Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2021

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2021 or fiscal plan year beginning 06/01/2021 and ending 05/31/2022

A This return/report is for:
- [X] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [ ] a single-employer plan
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [X]

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
BRICKLAYERS & ALLIED CRAFTWORKERS LOCAL 13 DEFINED CONTRIBUTION PENSION PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/01/1997

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
BRICKLAYERS & ALLIED CRAFTWORKERS

2250 SOUTH RANCHO DRIVE, SUITE 295
LAS VEGAS, NV 89102-4409

2b Employer Identification Number (EIN) 88-0399044

2c Plan Sponsor's telephone number 702-734-8601

2d Business code (see instructions) 525100

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.	03/14/2023	RICHARD CRAWFORD, TRUST CHAIRMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor

BRICKLAYERS & ALLIED CRAFTWORKERS LOCAL 13 DEFINED CONT PENSION PLAN

2250 SOUTH RANCHO DRIVE, SUITE 295
LAS VEGAS, NV 89102-4409

3b Administrator's EIN
88-0399044

3c Administrator's telephone number
702-734-8601

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**	2495
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)**	871
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	900
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	1636
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	2536
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	52
f	Total. Add lines **6d** and **6e**	**6f**	2588
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	2586
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	53

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

2E

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

9a Plan funding arrangement (check all that apply)

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

9b Plan benefit arrangement (check all that apply)

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2021** **This Form is Open to Public Inspection.**

For calendar plan year 2021 or fiscal plan year beginning 06/01/2021 and ending 05/31/2022

A Name of plan	**B** Three-digit plan number (PN) ▶
BRICKLAYERS & ALLIED CRAFTWORKERS LOCAL 13 DEFINED CONTRIBUTION PENSION PLAN	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
BRICKLAYERS & ALLIED CRAFTWORKERS	88-0399044

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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

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

ZENITH AMERICAN SOLUTIONS

2250 SOUTH RANCHO DRIVE,
LAS VEGAS, NV 89102

52-1590516

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 15 18 31 38 49 50	THIRD-PARTY ADMIN	94008	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

LAYTON LAYTON & TOBLER LLP

606 SOUTH NINTH STREET
LAS VEGAS, NV 89101-7013

88-0176927

(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?
	AUDITOR	26259	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

RUBINBROWN

7881 WEST CHARLESTON BLVD
LAS VEGAS, NV 89117

43-0765316

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 16	PAYROLL AUDITOR/CONSULTAN	4511	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

H.G. SAND AND ASSOC.

P. O. BOX 68
SUN RIVER, MT 59483-0068

81-0350794

(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	PAYROLL AUDITOR	1070	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

RAEL & LETSON

35 NO. LAKE AVE, SUITE810
PASADENA, CA 91101

94-2602731

(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 17	CONSULTANT	9750	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

NOVARA TESIJA & CATENACCI, PLLC

2000 TOWN CENTER, 2370
SOUTHFIELD, MI 48075

38-3763096

(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	ATTORNEY	53044	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

BRANSTETTER, STRANCH, & JENNINGS

703 SOUTH 8TH STREET
615-254-8801
LAS VEGAS, NV 89101

(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	CONSULTANT	1692	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

SEGAL BENZ

333 WEST 34TH STREET
212-251-5000
NEW YORK, NY 10001

(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	CONSULTANT	4500	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2021

This Form is Open to Public Inspection

For calendar plan year 2021 or fiscal plan year beginning 06/01/2021 and ending 05/31/2022

A Name of plan
BRICKLAYERS & ALLIED CRAFTWORKERS LOCAL 13 DEFINED CONTRIBUTION PENSION PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BRICKLAYERS & ALLIED CRAFTWORKERS

D Employer Identification Number (EIN)
88-0399044

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	149541	159852
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	410662	275022
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	20806	23314
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1063699	425412
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	22320476	21884631
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	23965184	22768231
	Liabilities			
g	Benefit claims payable	1g	40876	39498
h	Operating payables	1h	14566	13446
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		3478
k	Total liabilities (add all amounts in lines 1g through1j)	1k	55442	56422
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	23909742	22711809

Part II Income and Expense Statement

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

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	2216647	
	(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)		2216647
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	158	
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		158
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	386080	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		386080
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)	-2493179	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-2493179

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		586262
c Other income	2c		8913
d Total income. Add all **income** amounts in column (b) and enter total	2d		704881
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1628967	
(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)		1628967
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)	103226	
(2) Contract administrator fees	2i(2)	94008	
(3) Investment advisory and management fees	2i(3)	45798	
(4) Other	2i(4)	30815	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		273847
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		1902814
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-1197933
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: LAYTON LAYTON & TOBLER LLP, CPA'S **(2)** EIN: 88-0176927

