table sets forth, by level, the Plan's assets that were accounted for at fair value on a recurring basis as of December 31, 2020:

Investments in securities:

	<u>Total Fair Value</u>	<u>Quoted Prices (Level 1)</u>	<u>Significant Other Observable Inputs (Level 2)</u>	<u>Significant Other Unobservable Inputs (Level 3)</u>
Investments at fair value:				
Common stocks	\$ 32,102,995	\$ 32,102,995	\$ -	\$ -
Corporate and other bonds and notes	11,249,681	-	11,249,681	-
Short-term investment funds	1,716,717	-	1,716,717	-
Investments measured at net asset value (NAV):				
Common/collective trusts*	79,041,400	-	-	-
Hedge fund*	<u>9,263,051</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total investments	<u>\$ 133,373,844</u>	<u>\$ 32,102,995</u>	<u>\$ 12,966,398</u>	<u>\$ -</u>

* Certain investments that are measured at fair value using the net assets value per share (or its equivalent) practical expedient have not been categorized in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

The following table summarizes investments measured at fair value based on net asset value (NAV) per share as of December 31, 2021 and 2020:

<u>December 31, 2021</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trusts:				
Chevy Chase Trust Company ASB Allegiance Real Estate Fund	\$ 20,522,973 ^(a)	\$ -	(a)	(a)
LSV International Equity Trust	8,629,068 ^(b)	-	(b)	(b)
NewTower Trust Company Multi-employer Property Trust	3,836,098 ^(c)	-	(c)	(c)
National Investment Services Intermediate Fixed Income Fund	11,159,963 ^(e)	-	(e)	(e)
Hardman Johnston International Equity Group Trust	10,406,660 ^(f)	-	(f)	(f)
Wellington Multiple Collective Investment Funds Trust	1,932,300 ^(d)	-	(d)	(d)
Boyd Watterson State Government Fund, LP	6,950,396 ^(g)	-	(g)	(g)
Intercontinental U.S. Real Estate Investment Fund, LLC	7,449,631 ^(h)	-	(h)	(h)
Victory Trivalent International Small Cap Collective Fund	6,623,854 ⁽ⁱ⁾	-	(i)	(i)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

<u>December 31, 2021</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Hedge funds:				
GCM Grosvenor Opportunistic Credit Fund V	\$ 3,580,001 ⁽ⁱ⁾	\$ -	(i)	(i)
GCM Grosvenor Secondary Opportunities Feeder Fund II	5,188,599 ^(k)	-	(k)	(k)
Corbin ERISA Opportunity Fund	3,909,269 ^(l)	-	(l)	(l)
Hamilton Lane Secondary Feeder Fund	2,286,693 ^(m)	-	(m)	(m)
Glouston Private Equity Opportunities Fund VI	2,467,151 ⁽ⁿ⁾	-	(n)	(n)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

<u>December 31, 2020</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Common/collective trusts:				
Chevy Chase Trust Company ASB Allegiance Real Estate Fund	\$ 18,401,971 ^(a)	\$ -	(a)	(a)
LSV International Equity Trust	16,829,639 ^(b)	-	(b)	(b)
NewTower Trust Company Multi-employer Property Trust	3,281,553 ^(c)	-	(c)	(c)
National Investment Services Intermediate Fixed Income Fund	24,471,762 ^(e)	-	(e)	(e)
Wellington Multiple Collective Investment Funds Trust	3,020,770 ^(d)	-	(d)	(d)
Boyd Watterson State Government Fund, LP	6,670,958 ^(g)	-	(g)	(g)
Intercontinental U.S. Real Estate Investment Fund, LLC	6,364,747 ^(h)	-	(h)	(h)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

<u>December 31, 2020</u>	<u>Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency (if currently eligible)</u>	<u>Redemption Notice Period</u>
Hedge funds:				
GCM Grosvenor Opportunistic Credit Fund V	\$ 1,444,097 ⁽ⁱ⁾	\$ -	(i)	(i)
GCM Grosvenor Secondary Opportunities Feeder Fund II	2,864,028 ^(k)	-	(k)	(k)
Corbin ERISA Opportunity Fund	3,478,283 ^(l)	-	(l)	(l)
Hamilton Lane Secondary Feeder Fund	741,241 ^(m)	-	(m)	(m)
Glouston Private Equity Opportunities Fund VI	735,402 ⁽ⁿ⁾	-	(n)	(n)

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

-
- (a) A commingled equity real estate fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the NCREIF NFI-ODCE Index. Liquidity from this fund is subject to a withdrawal queue, whereas the fund can hold the Plan's investment for a period of up to one year from the date of the withdrawal request. The Plan has no unfunded commitments to invest additional capital in this fund.
- (b) A commingled international large cap value fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the MSCI EAFE Index without the assumption of excessive risk as measured by the volatility of quarterly returns. The fund is liquid on a monthly basis with 7 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (c) A commingled equity real estate fund with the objective of producing a target rate of return greater than the NCREIF NFI-ODCE Index. Liquidity from this fund is subject to a withdrawal queue, whereas the fund can hold the Plan's investment for a period of up to one year from the date of the withdrawal request. The Plan has no unfunded commitments to invest additional capital in this fund.
- (d) A global tactical asset allocation fund with the objective of producing, over a 3 to 5-year period, a target rate of return greater than the sum of 65% of the MSCI All Country World Index and 35% of the Barclays Aggregate Index, without the assumption of excessive risk as measured by the volatility of quarterly returns. The fund is liquid on a monthly basis with 30 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (e) A comingled fixed income security consisting primarily of U.S. government, corporate and mortgage-backed securities. The long-term objective is to outperform the Bloomberg Barclays Intermediate Government Credit Index over a full market cycle. Investments in the fund may also include domestic preferred stocks, asset-backed securities and short-term investment funds. The fund is liquid on a monthly basis with 3 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (f) The Fund is an investment adviser registered with the Securities and Exchange Commission under the Investment Advisers Act of 1940. The Trustee of the Fund is the Bank of New York Mellon. The Fund invests primarily in publicly traded foreign securities. The fund is liquid on a monthly basis with 10 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (g) The Fund is an open-end, commingled real estate investment fund and is intended to have an indefinite term. The objective is to target 8%-10% net total returns annualized over one year. The Fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (h) A private equity fund of funds with an objective to target 10% gross returns. The Fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has no unfunded commitments to invest additional capital in this fund.
- (i) The Fund seeks to provide long-term growth of capital in the Fund by investing primarily in equity securities of small-capitalization companies in countries represented in the S&P® Developed ex-U.S. SmallCap Index. The fund is liquid on a daily basis. The Plan has no unfunded commitments to invest additional capital in this fund.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 5 - Fair Value Measurements (Continued)

- (j) A multi-strategy hedge fund-of-funds. Substantially all of the assets of the Fund that are available for investment have been and shall be invested in GCM Grosvenor Opportunistic Credit Master Fund V, L.P. (the "Master Fund"), a Cayman Islands exempted limited partnership that has the same investment objective as the Fund. The Fund has an objective of LIBOR + 750 basis points. The Master Fund does not permit voluntary redemptions. However, a shareholder may cause part or all of such shareholder's participating shares to cease participating in new investments made by the Master Fund by converting some or all of its participating shares into liquidating shares as of December 31, of any fiscal year, upon not less than 90 days' prior written notice to the Fund. The Plan has \$4,860,723 of unfunded commitments to invest additional capital in this fund.
- (k) A private equity fund-of-funds with an absolute objective to seek substantial outperformance over public equity. The Fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$3,146,881 of unfunded commitments to invest additional capital in this fund.
- (l) Corbin ERISA Opportunity Fund, L.P. seeks to achieve a substantial return on capital through opportunistic investments primarily in a broad range of public and private credit instruments, with an expected emphasis on corporate bonds and loans, asset-backed securities, mortgage-backed securities, commercial real estate, structured credit and collateralized loan obligations, though at times the fund may have exposure to other assets, instruments and markets. The fund is managed in accordance with ERISA standards. The net asset value per unit is determined as of each quarterly valuation date. The investment is redeemable quarterly upon 65 days' written notice and there are no unfunded commitments. Liquidity is subject to a withdrawal queue, whereas the partnership can hold the Plan's investment for a period of up to two years from the date of the withdrawal request. There are no unfunded commitments.
- (m) The Fund invest substantially all its assets in Hamilton Lane Secondary Fund V LP, which in turn invests solely in HLSF V Holdings LP. The strategy is focused on identifying secondary opportunities where they have a distinct competitive advantage and purchasing high quality assets managed by leading general partners at attractive prices. The Fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$1,744,447 of unfunded commitments to invest additional capital in this fund.
- (n) A private equity fund-of-funds with the objective to make secondary investments. The Fund is liquid on a quarterly basis with 90 days' advance notice. The Plan has \$1,424,000 of unfunded commitments to invest additional capital in this fund.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 6 - Actuarial Present Value of Accumulated Plan Benefits

Accumulated plan benefits are those future periodic payments that are attributable under the Plan's provisions to the service that eligible employees have rendered. Accumulated plan benefits include benefits expected to be paid to:

- (a) retired or terminated vested employees or their spouses,
- (b) spouses of employees who have died, and
- (c) present employees or their spouses.

The accumulated plan benefits for active eligible employees are based on their years of service, times the weekly contribution on the date as of which the benefit information is presented. Benefits payable under all circumstances, i.e., retirement, death, disability, and termination of employment are included, to the extent they are deemed attributable to eligible employee service rendered to the valuation date.

The actuarial present value of accumulated plan benefits is determined by the Plan's consulting actuary and is that 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.

The significant actuarial assumptions used in the valuation as of January 1, 2021 are as follows:

Mortality: Healthy Participant

RP-2014 Blue Collar Mortality Tables adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year and projected forward using MP-2015 on a generational basis, with employee rates before commencement and healthy annuitant rates after benefit commencement.

Investment return:
Ongoing valuation 7.5% for 2021.

Expenses: Average of actual expenses paid in the prior two years, increased by 2% and assumed to be payable in the middle of the year.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 6 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

Withdrawal rates
at termination:

Rates at termination vary with age.
Sample rates are as follows:

Termination	
Age	Rate
20	30.0%
25	30.0
30	20.0
35	20.0
40 plus	10.0

Retirement rates:

Retirement rates vary by age as follows:

Retirement	
Age	Rate
55-59	1.0%
60-64	5.0
65-69	20.0
70 plus	100.0

Percent married:

80% (female spouse assumed to be three years younger, male spouse assumed to be three years older).

Actuarial cost method:

Unit credit actuarial cost method.

Valuation of assets:

The market value of assets, less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected market return, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 6 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

The actuarial present value of accumulated plan benefits as of January 1, 2021 is as follows:

	<u>January 1, 2021</u>
Vested benefits:	
Participants currently receiving payments	\$ 75,681,749
Other participants	<u>57,998,214</u>
	133,679,963
Nonvested benefits	<u>957,521</u>
Total actuarial present value of accumulated plan benefits	<u><u>\$ 134,637,484</u></u>

An analysis of changes in accumulated plan benefits for the year ended January 1, 2021 is as follows:

	<u>January 1, 2021</u>
Actuarial present value of accumulated plan benefits at beginning of year	<u>\$ 134,148,752</u>
Increase (decrease) during the year attributed to:	
Change in average discount period	9,770,192
Benefits paid	(7,901,894)
Benefits accumulated, net experience gain or loss, changes in data	(1,379,566)
Plan amendments	-
Change in assumptions	<u>-</u>
Net increase	<u>488,732</u>
Actuarial present value of accumulated plan benefits at end of year	<u><u>\$ 134,637,484</u></u>

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 6 - Actuarial Present Value of Accumulated Plan Benefits (Continued)

The following changes in assumptions and methods were made for the January 1, 2021 valuation:

- For current liability purposes, the interest rate was changed from 2.95% to 2.08% in accordance with IRS guidance. (The statutory mortality tables have also been updated as required by law).
- For withdrawal liability purposes, the interest rates were changed from 2.53% for all years to 1.62% for the first 20 years and 1.40% thereafter.