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

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

Part IV Compliance Questions

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

During the plan year:

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

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		500000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

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

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13

DEFINED CONTRIBUTION PENSION PLAN

YEARS ENDED MAY 31, 2022 AND 2021

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13

DEFINED CONTRIBUTION PENSION PLAN

YEARS ENDED MAY 31, 2022 AND 2021

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Stephen D. Waldron, CPA
Francine M. Miller, CPA
Donald R. Layton, CPA (Retired)

Independent Auditor's Report

Board of Trustees
Bricklayers and Allied Craftworkers Local 13
Defined Contribution Pension Plan
Las Vegas, Nevada

Opinion

We have audited the accompanying financial statements of Bricklayers and Allied Craftworkers Local 13 Defined Contribution Pension Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of benefit obligations and net assets available for benefits as of May 31, 2022 and 2021, and the related statement of changes in benefit obligations and 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 Bricklayers and Allied Craftworkers Local 13 Defined Contribution Pension Plan as of May 31, 2022 and 2021, and the changes in its net assets available for benefits for the years then ended, in accordance with the 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 Bricklayers and Allied Craftworkers Local 13 Defined Contribution 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 Bricklayers and Allied Craftworkers Local 13 Defined Contribution Pension Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Bricklayers and Allied Craftworkers Local 13 Defined Contribution 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 Bricklayers and Allied Craftworkers Local 13 Defined Contribution 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.

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 schedule of assets held at end of the year, assets acquired and disposed of during the year, and schedule of reportable transactions (transactions in excess of 5 percent of the current value of plan assets), together referred to as "supplemental information," are presented for the purpose of additional analysis and are not a required part of the financial statements but are supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA). Such information is the responsibility of the Plan's 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 audit 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 schedule, we evaluated whether the supplemental schedule, including their form and content, is 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 schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Tighe Tighe · Tilli CPA

January 18, 2023

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13

DEFINED CONTRIBUTION PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

MAY 31, 2022 AND 2021

ASSETS

	2022	2021
Investments, at fair value	$ 22,310,043	$ 23,384,175
Receivables:		
Employer contributions receivables	275,022	410,662
Accrued interest and dividends	23,314	20,806
Total receivables	298,336	431,468
Cash	159,852	149,541
Total assets	22,768,231	23,965,184

LIABILITIES

Current liabilities:		
Accounts payable	13,446	14,566
Due to other fund	3,478	
Outstanding benefit checks	39,498	40,876
Total current liabilities	56,422	55,442
Total liabilities	56,422	55,442
Net assets available for benefits	$ 22,711,809	$ 23,909,742

The accompanying notes are an integral
part of these financial statements

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13

DEFINED CONTRIBUTION PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

YEARS ENDED MAY 31, 2022 AND 2021

	2022	2021
Additions to net assets attributed to:		
Investment income:		
Interest and dividends	$ 386,238	$ 354,893
Net appreciation (depreciation) in the fair value of investments	(2,493,179)	3,016,225
Realized gain on sale of investments	586,262	353,960
Less investment expenses	(45,798)	(37,673)
Total investment income	(1,566,477)	3,687,405
Employer contributions:	2,216,647	3,436,115
Other income:		
Collection costs recovered, liquidated damages, delinquent interest, and reimbursements	8,913	12,660
Total additions	659,083	7,136,180
Deductions from net assets attributed to:		
Benefits:		
Benefits paid to participants	1,628,967	1,067,454
Administrative expenses:		
Administration fees	94,008	92,426
Audit fees - payroll	5,581	11,762
Audit fees	26,259	22,761
Consultant fees	18,342	9,900
Insurance, bond and office expenses	30,815	22,623
Legal fees	53,044	48,663
Total administrative expenses	228,049	208,135
Total deductions	1,857,016	1,275,589
Net increase	(1,197,933)	5,860,591
Net assets available for benefits:		
Beginning of year	23,909,742	18,049,151
End of year	$ 22,711,809	$ 23,909,742

The accompanying notes are an integral part of these financial statements

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13

DEFINED CONTRIBUTION PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

MAY 31, 2022 AND 2021

1. Description of the plan:

The following description of the Bricklayers and Allied Craftworkers Local 13 Defined Contribution Pension Plan (Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General:

The Plan was established on June 1, 1997, as a defined contribution plan. All members of the Bricklayers and Allied Craftworkers Local 13 who work in covered employment become participants in the Plan at such time as a contribution is paid or is required to be paid on their behalf. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions:

The employer makes contributions on behalf of each participant for each hour paid at rates per hour of $0.50 to $5.00 as set forth in the various collective bargaining agreements.