The Plan's actuary has advised that the Plan is being funded at a level sufficient to meet the minimum funding standard requirements of ERISA and that there was no accumulated funding deficiency as of January 1, 2021.

The Plan is not considered endangered, seriously endangered, or critical as those terms are defined in the Pension Protection Act of 2006 for the Plan year beginning January 1, 2021.

Note 7 - Pension Plan for Employees

The Plan's employees participate in the Central States Joint Board and Allied Organizations Staff Pension Plan, a multiple employer defined benefit plan, and the Plan. Pension expense for the years ended December 31, 2021 and 2020 amounted to \$70,707 and \$71,194, respectively.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 8 - Party-in-interest Transactions

For the purpose of ERISA, the Central States Joint Board, AFL-CIO (the "Joint Board") is a party-in-interest to the Midwest Pension Plan. Since the Plan and Joint Board exist in the same premises, utilizing each other's resources and personnel to effectuate cost-savings and to minimize duplication of efforts, interfund relationships have been established on a continuing basis. The expenses allocated by the Joint Board to the Plan for the years ended December 31, 2021 and 2020 amounted to \$80,400 and \$80,646, respectively. The Plan had amounts due to the Joint Board of \$(29,712) and \$(34,228) as of December 31, 2021 and 2020, respectively. The Plan also owed the Central States Joint Board Health and Welfare Fund \$2,742 and \$2,742 as of December 31, 2021 and 2020, respectively.

The Plan leases its premises from a related party, the Joint Board. (See Note 13.)

Note 9 - Plan Termination

Upon Plan termination, the accrued benefit of each participant and beneficiary shall be fully vested and shall be payable to the extent that Plan assets, after the expenses of liquidation, are sufficient to meet the benefit liabilities. The assets will be allocated according to the following order of priority:

First, to provide pensions that became payable (or would have become payable had an employee retired and been eligible for pension) three or more years before the Plan termination date;

Second, to provide pensions that became payable (or would have become payable had an employee retired and been eligible for pension) within the three-year period preceding the Plan termination date; and

Finally, to provide pensions to all other participants in covered employment when the Plan terminates.

If Plan assets are insufficient to meet all benefit liabilities at the Plan termination date, pensions will be reduced to the extent necessary, but not below the guaranteed amounts as specified by the Pension Benefit Guaranty Corp.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 10 - Tax Status

The Internal Revenue Service (the "IRS") has determined, and informed the Plan by a letter dated September 17, 2015, that the Plan is qualified under Section 401(a) of the Internal Revenue Code (the "IRC"), and the Trust established under the Plan is exempt from federal income taxes under Section 501(a) of the IRC. The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. Employee benefit plans are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress for the Plan. The plan administrator believes it is no longer subject to income tax examinations for years prior to 2018.

Note 11 - Risks and Uncertainties

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

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
December 31, 2021 and 2020

Note 12 - Employers' Contributions - Withdrawal Liability

The Plan is subject to the provisions of the Multi-employer Pension Plan Amendments Act of 1980 ("MPPAA"), as such, the Plan is required to determine if a withdrawing employer has a withdrawal liability under the computation method defined in the Plan. If it is determined that a withdrawing employer has a withdrawal liability, the Plan is required to issue a demand letter to such employer assessing it for the amount due. Such assessments may be made against employers who withdraw either partially or completely.

During the year December 31, 2020, the Plan assessed two withdrawing employers \$1,300,880, which represented the employers' shares of the Plan's unfunded liabilities as determined by the Plan's consulting actuary. One employer paid a lump sum of \$250,000 during 2020 in full settlement. The other employer filed bankruptcy. The Plan received approximately \$305,000 during January 2021 in full settlement, and an allowance of approximately \$735,000 was recognized as of December 31, 2020. In 2021, the allowance was written off against the remaining receivable.

As of December 31, 2021, one employer had agreed to pay withdrawal liability payments totaling \$270,016. These payments are due on a quarterly or annual basis through 2040. One employer paid a lump sum of \$175,000 during 2021 in full settlement.

Note 13 - Commitments

Effective December 1, 2013, the Midwest Pension Plan, the Central States Joint Board Health and Welfare Fund, and the Joint Board moved to 245 Fencel Lane, Hillside, Illinois. The lease commenced on December 1, 2018 and continued through November 30, 2021. During 2021, the lease was renewed through November 30, 2024.

MIDWEST PENSION PLAN
Notes to Financial Statements (Continued)
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Note 13 - Commitments (Continued)

The minimum rentals to be collected under the lease are as follows:

<u>Years Ending December 31,</u>	<u>Amount</u>
2022	\$ 36,295
2023	36,295
2024	<u>33,270</u>
Total	<u>\$ 105,860</u>

Rent expense was \$40,980 and \$39,143 for the years ended December 31, 2021 and 2020, respectively. The 2021 and 2020 expense includes \$6,789 and \$6,060, respectively, billed for the Plan's share of real estate taxes.

**Note 14 - Reconciliation of Financial Statements to Form 5500
Annual Return/Report of Employee Benefits Plan**

Investment expenses amounting to \$1,289,226 are shown as a reduction of investment income for financial statement purposes and are classified as investment advisory and management fees on Form 5500, Schedule H, Part II.

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Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks:</u>			
ADOBE INC	1,368	\$ 272,193	\$ 775,738
AECOM TECHNOLOGY	3,462	143,846	267,786
AGREE REALTY CORP	1,659	112,351	118,386
ALCON INC	3,000	165,064	261,360
ALIGHT INC.	14,963	154,505	161,750
ALLEGION PLC	911	76,489	120,653
ALLSCRIPTS HEALTHCARE SOLUTIONS	5,462	86,001	100,774
ALPHABET INC CL C	189	336,637	546,889
ALTRA INDUSTRIAL MOTION	2,894	161,781	149,244
AMAZON COM INC	108	274,792	360,109
AMERICAN WATER WORKS CO INC	645	19,854	121,815
AMERIPRISE FINL INC	1,030	99,866	310,710
AMGEN INC	1,140	177,572	256,466
AMN HEALTHCARE SVCS INC	699	38,414	85,509
ANSYS INC	1,000	94,330	401,120
API GROUP	5,588	120,077	144,003
ARCOSA INC	2,171	62,031	114,412
ASHLAND GLOBAL HOLDINGS INC	1,021	78,348	109,921
AUTODESK INC	1,320	336,513	371,171
AVANTOR INC	4,770	82,987	201,008
BATH & BODY WORKS	1,959	119,684	136,719
BROWN FORMAN CORP CLASS B	2,739	177,753	199,564
CABOT OIL GAS CORP CL A	10,540	187,519	200,260
CAPITAL ONE FINANCIAL CORP	2,480	212,278	359,823
CATALENT INC	1,568	38,007	200,751
CDK GLOBAL INC	1,950	98,923	81,393
CHAMPIONX CORP	5,870	126,998	118,633
CHANNELADVISOR CORP	2,964	65,257	73,152
CHART INDUSTRIES INC.	917	58,324	146,252
CHEWY INC.	3,698	297,666	218,071
CHUBB LTD	1,100	128,221	212,641
CHURCHILL DOWNS INC	900	96,769	216,810
CINCINNATI FINL CORP	2,234	174,195	254,520
CINTAS CORP	867	272,229	384,228
COCA COLA COMPANY	4,310	182,597	255,195

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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
COLFAX CORP	1,982	55,461	91,113
COMMERCE BANCSHARES INC	2,394	121,550	164,564
CONCENTRIX CORP	1,703	119,918	304,190
CONSTELLATION BRANDS INC.	908	204,326	227,881
CORTEVA INC	7,000	196,543	330,960
COSTCO WHSL CORP	574	173,596	325,860
COUPA SOFTWARE INC.	1,027	232,382	162,317
CROWN CASTLE INTL CORP	1,530	242,410	319,372
CULLEN FROST BANKERS INC	1,541	106,457	194,274
DANAHER CORP	1,620	130,726	532,996
DEXCOM INC	702	207,437	376,939
EAGLE MATERIALS INC	1,174	114,713	195,424
EAST WEST BANCORP INC	295	17,697	23,211
ECOLAB INC.	1,260	273,548	295,583
EDWARDS LIFESCIENCES CORP	3,191	236,286	413,394
ELANCO ANIMAL HEALTH	6,660	150,261	189,011
ENCOMPASS HEALTH CORP	1,302	83,359	84,969
EQUITY LIFESTYLE PPTYS INC	1,630	73,058	142,886
ESTEE LAUDER COMPANIES INC. CL A	1,084	262,327	401,297
EURONET WORLDWIDE INC	1,187	108,138	141,455
EXPEDIA INC.	992	147,198	179,274
FERGUSON NEWCO PLC A D R	884	51,208	158,581
FIRST AMERICAN FINANCIAL	2,939	162,239	229,918
FRONTIER COMMUNICATIONS PARE	5,240	156,128	154,528
GENERAL DYNAMICS CORP	1,050	61,957	218,894
GENPACT LIMITED	2,733	103,697	145,068
HERC HOLDINGS INC.	1,669	134,907	261,282
HOLOGIC INC	1,931	80,046	147,837
HOME BANCSHARES INC	7,732	166,597	188,274
HONEYWELL INTL INC.	1,330	299,577	277,318
JB HUNT TRANSPORT SVCS INC.	647	43,493	132,247
IAA SPINCO INC	1,845	59,297	93,394
ICON PLC	872	73,315	270,058
IDEX CORP.	1,136	245,371	268,460
INGERSOLL RAND INC	4,006	117,772	247,851

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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
INTERNATIONAL SEAWAYS INC.	4,909	81,278	72,064
INTUIT INC	801	265,813	515,219
INTUITIVE SURGICAL INC	1,427	299,200	512,721
JAZZ PHARMACEUTICALS PLC	1,496	197,857	190,590
JOHNSON CTLS INTL PLC	4,440	166,873	361,016
KADANT INC	1,071	50,122	246,844
KORN/FERRY INTERNATIONAL	2,403	106,757	181,979
L3 HARRIS TECHNOLOGIES INC	1,209	241,600	257,807
LCI INDUSTRIES	1,234	138,681	192,344
LENNAR CORP	3,180	55,011	369,389
LENNAR CORP CL B	107	1,532	10,231
LIBERTY BROADBAND C	964	79,265	155,300
LIBERTY MEDIA CORP DELAWARE	4,946	161,072	251,504
LITTELFUSE INC	453	88,743	142,550
LULULEMON ATHLETICA INC	606	170,204	237,219
LUMENTUM HOLDINGS INC.	1,479	122,297	156,434
MARTIN MARIETTA MATLS INC	770	96,282	339,200
MASTERCARD INC	1,066	371,623	383,035
MATCH GROUP INC	2,279	311,635	301,398
MEDTRONIC PLC	2,200	169,290	227,590
MICHELIN CGDE UNSPON A D R	8,470	226,284	277,697
MICROCHIP TECHNOLOGY INC	3,930	95,206	342,146
MICROSOFT CORP	3,360	422,744	1,130,036
MITSUBISHI UFJ FINL GRP A D R	23,250	112,979	126,945
NATIONAL INSTRUMENTS CORP	1,933	82,403	84,414
NEXSTAR BROADCASTING GROUP A	623	67,558	94,061
NOMAD FOODS LTD	5,199	102,709	132,003
NXP SEMICONDUCTORS NV	2,002	375,637	456,016
ON SEMICONDUCTOR CORPORATION	4,144	124,415	281,460
OSHKOSH CORPORATION	1,393	155,581	157,005
P N C FINANCIAL SERVICES GROUP INC	1,545	189,908	309,803
PACKAGING CORP AMERICA	672	79,571	91,493
PARKER HANNIFIN CORP	1,010	171,910	321,301
PAYPAL HOLDINGS INC	2,823	379,645	532,361
PHILLIPS 66	2,090	78,218	151,441