Participant accounts:

A participant account is maintained on behalf of each participant until such an account is distributed in accordance with the terms of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Payment of benefits:

On termination of service due to death, disability or retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in one of the following ways: a specified monthly amount until the account is exhausted, a specified lump sum amount with the remaining funds to be taken monthly, quarterly, semi-annually or annually, a full lump sum amount equal to his accrued benefit, or a purchase of an annuity. In compliance with IRS regulations permitting early distributions or for termination of services due to other reasons, a participant may receive up to the value of the vested interest in his or her account as a lump sum distribution.

Vesting:

Participants are 100 percent vested in the value of the assets in their account, which is non-forfeitable from the time that such participant's account is established.

2. Summary of significant accounting policies:

Basis of accounting:

The accompanying financial statements of Bricklayers and Allied Craftworkers Local 13 Defined Contribution Pension Plan have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America. Accordingly, the financial statements reflect all significant receivables, payables, and other liabilities.

Investments held by a defined contribution plan are required to be reported at fair value.

Use of estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Valuation of investments:

The Plan's investments are stated at fair value. Securities traded on national securities exchanges are reported at the last reported sales price on the last business day of the plan year. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on an accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Collection costs recovered and common expenses:

Recovered collection costs and certain common expenses are allocated between the BAC Local 13 Pension, Health Benefits, and Defined Contribution Pension Plans by allocations established by the Joint Trustees of all three Plans.

3. Investments:

The Plan's investments are held in a bank-administered trust fund. The following presents investments at fair value as determined by quoted market price on May 31, 2022 and 2021.

	2022	2021
Mutual funds	$ 21,884,631	$ 22,320,476
Money market	425,412	1,063,699
	$ 22,310,043	$ 23,384,175

3. Investments (continued):

The Plan's investments (including investments bought, sold, and held during the year) changed in value during fiscal 2022 and 2021, as follows:

	2022	2021
Mutual funds – appreciation (depreciation)	$ (2,493,179)	$ 3,016,225

4. Concentration of credit risk:

Due to fluctuations in funds on deposit, cash and cash equivalents in bank accounts periodically exceed the FDIC-insured limit. The Plan's cash and cash equivalents in bank accounts at May 31, 2022 and 2021 did not exceed the insured limit.

5. Fair value measurements:

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described as follows:

Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets the Plan has the ability to access.

Level 2 Inputs to the Valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

5. Fair value measurements, (continued):

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

Following is a description of the valuation methodologies used for assets measured at fair value.

Mutual funds and money market funds (level 1): Valued at the net asset value (NAV) of shares held by the plan at year-end.

Mutual funds (level 3): Valued using broker quote due to the broker being recognized as the market participant.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of May 31, 2022 and 2021:

		Fair Value Measurements at Report Date Using:		
	Fair value	Quoted Prices In Active Markets For Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
May 31, 2022				
Mutual funds	$ 21,884,631	$ 18,657,738	$	$ 3,226,893
Money market	425,412	425,412		
Total investments	$ 22,310,043	$ 19,083,150	$	$ 3,226,893
May 31, 2021				
Mutual funds	$ 22,320,476	$ 19,105,578	$	$ 3,214,898
Money market	1,063,699	1,063,699		
Total investments	$ 23,384,175	$ 20,169,277	$	$ 3,214,898

5. Fair value measurements, (continued):

Level 3 Gains and Losses

The following table sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended May 31, 2022.

	Mutual Funds
Balance, beginning of the year	$ 3,214,898
Unrealized gains relating to instruments still held at the reporting date	11,995
Balance, end of the year	$ 3,226,893

6. Insurance, bond and office expenses:

	2022	2021
Bond and insurance	$ 4,013	$ 6,707
Postage and printing expenses	15,449	6,329
Miscellaneous expense	2,295	922
Bank fees	9,058	8,665
Total insurance, bond and office expenses	$ 30,815	$ 22,623

7. Plan termination:

Although it has not expressed any intent to do so, the Board of Trustees has the right under the Plan to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA.

8. Tax status:

The Internal Revenue Service has determined and informed the Plan by letter dated March 8, 2016, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that, more likely than not, would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress. The federal income tax returns of the Plan are subject to examination by the IRS, generally for three years after the returns were filed.

9. Transactions with parties in interest:

Parties-in-interest transactions include the investment in the funds of the trustees, and the related dividend income, interest and the payment of administrative expenses by the Plan. Such transactions are exempt from being prohibited transactions.