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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
PINTEREST INC. - CL A	4,861	312,235	176,697
POPULAR INC	2,387	97,010	195,829
POST HOLDINGS INC	553	40,604	62,340
PRINCE GEORGE	1,731	95,315	159,269
PROCTOR AND GAMBLE	1,770	240,443	289,537
PROSPERITY BANCSHARES INC	1,626	105,151	117,560
PULTEGROUP INC.	2,964	132,284	169,422
QUALCOMM INC	2,000	148,783	365,740
RAYMOND JAMES FINL INC	2,014	27,817	202,206
REINSURANCE GROUP AMERICA	841	71,525	92,081
RELIANCE STEEL ALUMINUM	728	52,142	118,096
RENT-A-CENTER INC.	2,810	152,098	134,992
ROPER TECHNOLOGIES INC	590	216,739	290,197
RPM INTERNATIONAL INC	2,460	155,408	248,460
SBA COMMUNICATIONS CORP	1,047	250,720	407,304
SCIENCE APPLICATIONS INTL	957	87,371	79,996
SCOTTS MIRACLE-GRO CL A	758	114,121	122,038
SERVICENOW INC	843	454,612	547,200
SHERWIN WILLIAMS CO	1,104	246,388	388,785
SHOPIFY INC A	271	294,900	373,273
SIGNATURE BANK	659	63,982	213,167
SKECHERS U S A INC	3,339	113,992	144,913
SKYLINE CORP	2,312	72,252	182,602
SONY CORP A D R	3,050	149,115	385,520
SUN COMMUNITIES INC	1,691	160,836	355,059
SYNNEX CORP	1,681	113,712	192,239
TELEDYNE TECHNOLOGIES INC	395	58,977	172,572
TELEPHONE AND DATA SYSTEMS INC	6,718	140,098	135,368
TEMPUR SEALY INTERNATIONAL INC.	2,267	87,571	106,617
THERMO FISHER SCIENTIFIC INC	735	291,308	490,421
TRACTOR SUPPLY COMPANY	439	29,953	104,745
TRANSUNION	1,434	93,507	170,044
TRAVEL LEISURE CO	2,877	109,774	159,012
TWITTER INC	4,280	142,228	184,982

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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
TYSON FOODS INC CL A	2,230	157,488	194,367
UTAH MEDICAL PRODUCTS	720	64,881	72,000
VALVOLINE INC	4,188	88,880	156,171
VEEVA SYSTEMS, INC. CL A	1,243	338,510	317,562
VERTIV HOLDINGS LLC L P	7,757	123,905	193,692
VISTRA ENERGY CORP	3,302	63,628	75,187
VONTIER CORPORATION COM	6,669	205,850	204,938
WALGREENS BOOTS ALLIANCE INC	2,380	97,392	124,141
WEX INC	993	65,152	139,407
XYLEM INC	2,350	199,080	281,812
ZOETIS INC	1,723	<u>227,776</u>	<u>420,462</u>
Total common stocks		<u>\$ 22,538,482</u>	<u>\$ 35,238,155</u>

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	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes:</u>					
Aadvantage Loyalty IP Ltd	5.500%	4/20/28	\$ 80,000	\$ 80,479	\$ 82,140
Abercrombie & Fitch Management	8.750%	7/15/2025	130,000	144,300	139,978
ADT Security Corp	4.125%	6/15/2023	25,000	26,054	25,966
Advanced Micro Devices Inc	7.500%	8/15/2022	54,000	58,860	56,025
Air Canada 2015-2 Class B Pass	5.000%	12/15/2023	88,000	89,196	101,201
Allison Transmission Inc	5.875%	6/01/2029	139,000	142,873	151,163
AMC Networks Inc	5.000%	4/1/2024	22,000	22,040	22,165
AMC Networks Inc	4.750%	8/1/2025	75,000	77,014	76,594
AMC Networks Inc	4.250%	2/15/2029	80,000	79,950	79,500
American Airlines Inc/AAdvantage	5.750%	4/20/2029	65,000	66,799	69,393
AmeriGas Partners LP / AmeriGas	5.625%	5/20/2024	115,000	114,844	124,335
AMN Healthcare Inc	4.625%	10/1/2027	144,000	139,616	149,256
Antero Resources Corp	5.000%	3/1/2025	20,000	20,450	20,321
Asbury Automotive Group Inc	4.750%	3/1/2030	98,000	93,451	99,593
Avis Budget Car Rental LLC / Avis	5.375%	3/1/2029	135,000	140,996	142,401
Bank of America Corp	6.300%	3/10/2026	140,000	160,871	157,500
Beazer Homes USA Inc	5.875%	10/15/2027	135,000	141,413	141,244
Berry Global Inc	5.625%	7/15/2027	9,000	9,000	9,416
Bloomin' Brands Inc / OSI	5.125%	4/15/2029	73,000	75,943	74,136
Boise Cascade Co	4.875%	7/1/2030	10,000	10,000	10,550
Boyne USA Inc	4.750%	5/15/2029	70,000	71,312	72,100
Brinker International Inc	3.875%	5/15/2023	181,000	175,201	185,073
Buckeye Partners LP	4.150%	7/1/2023	90,000	88,650	92,250
Buckeye Partners LP	4.125%	12/1/2027	60,000	55,725	61,925
Caesars Resort Collection LLC / CRC	5.750%	7/1/2025	125,000	128,400	130,540
Carnival Corp	7.200%	10/1/2023	95,000	99,780	102,043
Carpenter Technology Corp	6.375%	7/15/2028	130,000	135,787	138,230
Catalent Pharma Solutions Inc	5.000%	7/15/2027	40,000	40,000	41,560
CCO Holdings LLC / CCO Holdings	4.750%	3/1/2030	30,000	30,188	31,200
Centurylink Inc.	7.650%	3/15/2042	230,000	249,397	247,503
Centurylink Inc.	5.125%	12/15/2026	80,000	82,300	83,250
Change Healthcare	3.500%	10/5/2285	140,899	140,899	140,899
Cheniere Energy Partners LP	4.500%	10/1/2029	100,000	105,125	106,000
Cinemark USA Inc	8.750%	5/1/2025	87,000	89,021	92,220
Citigroup Inc	5.900%	2/15/2023	203,000	213,430	209,090
Crestwood Midstream Partners LP /	5.750%	4/1/2025	105,000	107,814	107,362

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	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
CSC Holding LLC	2.627%	4/15/2027	67,915	67,915	67,096
DT Midstream Inc.	437.500%	6/15/2031	23,000	23,000	23,920
Dana Inc	5.625%	6/15/2028	134,000	138,465	142,375
DaVita Inc	4.625%	6/1/2030	139,000	141,972	142,301
Dell Inc	5.400%	9/10/2040	55,000	65,588	62,219
Dell International LLC / EMC Corp	8.100%	7/15/2036	90,000	107,168	137,124
Delta Air Lines Inc	3.625%	3/15/2022	115,000	108,575	115,001
DISH DBS Corp	5.875%	11/15/2024	145,000	154,522	148,819
Encompass Health Corp	4.500%	2/1/2028	92,000	96,035	94,645
Endeavor Energy Resources LP / EER	5.750%	1/30/2028	155,000	163,444	164,187
Fair Isaac Corp	5.250%	5/15/2026	55,000	54,725	60,431
Freeport-McMoRan Inc	4.625%	8/1/2030	85,000	92,194	91,163
Frontier Communications Holdings	5.000%	5/1/2028	135,000	137,101	139,050
G-III Apparel Group Ltd	7.875%	8/15/2025	133,000	145,402	141,512
Global Partners LP / GLP Finance	7.000%	8/1/2027	80,000	81,675	83,000
Global Partners LP / GLP Finance	6.875%	1/15/2029	19,000	19,000	19,896
Go Daddy Operating Co LLC / GD	5.250%	12/1/2027	8,000	8,000	8,270
Goodyear Tire & Rubber Co	7.000%	3/15/2028	80,000	92,038	91,400
Graham Holdings Co	5.750%	6/1/2026	83,000	83,750	86,216
Gray Television Inc	5.875%	7/15/2026	115,000	118,238	118,810
Gray Television	2.644%	1/2/2026	25,489	25,489	25,346
Great Lakes Dredge & Dock Corp	5.250%	6/1/2029	145,000	150,146	149,350
Griffon Corp	5.750%	3/1/2028	135,000	138,394	140,149
H&E Equipment Services Inc	3.875%	12/15/2028	135,000	133,777	133,988
Herc Holdings Inc	5.500%	7/15/2027	70,000	71,649	72,800
Hertz Corp	5.000%	12/1/2029	5,000	5,000	5,004
Hess Midstream Operations LP	5.125%	6/15/2028	135,000	139,895	140,569
Holly Energy Partners LP / Holly	5.000%	2/1/2028	120,000	123,575	119,550
Hospitality Properties Trust	4.500%	3/15/2025	175,000	175,992	170,625
Howard Hughes Corp	4.375%	2/1/2031	140,000	140,437	141,400
Hughes Satellite Systems Corp	6.625%	8/1/2026	132,000	145,295	147,741
Icahn Enterprises LP / Icahn	6.250%	5/15/2026	40,000	41,127	41,650
Icahn Enterprises LP / Icahn	4.750%	9/15/2024	115,000	118,112	119,313
Icahn Enterprises LP / Icahn	5.250%	5/15/2027	12,000	12,240	12,330
Ingevity Corp	4.500%	2/1/2026	74,000	69,888	74,185
JetBlue 2020-1 Class B Pass Through	7.750%	11/15/2028	170,176	197,610	197,786
L Branding Inc.	6.694%	1/15/2027	55,000	62,838	63,250

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	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
Lamar Media Corp	4.875%	1/15/2029	122,000	129,975	127,338
Lions Gate Capital Holdings LLC	5.500%	4/15/2029	90,000	90,000	91,575
Live Nation Entertainment Inc	4.750%	10/15/2027	135,000	140,231	138,713
Louisiana-Pacific Corp	3.625%	3/15/2029	86,000	86,000	87,714
LPL Holdings Inc	4.000%	3/15/2029	120,000	121,313	122,850
Macy's Retail Holdings LLC	3.625%	6/1/2024	87,000	89,693	88,958
Magellan Health Inc	4.400%	9/22/2024	25,000	26,375	27,063
Marriott Ownership Resorts Inc	4.750%	1/15/2028	115,000	117,546	116,725
Marriott Ownership Resorts Inc	4.500%	6/15/2029	25,000	25,000	25,163
MasTec Inc	4.500%	8/15/2028	20,000	20,000	20,775
Medline Borrower, LP	3.750%	10/23/2028	50,000	49,750	49,978
Mercer International Inc	5.500%	1/15/2026	60,000	61,237	60,750
Mercer International Inc	5.125%	2/1/2029	85,000	86,313	86,816
MetLife Inc	10.750%	8/1/2039	146,000	222,502	246,412
MGM Growth Properties Operating	4.500%	9/1/2026	135,000	134,976	145,125
MGM Growth Properties Operating	3.875%	2/15/2029	5,000	5,000	5,250
MGM Resorts International	4.750%	10/15/2028	140,000	144,507	144,200
Midwest Gaming Borrower LLC /	4.875%	5/1/2029	26,000	26,000	26,130
Morgan Stanley Variable Rate	3.819%	12/31/2099	182,000	179,906	182,093
Mozart Debt Merger Sub Inc	5.250%	10/1/2029	55,000	55,000	55,750
MPT Operating Partnership LP /	5.250%	8/1/2026	50,000	49,250	51,438
MPT Operating Partnership LP /	5.000%	10/15/2027	49,000	45,855	51,266
Murphy Oil Corp	6.875%	8/15/2024	14,000	14,428	14,288
Murphy Oil Corp	5.750%	8/15/2025	119,000	122,433	122,273
Murphy Oil USA Inc	4.750%	9/15/2029	55,000	58,713	57,888
Nationstar Mortgage Holdings Inc	6.000%	1/15/2027	95,000	98,793	98,962
Nationstar Mortgage Holdings Inc	5.500%	8/15/2028	10,000	10,000	10,200
Navient Corp	5.875%	10/25/2024	100,000	109,077	106,625
Open Text Holdings Inc	4.125%	2/15/2030	40,000	40,000	41,200
Outfront Media Capital LLC /	4.625%	3/15/2030	105,000	101,113	104,738
Outfront Media Capital LLC /	4.250%	1/15/2029	35,000	35,137	35,064
Oxford Finance LLC / Oxford Finance	6.375%	12/15/2022	9,000	9,203	9,011
Park Aerospace Holdings Ltd	5.250%	8/15/2022	2,000	2,028	2,044
Parkland Corp	4.500%	10/1/2029	140,000	140,878	140,111
Parkland Corp	4.625%	5/1/2030	14,000	14,000	13,913
Penn National Gaming Inc	5.625%	1/15/2027	158,000	157,268	161,160
Penn National	3.750%	10/19/2023	24,646	24,646	24,585

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Interest Rate</u>	<u>Maturity Date</u>	<u>Principal</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Corporate and other bonds and notes (Continued):</u>					
Precision Drilling Corp	6.875%	1/15/2029	140,000	144,580	142,691
Provident Funding Associates LP /	6.375%	6/15/2025	81,000	83,000	82,418
Quad/Graphics Inc	7.000%	5/1/2022	279,000	278,335	282,488
Rent-A-Center Inc/TX	6.375%	2/15/2029	142,000	150,462	148,035
Resolute Investment Managers	4.750%	4/29/2024	81,424	81,424	81,627
RLJ Lodging Trust LP	4.000%	9/15/2029	29,000	29,000	28,690
RR Donnelley & Sons Co	6.500%	11/15/2023	175,000	179,808	187,688
Sally Holdings LLC / Sally Capital Inc	5.625%	12/1/2025	50,000	51,463	51,125
Scientific Games International Inc	5.000%	10/15/2025	122,000	122,000	125,599
Scotts Miracle-Gro Co	4.500%	10/15/2029	53,000	55,035	55,253
Southwestern Energy Co	6.450%	1/23/2025	38,000	41,561	41,762
Speedway Motorsports LLC /	4.875%	11/1/2027	115,000	115,788	117,300
Springleaf Finance Corp	7.125%	3/15/2026	95,000	107,100	108,300
Spirit AeroSystems Inc	7.500%	4/15/2025	123,000	125,282	128,996
Spirit AeroSystems Inc	5.500%	1/15/2025	10,000	10,000	10,363
SS&C Technologies Inc	5.500%	9/30/2027	61,000	61,199	63,745
Starwood Property Trust Inc	4.750%	3/15/2025	80,000	84,439	83,200
Suburban Propane Partners	5.000%	6/1/2031	55,000	56,937	55,619
Sunoco LP / Sunoco Finance Corp	4.500%	5/15/2029	95,000	96,382	96,475
Sunoco LP / Sunoco Finance Corp	4.500%	4/30/2030	15,000	15,000	15,374
Taylor Morrison Communities Inc	5.125%	8/1/2030	10,000	10,000	11,000
Teine Energy Ltd	6.875%	4/15/2029	75,000	75,812	76,125
Telecom Italia Capital SA	6.375%	11/15/2033	120,000	141,737	129,216
Tenneco Inc	5.125%	4/15/2029	190,000	191,874	185,725
Teva Pharmaceutical Finance	2.800%	7/21/2023	110,000	108,900	110,382
Titan International Inc	7.000%	4/30/2028	125,000	131,956	133,125
Tri Pointe Homes Inc	5.250%	6/1/2027	80,000	87,707	85,900
TTM Technologies Inc	4.000%	3/1/2029	13,000	13,000	12,919
United Airlines 2019-2 Class B Pass	3.500%	5/1/2028	169,624	166,135	168,003
United Airlines Holdings Inc	4.875%	1/15/2025	205,000	209,935	210,894
United Rentals North America Inc	4.000%	7/15/2030	105,000	110,250	107,888
WW International Inc	4.500%	4/15/2029	110,000	109,958	105,298
Wyndham Worldwide corp	5.750%	4/1/2027	105,000	115,103	114,111
Total corporate and other bonds and notes				<u>\$ 13,362,744</u>	<u>\$ 13,518,059</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2021

Form 5500, Schedule H, Line 4(i)
E.I.N.: 36-6512748
Plan No.: 001

	<u>Principal or Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Short-term investment funds:</u>			
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 462	487,404	\$ 487,841	\$ 487,841
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 465	400,621	400,621	400,621
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 468	652,068	<u>652,068</u>	<u>652,068</u>
Total short-term investment funds		<u>\$ 1,540,530</u>	<u>\$ 1,540,530</u>
<u>Hedge funds:</u>			
GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V	-	\$ 3,200,000	\$ 3,580,001
GCM GROSVENOR SECONDARY OPP FEEDER FUND II	-	2,952,952	5,188,599
CORBIN ERISA OPPORTUNITY FUND	-	3,160,418	3,909,269
HAMILTON LANE SECONDARY FEEDER FUND	-	1,330,313	2,286,693
GLOUSTON PRIVATE EQUITY OPPORTUNITIES FUND VI	-	<u>1,207,325</u>	<u>2,467,151</u>
Total hedge funds		<u>\$ 11,851,008</u>	<u>\$ 17,431,713</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year) (Continued)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common/Collective Trusts:</u>			
CHEVY CHASE TRUST COMPANY ASB ALLEGIANCE REAL ESTATE FUND	10,781	\$ 4,823,808	\$ 20,522,973
LSV INTERNATIONAL EQUITY TRUST	29,490	3,567,329	8,629,068
NEWTOWER TRUST COMPANY MULTI-EMPLOYER PROPERTY TRUST	267	1,372,939	3,836,098
NATIONAL INVESTMENT SERVICES INTERMEDIATE FIXED INCOME FUND	514	10,407,068	11,159,963
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	230,624	9,944,123	10,406,660
INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND LLC	5,175	5,833,403	7,449,631
BOYD WATTERSON STATE GOVERNMENT FUND, LP	5,772	5,870,732	6,950,396
VICTORY TRIVALENT INTERNATIONAL SMALL CAP COLLECTIVE FUND	347,164	6,683,339	6,623,854
WELLINGTON MULTIPLE COLLECTIVE INVESTMENT FUNDS TRUST	101,463	<u>1,192,059</u>	<u>1,932,300</u>
Total common/collective trusts		<u>\$ 49,694,800</u>	<u>\$ 77,510,943</u>

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Reportable Transactions
For the year ended December 31, 2021

Form 5500, Schedule H, Line 4(j)
EIN: 36-6512748
Plan Number: 001

Description of Assets	Purchase Price	Selling Price	Cost	Current Value of Assets on Transaction Date	Net Gain or (Loss)
<u>Single Transaction</u> <u>Exceeding 5% of Plan Assets</u>					
HARDMAN JOHNSTON INTL EQUITY GROUP	\$ 9,000,000	\$ -	\$ 9,000,000	\$ 9,000,000	\$ -
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 468	-	9,000,000	9,000,000	9,000,000	-
LSV INTL VALUE EQUITY TRUST	-	9,158,000	3,241,427	9,158,000	5,916,573
<u>Series of Transactions</u> <u>Exceeding 5% of Plan Assets</u>					
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 465	16,452,193	-	16,452,193	16,452,193	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 465	-	15,610,497	15,610,497	15,610,497	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	8,623,994	-	8,623,994	8,623,994	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	-	8,136,089	8,136,089	8,136,089	-
HARDMAN JOHNSTON INTL EQUITY GROUP	10,000,000	-	10,000,000	10,000,000	-
LSV INTL VALUE EQUITY TRUST	-	10,738,000	8,874,840	10,738,000	1,863,160
LSV INTL VALUE EQUITY TRUST	1,000,000	-	1,000,000	1,000,000	-
NIS INTERMEDIATE FIXED INCOME FUND	-	12,594,079	12,601,162	12,594,079	(7,083)
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	21,479,313	-	21,479,313	21,479,313	-
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	-	20,827,246	20,827,246	20,827,246	-

See independent auditor's report.

Appendix C – Summary of Principal Plan Provisions

This summary of plan provisions is intended to only describe the essential features of the Plan. All eligibility requirements and benefit amounts shall be determined in strict accordance with the plan document itself.

Definitions

Accrued benefit: Sum of the accrued benefit earned prior to January 1, 2010 plus the accrued benefit earned after June 1, 2012. If a participant has more than 35 years of credited service, the 35 years resulting in the highest benefit shall be counted.

The accrued benefit earned after June 1, 2012 is determined for each period of credited service based on 0.05 times the first \$40 of the monthly employer contribution rate plus 0.20 times the amount of the monthly employer contribution rate in excess of \$40.

Effective January 1, 2010, the plan temporarily froze benefit accruals after December 31, 2009 through May 31, 2012.

The accrued benefit earned prior to January 1, 2010 is based on the applicable benefit formula rate multiplied by the applicable monthly employer contribution rate multiplied by years of credited service. Total years of credited service are limited to 35.

The applicable benefit formula rate and monthly employer contribution rate depend on the computation date in the following table:

Computation Date	Benefit Formula Rate	Monthly Employer Contribution Rate
1/1/1999 – 12/31/2009	0.2900	Monthly rate paid by the employer for at least six consecutive months immediately before the computation date
7/1/1985 – 12/31/1998	0.2772	
7/1/1983 – 6/30/1985	0.2772	Monthly rate paid by the employer immediately before the computation date
7/1/1967 – 6/30/1983	0.2310	

Credited service: Earned as shown in the following table.

Hours of service in plan year	Years of credited service
1,710 or more	1.0
1,530 – 1,709	0.9
1,350 – 1,529	0.8
1,170 – 1,349	0.7
1,000 – 1,169	0.6
Less than 1,000	0.0

No credited service can be earned after December 31, 2009 through May 31, 2012 due to the temporary benefit freeze.

Monthly contribution rate: Monthly contribution rate varies from \$30 to \$153 per month as of the valuation date, with a weighted average of \$58 per month.

Attachment to 2021 Form 5500
Schedule MB, line 6 – Summary of Plan Provisions
Midwest Pension Plan
EIN/PN: 36-6512748/001

Plan Effective Date: July 1, 1967. The plan document was amended and restated effective January 1, 2014. The first amendment was adopted in 2015. The second amendment was adopted in 2017.

Plan Year: The 12-month period beginning January 1 and ending December 31.

Vesting Service: Each plan year in which a participant completes 1,000 or more hours of service. A participant continues to receive vesting service during the temporary plan freeze effective January 1, 2010 through May 31, 2012.

Eligibility for Participation

Any employee becomes a participant when the first contribution to the plan is required to be made on the employee's behalf.

Normal Retirement

Normal Retirement Date: The first day of the month coincident with or next following the attainment of age 65 with 5 years of plan participation.

Normal Retirement Benefit: The accrued benefit as of normal retirement date.

Early Retirement

Early Retirement Date: The first day of the month coincident with or next following the attainment of age 55 and completion of 5 years of vesting service.

Early Retirement Benefit: The accrued benefit as of early retirement date reduced for each year of age less than 65 by either 4% a year for participants with 10 or more years of vesting service or 6% a year for participants with less than 10 years of vesting service.

Vested Retirement

Vested Retirement Date: The date of termination of service other than for reasons of retirement, disability, or death.

Vested Retirement Benefit: The accrued benefit, multiplied by the vested percentage in the following table, payable at the Normal Retirement Date, or payable as of the first day of any month coincident with or next following attainment of age 55 reduced in the same manner as an early retirement benefit.

Years of Vesting Service	Vested Percentage
Less than 5	0%
5 or more	100%

Preretirement Death

Preretirement Death Benefit Eligibility: Surviving spouses of participants with a vested accrued benefit who die before commencement of payments. In the absence of an eligible spouse, dependent children or dependent natural parents are eligible.

Preretirement Death Benefit: The benefit payable to the surviving spouses is 50% of the benefit which would have been payable had the deceased participant instead terminated service on the date of death, survived to his earliest possible benefit commencement date, elected a joint and 50% survivor annuity, and died on that same date. The benefit is payable immediately unless the participant died prior to the earliest retirement age. If so, the benefit payable to the eligible spouse is deferred until the participant would have reached the earliest retirement age.