10. Subsequent events & date of management's review:

Management has evaluated subsequent events through January 18, 2023, the date on which the financial statements were available to be issued. Based on this evaluation, no subsequent events have occurred that would have an effect on these statements.

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13 PENSION
EIN # 88-0399044
PLAN NUMBER: 001
SCHEDULE H, LINE 4i -
SCHEDULE OF ASSETS HELD AT END OF YEAR
MAY 31, 2022

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	BNY Mellon Global Real Return Fund	Mutual funds	$ 653,375	$ 706,309
	Columbia Emerging Markets Fund	Mutual funds	620,972	392,529
	Columbia Short Term Bond Fund	Mutual funds	2,752,003	2,639,540
	Columbia Total Return Bond Fund	Mutual funds	2,170,483	1,890,388
	Comerica Trowel Trades S&P Index Fund	Mutual funds	687,465	3,226,893
	Dodge & Cox International Stock Fd	Mutual funds	596,033	691,729
	Federated Government Obligations Fund	Mutual funds	425,412	425,412
	Federated Institutional High Yield Bond Fund	Mutual funds	970,458	894,537
	MFS International Intrinsic Value	Mutual funds	667,710	646,626
	Natixis Gateway Fund Class N	Mutual funds	400,434	449,002
	T Rowe Price International Discovery Fund CL I	Mutual funds	274,281	265,177
	TCW Emerging Markets Income Fund CL I	Mutual funds	1,044,884	876,147
	Vanguard Short Term Invt Grade Adm	Mutual funds	2,738,058	2,608,151
	Vanguard Mid Cap Index Fd Cl I	Mutual funds	657,969	1,151,912
	Vanguard Institutional Index Fd	Mutual funds	1,606,716	2,167,194
	Vanguard Small-Cap Index Fund	Mutual funds	510,194	699,272
	Vanguard Developed Markets Index	Mutual funds	580,672	670,508
	Vanguard Total Bd Mkt Index Fd	Mutual funds	2,053,292	1,908,717
			$ 19,410,411	$ 22,310,043

Note: Column (a) parties-in-interest.

See accompanying independent auditor's report

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
	Equity			
	Equity Funds			
	- BNY Mellon Global Real Return Fund Class I #6280 *05587N828*			
06/02/21	Purchased 1439.263 Shs 06/01/21	0.00	0.00	-25,000.00
07/02/21	Purchased 1446.759 Shs 07/01/21	0.00	0.00	25,000.00
08/31/21	Purchased 1137.656 Shs 08/30/21	0.00	0.00	-20,000.00
12/31/21	Recd 696.541 Shs As A Reinvested Div of $ 17.440 Per Sh	0.00	0.00	-12,182.56
		0.00	**0.00**	**-82,182.56**
	- BMO Lgm Emerging Markets Equity Fund Class I #754 *09658L489*			
07/02/21	Purchased 1391.208 Shs 07/01/21	0.00	0.00	-25,000.00
12/08/21	Recd 48.430 Shs As A Reinvested Div of $ 12.220 Per Sh	0.00	0.00	-591.81
12/08/21	Recd 11736.175 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	-143,416.06
		0.00	**0.00**	**-169,007.87**
	- Dodge & Cox International Stock Fund #1048 *256206103*			
08/31/21	Purchased 624.572 Shs 08/30/21	0.00	0.00	-40,000.00
12/21/21	Recd 401.995 Shs As A Reinvested Div of $ 45.310 Per Sh	0.00	0.00	-18,214.39
		0.00	**0.00**	**-58,214.39**
	- Gateway Fund Class N #6102 *367829777*			
09/25/21	Recd 24.296 Shs As A Reinvested Div of $ 39.200 Per Sh	0.00	0.00	-952.39
09/27/21	Recd 26.712 Shs As A Reinvested Div of $ 39.810 Per Sh	0.00	0.00	-1,063.42