Attachment to 2021 Form 5500 Schedule MB, line 6 – Summary of Plan Provisions Midwest Pension Plan EIN/PN: 36-6512748/001
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In the event participants die while vested and do not have an eligible spouse, their dependent children or dependent natural parents will receive 60 monthly payments. The monthly amount of the benefit is the amount the participant would have received as a single life pension had he or she retired on the day before death, or if later, his or her 55th birthday.

Disability Retirement

Disability Retirement Eligibility: Upon total and permanent disability preventing the participant from engaging in any gainful occupation or any related or similar occupation. To qualify, a participant must earn at least 15 years of vesting service.

Disability Retirement Benefit: The accrued benefit, determined as of the date the disability is determined to be total and permanent.

Forms of Payment

Normal Form: The accrued benefit defined above assumes payment in the form of a monthly life annuity with 5 years guaranteed.

Optional Forms: Actuarially adjusted 50% and 75% joint and survivor annuity for married participants

Changes in Principal Plan Provisions Since Prior Valuation

None.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks:</u>			
ADOBE INC	1,368	\$ 272,193	\$ 775,738
AECOM TECHNOLOGY	3,462	143,846	267,786
AGREE REALTY CORP	1,659	112,351	118,386
ALCON INC	3,000	165,064	261,360
ALIGHT INC.	14,963	154,505	161,750
ALLEGION PLC	911	76,489	120,653
ALLSCRIPTS HEALTHCARE SOLUTIONS	5,462	86,001	100,774
ALPHABET INC CL C	189	336,637	546,889
ALTRA INDUSTRIAL MOTION	2,894	161,781	149,244
AMAZON COM INC	108	274,792	360,109
AMERICAN WATER WORKS CO INC	645	19,854	121,815
AMERIPRISE FINL INC	1,030	99,866	310,710
AMGEN INC	1,140	177,572	256,466
AMN HEALTHCARE SVCS INC	699	38,414	85,509
ANSYS INC	1,000	94,330	401,120
API GROUP	5,588	120,077	144,003
ARCOSA INC	2,171	62,031	114,412
ASHLAND GLOBAL HOLDINGS INC	1,021	78,348	109,921
AUTODESK INC	1,320	336,513	371,171
AVANTOR INC	4,770	82,987	201,008
BATH & BODY WORKS	1,959	119,684	136,719
BROWN FORMAN CORP CLASS B	2,739	177,753	199,564
CABOT OIL GAS CORP CL A	10,540	187,519	200,260
CAPITAL ONE FINANCIAL CORP	2,480	212,278	359,823
CATALENT INC	1,568	38,007	200,751
CDK GLOBAL INC	1,950	98,923	81,393
CHAMPIONX CORP	5,870	126,998	118,633
CHANNELADVISOR CORP	2,964	65,257	73,152
CHART INDUSTRIES INC.	917	58,324	146,252
CHEWY INC.	3,698	297,666	218,071
CHUBB LTD	1,100	128,221	212,641
CHURCHILL DOWNS INC	900	96,769	216,810
CINCINNATI FINL CORP	2,234	174,195	254,520
CINTAS CORP	867	272,229	384,228
COCA COLA COMPANY	4,310	182,597	255,195

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
COLFAX CORP	1,982	55,461	91,113
COMMERCE BANCSHARES INC	2,394	121,550	164,564
CONCENTRIX CORP	1,703	119,918	304,190
CONSTELLATION BRANDS INC.	908	204,326	227,881
CORTEVA INC	7,000	196,543	330,960
COSTCO WHSL CORP	574	173,596	325,860
COUPA SOFTWARE INC.	1,027	232,382	162,317
CROWN CASTLE INTL CORP	1,530	242,410	319,372
CULLEN FROST BANKERS INC	1,541	106,457	194,274
DANAHER CORP	1,620	130,726	532,996
DEXCOM INC	702	207,437	376,939
EAGLE MATERIALS INC	1,174	114,713	195,424
EAST WEST BANCORP INC	295	17,697	23,211
ECOLAB INC.	1,260	273,548	295,583
EDWARDS LIFESCIENCES CORP	3,191	236,286	413,394
ELANCO ANIMAL HEALTH	6,660	150,261	189,011
ENCOMPASS HEALTH CORP	1,302	83,359	84,969
EQUITY LIFESTYLE PPTYS INC	1,630	73,058	142,886
ESTEE LAUDER COMPANIES INC. CL A	1,084	262,327	401,297
EURONET WORLDWIDE INC	1,187	108,138	141,455
EXPEDIA INC.	992	147,198	179,274
FERGUSON NEWCO PLC A D R	884	51,208	158,581
FIRST AMERICAN FINANCIAL	2,939	162,239	229,918
FRONTIER COMMUNICATIONS PARE	5,240	156,128	154,528
GENERAL DYNAMICS CORP	1,050	61,957	218,894
GENPACT LIMITED	2,733	103,697	145,068
HERC HOLDINGS INC.	1,669	134,907	261,282
HOLOGIC INC	1,931	80,046	147,837
HOME BANCSHARES INC	7,732	166,597	188,274
HONEYWELL INTL INC.	1,330	299,577	277,318
JB HUNT TRANSPORT SVCS INC.	647	43,493	132,247
IAA SPINCO INC	1,845	59,297	93,394
ICON PLC	872	73,315	270,058
IDEX CORP.	1,136	245,371	268,460
INGERSOLL RAND INC	4,006	117,772	247,851

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
INTERNATIONAL SEAWAYS INC.	4,909	81,278	72,064
INTUIT INC	801	265,813	515,219
INTUITIVE SURGICAL INC	1,427	299,200	512,721
JAZZ PHARMACEUTICALS PLC	1,496	197,857	190,590
JOHNSON CTLS INTL PLC	4,440	166,873	361,016
KADANT INC	1,071	50,122	246,844
KORN/FERRY INTERNATIONAL	2,403	106,757	181,979
L3 HARRIS TECHNOLOGIES INC	1,209	241,600	257,807
LCI INDUSTRIES	1,234	138,681	192,344
LENNAR CORP	3,180	55,011	369,389
LENNAR CORP CL B	107	1,532	10,231
LIBERTY BROADBAND C	964	79,265	155,300
LIBERTY MEDIA CORP DELAWARE	4,946	161,072	251,504
LITTELFUSE INC	453	88,743	142,550
LULULEMON ATHLETICA INC	606	170,204	237,219
LUMENTUM HOLDINGS INC.	1,479	122,297	156,434
MARTIN MARIETTA MATLS INC	770	96,282	339,200
MASTERCARD INC	1,066	371,623	383,035
MATCH GROUP INC	2,279	311,635	301,398
MEDTRONIC PLC	2,200	169,290	227,590
MICHELIN CGDE UNSPON A D R	8,470	226,284	277,697
MICROCHIP TECHNOLOGY INC	3,930	95,206	342,146
MICROSOFT CORP	3,360	422,744	1,130,036
MITSUBISHI UFJ FINL GRP A D R	23,250	112,979	126,945
NATIONAL INSTRUMENTS CORP	1,933	82,403	84,414
NEXSTAR BROADCASTING GROUP A	623	67,558	94,061
NOMAD FOODS LTD	5,199	102,709	132,003
NXP SEMICONDUCTORS NV	2,002	375,637	456,016
ON SEMICONDUCTOR CORPORATION	4,144	124,415	281,460
OSHKOSH CORPORATION	1,393	155,581	157,005
P N C FINANCIAL SERVICES GROUP INC	1,545	189,908	309,803
PACKAGING CORP AMERICA	672	79,571	91,493
PARKER HANNIFIN CORP	1,010	171,910	321,301
PAYPAL HOLDINGS INC	2,823	379,645	532,361
PHILLIPS 66	2,090	78,218	151,441

See independent auditor's report.

MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
PINTEREST INC. - CL A	4,861	312,235	176,697
POPULAR INC	2,387	97,010	195,829
POST HOLDINGS INC	553	40,604	62,340
PRINCE GEORGE	1,731	95,315	159,269
PROCTOR AND GAMBLE	1,770	240,443	289,537
PROSPERITY BANCSHARES INC	1,626	105,151	117,560
PULTEGROUP INC.	2,964	132,284	169,422
QUALCOMM INC	2,000	148,783	365,740
RAYMOND JAMES FINL INC	2,014	27,817	202,206
REINSURANCE GROUP AMERICA	841	71,525	92,081
RELIANCE STEEL ALUMINUM	728	52,142	118,096
RENT-A-CENTER INC.	2,810	152,098	134,992
ROPER TECHNOLOGIES INC	590	216,739	290,197
RPM INTERNATIONAL INC	2,460	155,408	248,460
SBA COMMUNICATIONS CORP	1,047	250,720	407,304
SCIENCE APPLICATIONS INTL	957	87,371	79,996
SCOTTS MIRACLE-GRO CL A	758	114,121	122,038
SERVICENOW INC	843	454,612	547,200
SHERWIN WILLIAMS CO	1,104	246,388	388,785
SHOPIFY INC A	271	294,900	373,273
SIGNATURE BANK	659	63,982	213,167
SKECHERS U S A INC	3,339	113,992	144,913
SKYLINE CORP	2,312	72,252	182,602
SONY CORP A D R	3,050	149,115	385,520
SUN COMMUNITIES INC	1,691	160,836	355,059
SYNNEX CORP	1,681	113,712	192,239
TELEDYNE TECHNOLOGIES INC	395	58,977	172,572
TELEPHONE AND DATA SYSTEMS INC	6,718	140,098	135,368
TEMPUR SEALY INTERNATIONAL INC.	2,267	87,571	106,617
THERMO FISHER SCIENTIFIC INC	735	291,308	490,421
TRACTOR SUPPLY COMPANY	439	29,953	104,745
TRANSUNION	1,434	93,507	170,044
TRAVEL LEISURE CO	2,877	109,774	159,012
TWITTER INC	4,280	142,228	184,982

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MIDWEST PENSION PLAN
(Supplemental Schedule)
Schedule of Assets (Held at End of Year)
December 31, 2021

Form 5500, Schedule H, Line 4(i)

E.I.N.: 36-6512748

Plan No.: 001

	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common stocks (Continued):</u>			
TYSON FOODS INC CL A	2,230	157,488	194,367
UTAH MEDICAL PRODUCTS	720	64,881	72,000
VALVOLINE INC	4,188	88,880	156,171
VEEVA SYSTEMS, INC. CL A	1,243	338,510	317,562
VERTIV HOLDINGS LLC L P	7,757	123,905	193,692
VISTRA ENERGY CORP	3,302	63,628	75,187
VONTIER CORPORATION COM	6,669	205,850	204,938
WALGREENS BOOTS ALLIANCE INC	2,380	97,392	124,141
WEX INC	993	65,152	139,407
XYLEM INC	2,350	199,080	281,812
ZOETIS INC	1,723	<u>227,776</u>	<u>420,462</u>
Total common stocks		<u>\$ 22,538,482</u>	<u>\$ 35,238,155</u>

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E.I.N.: 36-6512748

Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes:</u>					
Aadvantage Loyalty IP Ltd	5.500%	4/20/28	\$ 80,000	\$ 80,479	\$ 82,140
Abercrombie & Fitch Management	8.750%	7/15/2025	130,000	144,300	139,978
ADT Security Corp	4.125%	6/15/2023	25,000	26,054	25,966
Advanced Micro Devices Inc	7.500%	8/15/2022	54,000	58,860	56,025
Air Canada 2015-2 Class B Pass	5.000%	12/15/2023	88,000	89,196	101,201
Allison Transmission Inc	5.875%	6/01/2029	139,000	142,873	151,163
AMC Networks Inc	5.000%	4/1/2024	22,000	22,040	22,165
AMC Networks Inc	4.750%	8/1/2025	75,000	77,014	76,594
AMC Networks Inc	4.250%	2/15/2029	80,000	79,950	79,500
American Airlines Inc/AAdvantage	5.750%	4/20/2029	65,000	66,799	69,393
AmeriGas Partners LP / AmeriGas	5.625%	5/20/2024	115,000	114,844	124,335
AMN Healthcare Inc	4.625%	10/1/2027	144,000	139,616	149,256
Antero Resources Corp	5.000%	3/1/2025	20,000	20,450	20,321
Asbury Automotive Group Inc	4.750%	3/1/2030	98,000	93,451	99,593
Avis Budget Car Rental LLC / Avis	5.375%	3/1/2029	135,000	140,996	142,401
Bank of America Corp	6.300%	3/10/2026	140,000	160,871	157,500
Beazer Homes USA Inc	5.875%	10/15/2027	135,000	141,413	141,244
Berry Global Inc	5.625%	7/15/2027	9,000	9,000	9,416
Bloomin' Brands Inc / OSI	5.125%	4/15/2029	73,000	75,943	74,136
Boise Cascade Co	4.875%	7/1/2030	10,000	10,000	10,550
Boyne USA Inc	4.750%	5/15/2029	70,000	71,312	72,100
Brinker International Inc	3.875%	5/15/2023	181,000	175,201	185,073
Buckeye Partners LP	4.150%	7/1/2023	90,000	88,650	92,250
Buckeye Partners LP	4.125%	12/1/2027	60,000	55,725	61,925
Caesars Resort Collection LLC / CRC	5.750%	7/1/2025	125,000	128,400	130,540
Carnival Corp	7.200%	10/1/2023	95,000	99,780	102,043
Carpenter Technology Corp	6.375%	7/15/2028	130,000	135,787	138,230
Catalent Pharma Solutions Inc	5.000%	7/15/2027	40,000	40,000	41,560
CCO Holdings LLC / CCO Holdings	4.750%	3/1/2030	30,000	30,188	31,200
Centurylink Inc.	7.650%	3/15/2042	230,000	249,397	247,503
Centurylink Inc.	5.125%	12/15/2026	80,000	82,300	83,250
Change Healthcare	3.500%	10/5/2285	140,899	140,899	140,899
Cheniere Energy Partners LP	4.500%	10/1/2029	100,000	105,125	106,000
Cinemark USA Inc	8.750%	5/1/2025	87,000	89,021	92,220
Citigroup Inc	5.900%	2/15/2023	203,000	213,430	209,090
Crestwood Midstream Partners LP /	5.750%	4/1/2025	105,000	107,814	107,362

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Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
CSC Holding LLC	2.627%	4/15/2027	67,915	67,915	67,096
DT Midstream Inc.	437.500%	6/15/2031	23,000	23,000	23,920
Dana Inc	5.625%	6/15/2028	134,000	138,465	142,375
DaVita Inc	4.625%	6/1/2030	139,000	141,972	142,301
Dell Inc	5.400%	9/10/2040	55,000	65,588	62,219
Dell International LLC / EMC Corp	8.100%	7/15/2036	90,000	107,168	137,124
Delta Air Lines Inc	3.625%	3/15/2022	115,000	108,575	115,001
DISH DBS Corp	5.875%	11/15/2024	145,000	154,522	148,819
Encompass Health Corp	4.500%	2/1/2028	92,000	96,035	94,645
Endeavor Energy Resources LP / EER	5.750%	1/30/2028	155,000	163,444	164,187
Fair Isaac Corp	5.250%	5/15/2026	55,000	54,725	60,431
Freeport-McMoRan Inc	4.625%	8/1/2030	85,000	92,194	91,163
Frontier Communications Holdings	5.000%	5/1/2028	135,000	137,101	139,050
G-III Apparel Group Ltd	7.875%	8/15/2025	133,000	145,402	141,512
Global Partners LP / GLP Finance	7.000%	8/1/2027	80,000	81,675	83,000
Global Partners LP / GLP Finance	6.875%	1/15/2029	19,000	19,000	19,896
Go Daddy Operating Co LLC / GD	5.250%	12/1/2027	8,000	8,000	8,270
Goodyear Tire & Rubber Co	7.000%	3/15/2028	80,000	92,038	91,400
Graham Holdings Co	5.750%	6/1/2026	83,000	83,750	86,216
Gray Television Inc	5.875%	7/15/2026	115,000	118,238	118,810
Gray Television	2.644%	1/2/2026	25,489	25,489	25,346
Great Lakes Dredge & Dock Corp	5.250%	6/1/2029	145,000	150,146	149,350
Griffon Corp	5.750%	3/1/2028	135,000	138,394	140,149
H&E Equipment Services Inc	3.875%	12/15/2028	135,000	133,777	133,988
Herc Holdings Inc	5.500%	7/15/2027	70,000	71,649	72,800
Hertz Corp	5.000%	12/1/2029	5,000	5,000	5,004
Hess Midstream Operations LP	5.125%	6/15/2028	135,000	139,895	140,569
Holly Energy Partners LP / Holly	5.000%	2/1/2028	120,000	123,575	119,550
Hospitality Properties Trust	4.500%	3/15/2025	175,000	175,992	170,625
Howard Hughes Corp	4.375%	2/1/2031	140,000	140,437	141,400
Hughes Satellite Systems Corp	6.625%	8/1/2026	132,000	145,295	147,741
Icahn Enterprises LP / Icahn	6.250%	5/15/2026	40,000	41,127	41,650
Icahn Enterprises LP / Icahn	4.750%	9/15/2024	115,000	118,112	119,313
Icahn Enterprises LP / Icahn	5.250%	5/15/2027	12,000	12,240	12,330
Ingevity Corp	4.500%	2/1/2026	74,000	69,888	74,185
JetBlue 2020-1 Class B Pass Through	7.750%	11/15/2028	170,176	197,610	197,786
L Branding Inc.	6.694%	1/15/2027	55,000	62,838	63,250

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Plan No.: 001

	Interest Rate	Maturity Date	Principal	Cost	Fair Value
<u>Corporate and other bonds and notes (Continued):</u>					
Lamar Media Corp	4.875%	1/15/2029	122,000	129,975	127,338
Lions Gate Capital Holdings LLC	5.500%	4/15/2029	90,000	90,000	91,575
Live Nation Entertainment Inc	4.750%	10/15/2027	135,000	140,231	138,713
Louisiana-Pacific Corp	3.625%	3/15/2029	86,000	86,000	87,714
LPL Holdings Inc	4.000%	3/15/2029	120,000	121,313	122,850
Macy's Retail Holdings LLC	3.625%	6/1/2024	87,000	89,693	88,958
Magellan Health Inc	4.400%	9/22/2024	25,000	26,375	27,063
Marriott Ownership Resorts Inc	4.750%	1/15/2028	115,000	117,546	116,725
Marriott Ownership Resorts Inc	4.500%	6/15/2029	25,000	25,000	25,163
MasTec Inc	4.500%	8/15/2028	20,000	20,000	20,775
Medline Borrower, LP	3.750%	10/23/2028	50,000	49,750	49,978
Mercer International Inc	5.500%	1/15/2026	60,000	61,237	60,750
Mercer International Inc	5.125%	2/1/2029	85,000	86,313	86,816
MetLife Inc	10.750%	8/1/2039	146,000	222,502	246,412
MGM Growth Properties Operating	4.500%	9/1/2026	135,000	134,976	145,125
MGM Growth Properties Operating	3.875%	2/15/2029	5,000	5,000	5,250
MGM Resorts International	4.750%	10/15/2028	140,000	144,507	144,200
Midwest Gaming Borrower LLC /	4.875%	5/1/2029	26,000	26,000	26,130
Morgan Stanley Variable Rate	3.819%	12/31/2099	182,000	179,906	182,093
Mozart Debt Merger Sub Inc	5.250%	10/1/2029	55,000	55,000	55,750
MPT Operating Partnership LP /	5.250%	8/1/2026	50,000	49,250	51,438
MPT Operating Partnership LP /	5.000%	10/15/2027	49,000	45,855	51,266
Murphy Oil Corp	6.875%	8/15/2024	14,000	14,428	14,288
Murphy Oil Corp	5.750%	8/15/2025	119,000	122,433	122,273
Murphy Oil USA Inc	4.750%	9/15/2029	55,000	58,713	57,888
Nationstar Mortgage Holdings Inc	6.000%	1/15/2027	95,000	98,793	98,962
Nationstar Mortgage Holdings Inc	5.500%	8/15/2028	10,000	10,000	10,200
Navient Corp	5.875%	10/25/2024	100,000	109,077	106,625
Open Text Holdings Inc	4.125%	2/15/2030	40,000	40,000	41,200
Outfront Media Capital LLC /	4.625%	3/15/2030	105,000	101,113	104,738
Outfront Media Capital LLC /	4.250%	1/15/2029	35,000	35,137	35,064
Oxford Finance LLC / Oxford Finance	6.375%	12/15/2022	9,000	9,203	9,011
Park Aerospace Holdings Ltd	5.250%	8/15/2022	2,000	2,028	2,044
Parkland Corp	4.500%	10/1/2029	140,000	140,878	140,111
Parkland Corp	4.625%	5/1/2030	14,000	14,000	13,913
Penn National Gaming Inc	5.625%	1/15/2027	158,000	157,268	161,160
Penn National	3.750%	10/19/2023	24,646	24,646	24,585

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	<u>Interest Rate</u>	<u>Maturity Date</u>	<u>Principal</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Corporate and other bonds and notes (Continued):</u>					
Precision Drilling Corp	6.875%	1/15/2029	140,000	144,580	142,691
Provident Funding Associates LP /	6.375%	6/15/2025	81,000	83,000	82,418
Quad/Graphics Inc	7.000%	5/1/2022	279,000	278,335	282,488
Rent-A-Center Inc/TX	6.375%	2/15/2029	142,000	150,462	148,035
Resolute Investment Managers	4.750%	4/29/2024	81,424	81,424	81,627
RLJ Lodging Trust LP	4.000%	9/15/2029	29,000	29,000	28,690
RR Donnelley & Sons Co	6.500%	11/15/2023	175,000	179,808	187,688
Sally Holdings LLC / Sally Capital Inc	5.625%	12/1/2025	50,000	51,463	51,125
Scientific Games International Inc	5.000%	10/15/2025	122,000	122,000	125,599
Scotts Miracle-Gro Co	4.500%	10/15/2029	53,000	55,035	55,253
Southwestern Energy Co	6.450%	1/23/2025	38,000	41,561	41,762
Speedway Motorsports LLC /	4.875%	11/1/2027	115,000	115,788	117,300
Springleaf Finance Corp	7.125%	3/15/2026	95,000	107,100	108,300
Spirit AeroSystems Inc	7.500%	4/15/2025	123,000	125,282	128,996
Spirit AeroSystems Inc	5.500%	1/15/2025	10,000	10,000	10,363
SS&C Technologies Inc	5.500%	9/30/2027	61,000	61,199	63,745
Starwood Property Trust Inc	4.750%	3/15/2025	80,000	84,439	83,200
Suburban Propane Partners	5.000%	6/1/2031	55,000	56,937	55,619
Sunoco LP / Sunoco Finance Corp	4.500%	5/15/2029	95,000	96,382	96,475
Sunoco LP / Sunoco Finance Corp	4.500%	4/30/2030	15,000	15,000	15,374
Taylor Morrison Communities Inc	5.125%	8/1/2030	10,000	10,000	11,000
Teine Energy Ltd	6.875%	4/15/2029	75,000	75,812	76,125
Telecom Italia Capital SA	6.375%	11/15/2033	120,000	141,737	129,216
Tenneco Inc	5.125%	4/15/2029	190,000	191,874	185,725
Teva Pharmaceutical Finance	2.800%	7/21/2023	110,000	108,900	110,382
Titan International Inc	7.000%	4/30/2028	125,000	131,956	133,125
Tri Pointe Homes Inc	5.250%	6/1/2027	80,000	87,707	85,900
TTM Technologies Inc	4.000%	3/1/2029	13,000	13,000	12,919
United Airlines 2019-2 Class B Pass	3.500%	5/1/2028	169,624	166,135	168,003
United Airlines Holdings Inc	4.875%	1/15/2025	205,000	209,935	210,894
United Rentals North America Inc	4.000%	7/15/2030	105,000	110,250	107,888
WW International Inc	4.500%	4/15/2029	110,000	109,958	105,298
Wyndham Worldwide corp	5.750%	4/1/2027	105,000	115,103	114,111
Total corporate and other bonds and notes				<u>\$ 13,362,744</u>	<u>\$ 13,518,059</u>