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
12/22/21	Recd 14.659 Shs As A Reinvested Div of $ 40.410 Per Sh	0.00	0.00	- 592.37
03/25/22	Recd 20.193 Shs As A Reinvested Div of $ 39.400 Per Sh	0.00	0.00	- 795.20
		0.00	0.00	- 3,403.38
	- MFS International Intrinsic Value Fund Class I #887 *55273E822*			
12/10/21	Recd 103.227 Shs As A Reinvested Div of $ 55.500 Per Sh	0.00	0.00	- 5,729.10
12/10/21	Recd 788.596 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 43,767.07
12/10/21	Recd 44.909 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	2,492.47
03/31/22	Purchased 1010.101 Shs 03/30/22	0.00	0.00	- 50,000.00
		0.00	0.00	- 101,988.64
	- T Rowe Price International Discovery Fund Class I #436 *77956H377*			
12/17/21	Recd 451.601 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 36,837.11
12/17/21	Recd 124.443 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 10,150.83
		0.00	0.00	- 46,987.94
	- Vanguard Developed Markets Index Fund - Adm #127 *921943809*			
06/21/21	Recd 361.962 Shs As A Reinvested Div of $ 16.440 Per Sh	0.00	0.00	- 5,950.65
08/31/21	Purchased 1186.944 Shs 08/30/21	0.00	0.00	- 20,000.00
09/20/21	Recd 170.128 Shs As A Reinvested Div of $ 16.720 Per Sh	0.00	0.00	- 2,844.54
12/20/21	Recd 684.801 Shs As A Reinvested Div of $ 16.940 Per Sh	0.00	0.00	- 11,075.12
03/21/22	Recd 76.445 Shs As A Reinvested Div of $ 15.470 Per Sh	0.00	0.00	- 1,182.61

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
		0.00	**0.00**	**- 41,052.92**
	- Vanguard Institutional Index Fd #94 *922040100*			
06/24/21	Recd 20.073 Shs As A Reinvested Div of $ 375 440 Per Sh	0.00	0.00	- 7,435.97
07/02/21	Purchased 99.372 Shs 07/01/21	0.00	0.00	- 37,500.00
09/24/21	Recd 20.128 Shs As A Reinvested Div of $ 388 560 Per Sh	0.00	0.00	- 7,820.87
12/30/21	Recd 21.092 Shs As A Reinvested Div of $ 408 020 Per Sh	0.00	0.00	- 8,606.15
12/30/21	Recd 148.437 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 60,565.38
12/30/21	Recd 5.808 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 2,368.95
03/23/22	Recd 20.421 Shs As A Reinvested Div of $ 382 050 Per Sh	0.00	0.00	- 7,801.91
03/23/22	Recd 32.001 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 12,226.03
03/23/22	Recd .816 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 312.86
		0.00	**0.00**	**- 144,639.12**
	- Vanguard Small Cap Index Fund Adm #548 *922908868*			
06/24/21	Recd 15.559 Shs As A Reinvested Div of $ 107 160 Per Sh	0.00	0.00	- 1,667.27
07/02/21	Purchased 460.024 Shs 07/01/21	0.00	0.00	- 50,000.00
08/31/21	Purchased 184.230 Shs 08/30/21	0.00	0.00	- 20,000.00
09/24/21	Recd 18.047 Shs As A Reinvested Div of $ 107 790 Per Sh	0.00	0.00	- 1,945.31
12/27/21	Recd 33.791 Shs As A Reinvested Div of $ 107 400 Per Sh	0.00	0.00	- 3,629.17
03/23/22	Recd 18.169 Shs As A Reinvested Div of $ 102 530 Per Sh	0.00	0.00	- 1,862.85
03/31/22	Purchased 484.306 Shs 03/30/22	0.00	0.00	- 50,000.00
		0.00	**0.00**	**- 129,104.60**

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
	- Vanguard Mid Cap Index Fund Class I #864 *922908835*			
06/24/21	Recd 62.119 Shs As A Reinvested Div of $ 64.300 Per Sh	0.00	0.00	- 3,994.24
09/24/21	Recd 51.181 Shs As A Reinvested Div of $ 66.990 Per Sh	0.00	0.00	- 3,428.59
12/27/21	Recd 70.088 Shs As A Reinvested Div of $ 68.680 Per Sh	0.00	0.00	- 4,927.64
03/23/22	Recd 60.969 Shs As A Reinvested Div of $ 64.790 Per Sh	0.00	0.00	- 3,950.15
		0.00	0.00	- 16,200.62
	Total Equity Funds	0.00	0.00	- 792,782.04
	Total Equity	0.00	0.00	- 792,782.04
	Fixed Income			
	Fixed Income Funds			
	- BMO Short-Term Income Fund Cl I #993 *09658L570*			
06/01/21	Recd 265.546 Shs As A Reinvested Div At $ 9.530 Per Sh	0.00	0.00	- 2,530.65
06/02/21	Purchased 6820.567 Shs 06/01/21	0.00	0.00	- 65,000.00
06/29/21	Purchased 3154.574 Shs 06/28/21	0.00	0.00	- 30,000.00
07/01/21	Recd 269.055 Shs As A Reinvested Div At $ 9.510 Per Sh	0.00	0.00	- 2,558.71
07/02/21	Purchased 2628.812 Shs 07/01/21	0.00	0.00	- 25,000.00
08/02/21	Recd 263.384 Shs As A Reinvested Div At $ 9.520 Per Sh	0.00	0.00	- 2,507.42
08/31/21	Purchased 6309.148 Shs 08/30/21	0.00	0.00	- 60,000.00
09/01/21	Recd 264.059 Shs As A Reinvested Div At $ 9.510 Per Sh	0.00	0.00	- 2,511.20
09/28/21	Purchased 7903.056 Shs 09/27/21	0.00	0.00	- 75,000.00
10/01/21	Recd 282.084 Shs As A Reinvested Div At $ 9.490 Per Sh	0.00	0.00	- 2,676.98