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	<u>Principal or Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Short-term investment funds:</u>			
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 462	487,404	\$ 487,841	\$ 487,841
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 465	400,621	400,621	400,621
GOLDMAN FINANCIAL SQUARE PRIME OBLIGATIONS-A-FD# 468	652,068	<u>652,068</u>	<u>652,068</u>
Total short-term investment funds		<u>\$ 1,540,530</u>	<u>\$ 1,540,530</u>
<u>Hedge funds:</u>			
GCM GROSVENOR OPPORTUNISTIC CREDIT FUND V	-	\$ 3,200,000	\$ 3,580,001
GCM GROSVENOR SECONDARY OPP FEEDER FUND II	-	2,952,952	5,188,599
CORBIN ERISA OPPORTUNITY FUND	-	3,160,418	3,909,269
HAMILTON LANE SECONDARY FEEDER FUND	-	1,330,313	2,286,693
GLOUSTON PRIVATE EQUITY OPPORTUNITIES FUND VI	-	<u>1,207,325</u>	<u>2,467,151</u>
Total hedge funds		<u>\$ 11,851,008</u>	<u>\$ 17,431,713</u>

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	<u>Shares</u>	<u>Cost</u>	<u>Fair Value</u>
<u>Common/Collective Trusts:</u>			
CHEVY CHASE TRUST COMPANY ASB ALLEGIANCE REAL ESTATE FUND	10,781	\$ 4,823,808	\$ 20,522,973
LSV INTERNATIONAL EQUITY TRUST	29,490	3,567,329	8,629,068
NEWTOWER TRUST COMPANY MULTI-EMPLOYER PROPERTY TRUST	267	1,372,939	3,836,098
NATIONAL INVESTMENT SERVICES INTERMEDIATE FIXED INCOME FUND	514	10,407,068	11,159,963
HARDMAN JOHNSTON INTERNATIONAL EQUITY GROUP TRUST	230,624	9,944,123	10,406,660
INTERCONTINENTAL U.S. REAL ESTATE INVESTMENT FUND LLC	5,175	5,833,403	7,449,631
BOYD WATTERSON STATE GOVERNMENT FUND, LP	5,772	5,870,732	6,950,396
VICTORY TRIVALENT INTERNATIONAL SMALL CAP COLLECTIVE FUND	347,164	6,683,339	6,623,854
WELLINGTON MULTIPLE COLLECTIVE INVESTMENT FUNDS TRUST	101,463	<u>1,192,059</u>	<u>1,932,300</u>
Total common/collective trusts		<u>\$ 49,694,800</u>	<u>\$ 77,510,943</u>

See independent auditor's report.

Attachment to 2021 Form 5500
Schedule MB, line 8b(2) – Schedule of Active Participant Data
Midwest Pension Plan
EIN/PN: 36-6512748/001

Active Participants by Age and Service

The number of active participants summarized by attained age and years of credited service as of January 1, 2021 is shown below.

Age	Years of Credited Service										Total
	0	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40+	
0–24	11	34	1	-	-	-	-	-	-	-	46
25–29	13	58	25	-	-	-	-	-	-	-	96
30–34	10	44	34	3	-	-	-	-	-	-	91
35–39	5	38	52	26	8	-	-	-	-	-	129
40–44	10	49	62	40	35	7	-	-	-	-	203
45–49	5	66	64	57	42	24	9	1	-	-	268
50–54	10	60	61	90	45	31	10	5	-	-	312
55–59	10	53	64	60	40	28	20	9	5	-	289
60–64	6	41	52	54	32	23	18	9	14	-	249
65–69	4	14	24	32	15	9	12	3	13	-	126
70+	-	10	6	10	5	2	2	1	1	-	37
Total	84	467	445	372	222	124	71	28	33	-	1,846

Attachment to 2021 Form 5500
Schedule MB, Line 3d - Withdrawal Liability Amounts
Plan Name: Midwest Pension Plan
EIN/PN: 36-6512748/001

During 2021, there were 3 employers who made withdrawal liability payments totaling \$521,346.00. Below are the withdrawal liability payments received during each month of 2021.

Month during 2020	Withdrawal Liability Income
January	\$ 305,150.00
February	-
March	11,260.00
April	-
May	3,844.00
June	7,416.00
July	-
August	-
September	11,260.00
October	175,000.00
November	-
December	7,416.00
Total	521,346.00

Attachment to 2021 Form 5500
Schedule MB, lines 9c and 9h – Schedule of Funding Standard Account Bases
Midwest Pension Plan
EIN/PN: 36-6512748/001

Charges and Credits for Funding Standard Account

The amortization charges and credits for the Funding Standard Account for the plan year beginning January 1, 2021 are determined below.

1. Charges as of January 1, 2021

	<u>Date</u>		<u>Amortization</u>	<u>Years</u>	<u>Outstanding</u>
	<u>Established</u>	<u>Description</u>	<u>Amount</u>	<u>Remaining</u>	<u>Balance</u>
a.	January 1, 1992	Plan amendment	\$124,300	1	\$124,300
b.	January 1, 1993	Plan amendment	128,056	2	247,177
c.	January 1, 1993	Change in assumptions	271,931	2	524,890
d.	January 1, 1994	Plan amendment	96,066	3	268,559
e.	January 1, 1995	Plan amendment	64,774	4	233,220
f.	January 1, 1996	Plan amendment	111,134	5	483,355
g.	January 1, 1997	Plan amendment	249,174	6	1,257,302
h.	January 1, 1998	Plan amendment	145,551	7	828,742
i.	January 1, 1998	Change in assumptions	385,952	7	2,197,554
j.	January 1, 1999	Plan amendment	575,461	8	3,623,446
k.	January 1, 2000	Plan amendment	136,465	9	935,781
l.	January 1, 2001	Plan amendment	185,146	10	1,366,168
m.	January 1, 2006	Plan amendment	91,849	15	871,565
n.	January 1, 2007	Plan amendment	26,243	16	257,894
o.	January 1, 2008	Actuarial Loss	396,120	2	764,602
p.	January 1, 2009	Actuarial Loss	1,390,926	3	3,888,426
q.	January 1, 2009	Plan amendment	104,992	3	293,510
r.	January 1, 2010	Actuarial Loss	489,445	4	1,762,261
s.	January 1, 2012	Actuarial Loss	208,830	6	1,053,734
t.	January 1, 2013	Actuarial Loss	210,591	7	1,199,070
u.	January 1, 2013	Plan amendment	34,582	7	196,906
v.	January 1, 2015	Actuarial Loss	42,648	9	292,447
w.	January 1, 2016	Change in assumptions	191,632	10	1,414,030
x.	January 1, 2016	Actuarial Loss	593,812	10	4,381,671
y.	January 1, 2017	Actuarial Loss	296,022	11	2,327,944
z.	January 1, 2018	Actuarial Loss	152,587	12	1,268,824
aa.	January 1, 2019	Actuarial Loss	317,750	13	2,775,633
bb.	January 1, 2020	Actuarial Loss	245,058	14	2,236,364
cc.	January 1, 2021	Actuarial Loss	<u>9,127</u>	15	<u>86,610</u>
dd.	Total		7,276,224		37,161,985

Attachment to 2021 Form 5500
Schedule MB, lines 9c and 9h – Schedule of Funding Standard Account Bases
Midwest Pension Plan
EIN/PN: 36-6512748/001

2. Credits as of January 1, 2021

	Date		Amortization	Years	Outstanding
	<u>Established</u>	<u>Description</u>	<u>Amount</u>	<u>Remaining</u>	<u>Balance</u>
a.	January 1, 2009	Change in assumptions	\$122,779	3	\$343,238
b.	January 1, 2011	Actuarial Gain	31,063	5	135,100
c.	January 1, 2011	Change in assumptions	702,041	5	3,053,403
d.	January 1, 2014	Actuarial Gain	<u>193,281</u>	8	<u>1,217,011</u>
e.	Total		1,049,164		4,748,752
3.	Net outstanding balance [(1dd) - (2e)]				32,413,233
4.	Credit Balance as of January 1, 2021				43,559,899
5.	Waived funding deficiency				0
6.	Balance test result [(3) - (4) - (5)]				(11,146,666)
7.	Unfunded Actuarial Accrued Liability as of January 1, 2021, minimum \$0				(11,146,666)

Appendix A – Summary of Actuarial Methods

The ultimate cost of a pension plan is the excess of actual benefits and administrative expenses paid over actual net investment return on plan assets during the plan's existence until the last payment has been made to the last participant. A plan's "actuarial cost method" determines the expected incidence of actuarial costs by allocating portions of the ultimate cost to each plan year. The cost method is thus a budgeting tool to help ensure that a plan will be adequately and systematically funded. Annual contributions are also affected by a plan's "asset valuation method" (as well as plan provisions, actuarial assumptions, and actual plan demographic and investment experience each year).

Actuarial Cost Method

The actuarial cost method used for determining the Plan's ERISA funding requirements, FASB ASC Topic 960 values and current liability (RPA '94) values is the Unit Credit method. Under this method, an accrued benefit is determined at each active participant's assumed retirement age based on compensation and service at both the beginning and the end of the current year. The Plan's Normal Cost is the sum of the present value of the excess of each active participant's accrued benefit at the end of the current year over that at the beginning of the current year. The Plan's accrued liability is the sum of (a) the present value of each active participant's accrued benefit at the beginning of the current year plus (b) the present value of each inactive participant's benefits, plus (c) for FASB ASC Topic 960 plan accounting, the present value of the administrative expenses. The present value of the administrative expenses for FASB ASC Topic 960 plan accounting was calculated by projecting the payment of expected administrative expenses for the duration of the Plan's liabilities. The duration of the Plan's liabilities was calculated to be 10 years at January 1, 2021 and 10 years at January 1, 2020.

The Actuarial Value of Assets is the market value of assets less unrecognized returns in each of the last five years. Unrecognized return is equal to the difference between the actual market return and the projected market return, and is recognized over a five-year period. The actuarial value is further adjusted, if necessary, to be within 20% of the market value.

Changes in Actuarial Methods Since Prior Valuation

None.

Appendix B – Summary of Actuarial Assumptions

ECONOMIC ASSUMPTIONS

Investment Return

ERISA minimum funding: 7.50% per year (net of investment-related administrative expenses)

FASB ASC Topic 960: Discount rate of 7.50% per year

Withdrawal liability: To the extent the present value of benefits is matched by the market value of plan assets, the interest assumption is the PBGC interest rates for December of 2020 of 1.62% for the first 20 years and 1.40% thereafter. To the extent the present value of vested benefits is not matched by the market value of plan assets, the interest assumption utilized is the same as used for minimum funding.

Current Liability (RPA '94): 2.08% per year

Administrative Expenses

Average of actual administrative expenses paid in prior two years, increased by 2% and assumed to be payable in the middle of the year. For FASB ASC Topic 960 plan accounting, the present value of the administrative expenses was calculated by projecting the payment of expected administrative expenses for the duration of the Plan's liabilities. The duration of the Plan's liabilities was calculated to be 10 years at January 1, 2021 and 10 years at January 1, 2020.

Mortality

ERISA minimum funding, FASB ASC Topic 960, and withdrawal liability: Healthy participant: RP-2014 blue collar mortality tables adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year, and projected forward using MP-2015 on a generational basis, with employee rates before commencement and healthy annuitant rates after benefit commencement. Disabled participant: RP-2014 disabled annuitant table adjusted to reflect Mortality Improvement Scale MP-2015 from the 2006 base year, and projected forward using MP-2015

Current Liability (RPA '94): IRS 2021 Non-annuitant/annuitant Mortality Table. This table is based on the RP-2014 Mortality Table with projection for mortality improvement.

Retirement

Annual rates of retirement are shown in the following table for active participants who are eligible to retire.