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
11/01/21	Recd 264.983 Shs As A Reinvested Div At $ 9.450 Per Sh	0.00	0.00	- 2,504.09
12/01/21	Recd 252.028 Shs As A Reinvested Div At $ 9.430 Per Sh	0.00	0.00	- 2,376.62
12/08/21	Recd 294.537 Shs As A Reinvested Sdiv At $ 9.390 Per Sh	0.00	0.00	- 2,765.70
12/13/21	Recd 41.522 Shs As A Reinvested Div At $ 9.390 Per Sh	0.00	0.00	- 389.89
		0.00	0.00	- 275,821.26
	- BMO TCH Core Plus Bond Fund Class I #795 *09658L885*			
05/01/21	Recd 369.143 Shs As A Reinvested Div At $ 12.200 Per Sh	0.00	0.00	- 4,503.55
05/02/21	Purchased 4922.067 Shs 05/01/21	0.00	0.00	- 60,000.00
05/28/21	Purchased 2442.997 Shs 05/26/21	0.00	0.00	- 30,000.00
07/01/21	Recd 389.078 Shs As A Reinvested Div At $ 12.310 Per Sh	0.00	0.00	- 4,789.55
07/02/21	Purchased 4471.545 Shs 07/01/21	0.00	0.00	- 55,000.00
08/02/21	Recd 384.648 Shs As A Reinvested Div At $ 12.390 Per Sh	0.00	0.00	- 4,999.70
08/31/21	Purchased 404.204 Shs 08/30/21	0.00	0.00	- 5,000.00
09/01/21	Recd 382.428 Shs As A Reinvested Div At $ 12.350 Per Sh	0.00	0.00	- 4,846.48
10/01/21	Recd 397.507 Shs As A Reinvested Div At $ 12.230 Per Sh	0.00	0.00	- 4,861.51
11/01/21	Recd 401.761 Shs As A Reinvested Div At $ 12.200 Per Sh	0.00	0.00	- 4,901.49
12/01/21	Recd 413.339 Shs As A Reinvested Div At $ 12.170 Per Sh	0.00	0.00	- 5,030.33
12/08/21	Recd 7130.586 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 83,142.63
12/08/21	Recd 573.762 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 6,690.06
12/10/21	Recd 265.252 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 3,096.63
12/10/21	Recd 87.664 Shs As A Reinvested Div At $ 11.630 Per Sh	0.00	0.00	- 1,019.53
		0.00	0.00	- 277,771.46

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
	· Columbia Short Term Bond Fund Adv *19766B315*			
12/29/21	Purchased 9980.040 Shs 12/29/21	0.00	0.00	- 100,000.00
01/05/22	Recd 218.131 Shs As A Reinvested Div At $ 10.020 Per Sh	0.00	0.00	- 2,185.67
02/02/22	Recd 315.735 Shs As A Reinvested Div At $ 9.940 Per Sh	0.00	0.00	- 3,138.41
03/02/22	Recd 315.190 Shs As A Reinvested Div At $ 9.860 Per Sh	0.00	0.00	- 3,107.77
03/31/22	Purchased 10266.940 Shs 03/30/22	0.00	0.00	- 100,000.00
04/04/22	Recd 335.370 Shs As A Reinvested Div At $ 9.740 Per Sh	0.00	0.00	- 3,266.50
05/05/22	Recd 367.999 Shs As A Reinvested Div At $ 9.540 Per Sh	0.00	0.00	- 3,547.51
		0.00	0.00	- 215,245.86
	· Columbia Total Return Bond Fund Adv *19766M774*			
01/04/22	Recd 84.636 Shs As A Reinvested Div At $ 37.210 Per Sh	0.00	0.00	- 3,149.29
02/02/22	Recd 127.993 Shs As A Reinvested Div At $ 36.290 Per Sh	0.00	0.00	- 4,644.85
03/07/22	Recd 135.782 Shs As A Reinvested Div At $ 35.660 Per Sh	0.00	0.00	- 4,841.99
04/04/22	Recd 141.078 Shs As A Reinvested Div At $ 34.410 Per Sh	0.00	0.00	- 4,854.49
05/05/22	Recd 133.750 Shs As A Reinvested Div At $ 32.810 Per Sh	0.00	0.00	- 4,388.33
		0.00	0.00	- 21,878.95
	· Federated Hermes Institutional High Yield Bond Fund *314205300*			
06/02/21	Recd 384.484 Shs As A Reinvested Div At $ 9.950 Per Sh	0.00	0.00	- 3,825.62
06/02/21	Purchased 2510.040 Shs 06/01/21	0.00	0.00	- 25,000.00
07/02/21	Recd 394.244 Shs As A Reinvested Div At $ 10.050 Per Sh	0.00	0.00	- 3,962.15
07/02/21	Purchased 1242.545 Shs 07/01/21	0.00	0.00	- 12,500.00