Age	Rate
55-59	1%
60-64	5
65-69	20
70+	100

The weighted average retirement age for active participants is 66.

Terminated vested participants are assumed to retire at age 65.

Termination

Annual rates of termination are based on age. Sample rates are shown in the following table.

Age	Rate
20	30%
25	30
30	20
35	20
40	10
45	10
50	10
55	10
60	10

Disability

Annual rates of disability are based on age. Sample rates are shown in the following table.

Age	Rate
20	0.037%
25	0.037
30	0.037
35	0.043
40	0.100
45	0.213
50	0.370
55	0.633
60	1.150

Decrement Timing

Decrements are assumed to occur at the middle of the year, except that 100% retirement (see above) is assumed to occur at the beginning of the year.

Form of Payment

Single life annuity with 60 months guaranteed.

Hours of Service

1,710 hours per year

Marital Characteristics

For participants not in pay status: 80% of participants are assumed to be married to a spouse of the opposite sex. Males are assumed to be 3 years older than females.

For participants in pay status: Actual birth dates of beneficiaries are included in the census data, where relevant.

For beneficiaries: Actual birth dates are included in the census data, where relevant.

Changes In Actuarial Assumptions Since Prior Valuation

Interest rates for withdrawal liability: From 2.53% for all years to 1.62% for the first 20 years and 1.40% thereafter.

Interest rates for current liability: From 2.95% per year to 2.08% per year, as required by statute.

Mortality for current liability: From statutory tables for 2020 to statutory tables for 2021.

Rational for Significant Assumptions

Investment return for ERISA minimum funding: Selected based on the Plan's target asset allocation as of the valuation date, capital market assumptions from several sources, including published studies summarizing the expectations of various investment experts. This information was used to develop forward-looking long-term expected returns, producing a range of reasonable expectations according to industry experts. Based on the resulting range of potential assumptions, in our professional judgement the selected investment return assumption is reasonable and is not expected to have any significant bias.

Investment return for withdrawal liability: First, the PBGC rates are used to value those liabilities presently funded by plan assets. The PBGC rates are based on returns for fixed income securities. Second, the Fund's remaining liabilities are valued under the ERISA minimum funding investment return used to value the Fund on an ongoing basis which is currently 7.5%. The decision to use a blended investment return rate assumption for withdrawal liability rests on all relevant actuarial considerations, including the Fund's financial health and contribution levels.

Mortality rates: Based on recent pension mortality research conducted by the Society of Actuaries. This assumption includes a margin for future mortality improvement relative to recent experience.

Other demographic assumptions: Except where noted, demographic assumptions are based on Milliman's experience study dated October 20, 2016.

Attachment to 2021 Form 5500
Schedule MB, Line 8b(1) - Projection of Expected Benefit Payments
Plan Name: Midwest Pension Plan
EIN/PN: 36-6512748/001

Plan Year	Expected Annual Benefit Payments
Current Plan Year	9,897,039
Current Plan Year + 1	10,071,667
Current Plan Year + 2	10,250,428
Current Plan Year + 3	10,362,687
Current Plan Year + 4	10,444,604
Current Plan Year + 5	10,565,432
Current Plan Year + 6	10,667,139
Current Plan Year + 7	10,701,046
Current Plan Year + 8	10,671,506
Current Plan Year + 9	10,631,163

Midwest Pension Plan
EIN: 36-6512748
Plan Number: 001
Attachment to Form 5500
Schedule R, Line 13e - Information on Contribution rates and Base Units
December 31, 2021

13. The following information is for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars).

a. Name of contributing employer Fresh Express Chiquita Brands

b. EIN : 94-2591533

c. Dollar amount contributed by employer \$123,814

d. Date collective bargaining agreement expires: 10/27/2023

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$31

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

a. Name of contributing employer Chicago Steel Holdings

b. EIN: 20-0836074

c. Dollar amount contributed by employer \$99,306

d. Date collective bargaining agreement expires: 10/31/2024

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$180

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

a. Name of contributing employer LA-CO Industries

b. EIN: 36-2278494

c. Dollar amount contributed by employer \$87,072

d. Date collective bargaining agreement expires: 11/30/2023

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$96

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

a. Name of contributing employer Wertheimer Box

b. EIN: 36-2096689

c. Dollar amount contributed by employer \$80,075

d. Date collective bargaining agreement expires: 05/14/2024

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$95

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

a. Name of contributing employer Global Material Technology

b. EIN: 04-2624726

c. Dollar amount contributed by employer \$78,225

d. Date collective bargaining agreement expires: 10/31/2023

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$75

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

a. Name of contributing employer Bretford Franklin Park

b. EIN: 36-2113703

c. Dollar amount contributed by employer \$74,385

d. Date collective bargaining agreement expires: 02/28/2023

e. Contribution rate information

(1) Contribution rate (in dollars and cents): \$75

(2) Base unit measure ☐ Hourly ☐ Weekly ☐ Unit of production ☒ Other (Monthly)

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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. 1510 - 0110
1510 - 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

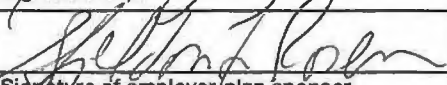
- A** This return/report is for: ☒ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instr.)
- B** This return/report is: ☐ a single-employer plan ☐ a DFE (specify) _____
☐ the first return/report ☐ the final return/report
☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here ☒
- D** Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program
☐ special extension (enter description) _____
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here ☐

Part II Basic Plan Information - enter all requested information

1a Name of plan MIDWEST PENSION PLAN	1b Three-digit plan number (PN) ► 001
	1c Effective date of plan 07/01/1967
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) BOARD OF TRUSTEES - MIDWEST PENSION PLAN 245 FENCL LANE HILLSIDE IL 60162	2b Employer Identification Number (EIN) 36-6512748 2c Plan Sponsor's telephone number 312-738-0822 2d Business code (see instructions) 326100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE 	<u>10/14/2021</u>	MARK SPANO
Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE 	<u>10/14/2021</u>	SHELDON ROSEN
Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE		
Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor**3b** Administrator's EIN**3c** Administrator's telephone number**4** If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:**4b** EIN**a** Sponsor's name**4d** PN**c** Plan Name**5** Total number of participants at the beginning of the plan year**5**

11775

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)**

1846

a (2) Total number of active participants at the end of the plan year**6a(2)**

1758

b Retired or separated participants receiving benefits**6b**

3677

c Other retired or separated participants entitled to future benefits**6c**

5388

d Subtotal. Add lines 6a(2), 6b, and 6c**6d**

10823

e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits**6e**

608

f Total. Add lines 6d and 6e**6f**

11431

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**

133

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)**7**

52

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)

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

9b Plan benefit arrangement (check all that apply)

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

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

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

b General Schedules

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

MIDWEST PENSION PLAN
(Supplemental Schedules)
Schedule of Reportable Transactions
For the year ended December 31, 2021

Form 5500, Schedule H, Line 4(j)
EIN: 36-6512748
Plan Number: 001

Description of Assets	Purchase Price	Selling Price	Cost	Current Value of Assets on Transaction Date	Net Gain or (Loss)
<u>Single Transaction</u> <u>Exceeding 5% of Plan Assets</u>					
HARDMAN JOHNSTON INTL EQUITY GROUP	\$ 9,000,000	\$ -	\$ 9,000,000	\$ 9,000,000	\$ -
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 468	-	9,000,000	9,000,000	9,000,000	-
LSV INTL VALUE EQUITY TRUST	-	9,158,000	3,241,427	9,158,000	5,916,573
<u>Series of Transactions</u> <u>Exceeding 5% of Plan Assets</u>					
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 465	16,452,193	-	16,452,193	16,452,193	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 465	-	15,610,497	15,610,497	15,610,497	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	8,623,994	-	8,623,994	8,623,994	-
GOLDMAN FINANCIAL SQUARE GOVT-A-FD# 462	-	8,136,089	8,136,089	8,136,089	-
HARDMAN JOHNSTON INTL EQUITY GROUP	10,000,000	-	10,000,000	10,000,000	-
LSV INTL VALUE EQUITY TRUST	-	10,738,000	8,874,840	10,738,000	1,863,160
LSV INTL VALUE EQUITY TRUST	1,000,000	-	1,000,000	1,000,000	-
NIS INTERMEDIATE FIXED INCOME FUND	-	12,594,079	12,601,162	12,594,079	(7,083)
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	21,479,313	-	21,479,313	21,479,313	-
GOLDMAN FINANCIAL SQUARE TREASURY OBLIGATIONS-A-FD# 468	-	20,827,246	20,827,246	20,827,246	-

See independent auditor's report.

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
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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 MIDWEST PENSION PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF BOARD OF TRUSTEES - MIDWEST PENSION PLAN	D Employer Identification Number (EIN) 36-6512748

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)

1a Enter the valuation date: Month 1 Day 1 Year 2021

b Assets

(1) Current value of assets.....	1b(1)	134,436,435
(2) Actuarial value of assets for funding standard account	1b(2)	135,737,913

c (1) Accrued liability for plan using immediate gain methods	1c(1)	124,591,247
--	--------------	-------------

(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)	124,591,247
---	--------------	-------------

d Information on current liabilities of the plan:

(1) Amount excluded from current liability attributable to pre-participation service (see instructions)	1d(1)	
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(2) "RPA '94" information:

(a) Current liability.....	1d(2)(a)	227,988,404
----------------------------	-----------------	-------------

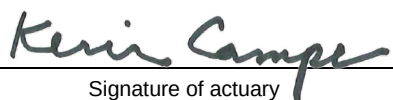
(b) Expected increase in current liability due to benefits accruing during the plan year.....	1d(2)(b)	1,275,962
---	-----------------	-----------

(c) Expected release from "RPA '94" current liability for the plan year.....	1d(2)(c)	9,906,921
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(3) Expected plan disbursements for the plan year.....	1d(3)	11,165,009
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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		10/13/2022
Kevin M. Campe	Signature of actuary	Date
MILLIMAN	Type or print name of actuary	20-05356
71 S. WACKER DR., 31ST FLOOR	Firm name	Most recent enrollment number
CHICAGO	Address of the firm	(312) 726-0677
IL 60606		Telephone number (including area code)

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 ☐

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

Schedule MB (Form 5500) 2021
v. 200204

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	134,436,435
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	4,030	107,710,423
(2) For terminated vested participants	5,902	99,278,476
(3) For active participants:		
(a) Non-vested benefits		818,228
(b) Vested benefits		20,181,277
(c) Total active	1,846	20,999,505
(4) Total	11,778	227,988,404
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	58.97 %

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
7/1/2021	1,621,039				
Totals ▶			3(b)	1,621,039	3(c) 0
(d) Total withdrawal liability amounts included in line 3(b) total					3(d) 521,346

4 Information on plan status:

a Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4a	108.9 %
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	N
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan? ☐ 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 ☒ 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	2.08 %
	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)	13P
(2) Females	6c(2)	13P
d Valuation liability interest rate	6d	7.50 %
e Expense loading	6e	293.9 % ☐ N/A ☒ 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	6.8 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	6.1 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
1	86,610	9,127

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	0
b Employer's normal cost for plan year as of valuation date.....	9b	1,686,177
c Amortization charges as of valuation date:		
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	37,161,986
(2) Funding waivers	9c(2)	0
(3) Certain bases for which the amortization period has been extended	9c(3)	0
d Interest as applicable on lines 9a, 9b, and 9c.....	9d	672,180
e Total charges. Add lines 9a through 9d.....	9e	9,634,581

Credits to funding standard account:

f Prior year credit balance, if any.....	9f	43,559,899
g Employer contributions. Total from column (b) of line 3.....	9g	1,621,039
	Outstanding balance	
h Amortization credits as of valuation date.....	9h	4,748,753
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h.....	9i	3,405,870
j Full funding limitation (FFL) and credits:		
(1) ERISA FFL (accrued liability FFL).....	9j(1)	38,055,955
(2) "RPA '94" override (90% current liability FFL)	9j(2)	67,130,566
(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	49,635,972
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m	40,001,391
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 2020 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	
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11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.....	☐ Yes ☒ No
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