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
08/03/21	Recd 396.265 Shs As A Reinvested Div At $ 10.030 Per Sh	0.00	0.00	-3,974.54
08/31/21	Purchased 2991.027 Shs 08/30/21	0.00	0.00	-30,000.00
09/02/21	Recd 399.179 Shs As A Reinvested Div At $ 10.040 Per Sh	0.00	0.00	-3,997.72
10/04/21	Recd 413.986 Shs As A Reinvested Div At $ 10.000 Per Sh	0.00	0.00	-4,139.86
11/02/21	Recd 412.607 Shs As A Reinvested Div At $ 9.910 Per Sh	0.00	0.00	-4,088.94
12/02/21	Recd 423.057 Shs As A Reinvested Div At $ 9.780 Per Sh	0.00	0.00	-4,137.50
01/04/22	Recd 415.983 Shs As A Reinvested Div At $ 9.930 Per Sh	0.00	0.00	-4,130.71
02/02/22	Recd 427.367 Shs As A Reinvested Div At $ 9.640 Per Sh	0.00	0.00	-4,121.75
03/03/22	Recd 443.211 Shs As A Reinvested Div At $ 9.510 Per Sh	0.00	0.00	-4,214.94
04/04/22	Recd 453.105 Shs As A Reinvested Div At $ 9.390 Per Sh	0.00	0.00	-4,254.66
05/05/22	Recd 476.508 Shs As A Reinvested Div At $ 8.990 Per Sh	0.00	0.00	-4,283.81
		0.00	**0.00**	**-116,632.20**
	- TCW Emerging Markets Income Fund Class I #4721 *87234N765*			
06/02/21	Recd 440.356 Shs As A Reinvested Div of $ 8.200 Per Sh	0.00	0.00	-3,610.92
06/02/21	Purchased 1218.027 Shs 06/01/21	0.00	0.00	-10,000.00
07/02/21	Recd 448.289 Shs As A Reinvested Div of $ 9.200 Per Sh	0.00	0.00	3,675.97
07/02/21	Purchased 3052.503 Shs 07/01/21	0.00	0.00	-25,000.00
08/03/21	Recd 439.597 Shs As A Reinvested Div of $ 8.170 Per Sh	0.00	0.00	-3,591.51
08/31/21	Purchased 2430.134 Shs 08/30/21	0.00	0.00	-20,000.00
09/02/21	Recd 447.676 Shs As A Reinvested Div of $ 8.220 Per Sh	0.00	0.00	-3,679.90
10/04/21	Recd 459.159 Shs As A Reinvested Div of $ 7.940 Per Sh	0.00	0.00	-3,645.72
11/03/21	Recd 452.399 Shs As A Reinvested Div of $ 7.850 Per Sh	0.00	0.00	-3,551.33

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
12/02/21	Recd 459.496 Shs As A Reinvested Div of $ 7.600 Per Sh	0.00	0.00	- 3,492.17
12/29/21	Purchased 3880.983 Shs 12/28/21	0.00	0.00	- 30,000.00
12/31/21	Recd 469.819 Shs As A Reinvested Div of $ 7.700 Per Sh	0.00	0.00	- 3,617.61
02/02/22	Recd 472.015 Shs As A Reinvested Div of $ 7.480 Per Sh	0.00	0.00	- 3,530.67
03/07/22	Recd 493.426 Shs As A Reinvested Div of $ 7.070 Per Sh	0.00	0.00	- 3,417.82
03/31/22	Purchased 4957.507 Shs 03/30/22	0.00	0.00	- 35,000.00
04/04/22	Recd 486.361 Shs As A Reinvested Div of $ 7.060 Per Sh	0.00	0.00	- 3,433.71
05/05/22	Recd 502.653 Shs As A Reinvested Div of $ 6.620 Per Sh	0.00	0.00	- 3,327.56
		0.00	**0.00**	**- 162,574.69**

- Vanguard Total Bd Mkt Idx Instl O #222
921937504

06/01/21	Recd 269.156 Shs As A Reinvested Div At $ 11.240 Per Sh	0.00	0.00	- 3,250.11
06/02/21	Purchased 4452.360 Shs 06/01/21	0.00	0.00	- 50,000.00
06/29/21	Purchased 2654.867 Shs 06/28/21	0.00	0.00	- 30,000.00
07/01/21	Recd 297.083 Shs As A Reinvested Div At $ 11.310 Per Sh	0.00	0.00	- 3,360.01
07/02/21	Purchased 5526.063 Shs 07/01/21	0.00	0.00	- 62,500.00
08/02/21	Recd 312.382 Shs As A Reinvested Div At $ 11.430 Per Sh	0.00	0.00	- 3,570.53
09/01/21	Recd 313.448 Shs As A Reinvested Div At $ 11.390 Per Sh	0.00	0.00	- 3,570.17
10/01/21	Recd 304.778 Shs As A Reinvested Div At $ 11.270 Per Sh	0.00	0.00	- 3,434.85
11/01/21	Recd 314.396 Shs As A Reinvested Div At $ 11.250 Per Sh	0.00	0.00	- 3,536.96
12/01/21	Recd 316.245 Shs As A Reinvested Div At $ 11.270 Per Sh	0.00	0.00	- 3,564.03
12/23/21	Recd 307.268 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	- 3,444.47
01/03/22	Recd 327.916 Shs As A Reinvested Div At $ 11.190 Per Sh	0.00	0.00	- 3,669.40
02/01/22	Recd 331.671 Shs As A Reinvested Div At $ 10.930 Per Sh	0.00	0.00	- 3,625.16

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
03/07/22	Recd 319.049 Shs As A Reinvested Div At $ 10.790 Per Sh	0.00	0.00	-3,442.54
04/01/22	Recd 363.358 Shs As A Reinvested Div At $ 10.460 Per Sh	0.00	0.00	-3,800.72
04/01/22	Recd 140.565 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	-1,470.31
05/05/22	Recd 351.195 Shs As A Reinvested Div At $ 10.040 Per Sh	0.00	0.00	-3,526.00
		0.00	**0.00**	**-189,765.26**
-	Vanguard Sht Term Invt Grade Adm #539 *922031836*			
06/01/21	Recd 280.071 Shs As A Reinvested Div At $ 10.990 Per Sh	0.00	0.00	-3,077.99
06/02/21	Purchased 4553.734 Shs 06/01/21	0.00	0.00	-50,000.00
06/29/21	Purchased 2737.226 Shs 06/28/21	0.00	0.00	-30,000.00
07/01/21	Recd 277.278 Shs As A Reinvested Div At $ 10.960 Per Sh	0.00	0.00	-3,038.98
07/02/21	Purchased 2281.022 Shs 07/01/21	0.00	0.00	-25,000.00
08/02/21	Recd 293.168 Shs As A Reinvested Div At $ 10.990 Per Sh	0.00	0.00	-3,222.14
08/31/21	Purchased 5469.462 Shs 08/30/21	0.00	0.00	-60,000.00
09/01/21	Recd 313.294 Shs As A Reinvested Div At $ 10.970 Per Sh	0.00	0.00	-3,436.73
09/28/21	Purchased 6861.848 Shs 09/27/21	0.00	0.00	-75,000.00
10/01/21	Recd 320.558 Shs As A Reinvested Div At $ 10.930 Per Sh	0.00	0.00	-3,503.70
11/01/21	Recd 325.720 Shs As A Reinvested Div At $ 10.860 Per Sh	0.00	0.00	-3,537.20
12/01/21	Recd 331.713 Shs As A Reinvested Div At $ 10.820 Per Sh	0.00	0.00	-3,589.13
12/29/21	Purchased 9259.259 Shs 12/28/21	0.00	0.00	-100,000.00
12/30/21	Recd 868.637 Shs As A Reinvested Capital Gains Distribution	0.00	0.00	-9,561.73
01/03/22	Recd 323.179 Shs As A Reinvested Div At $ 10.770 Per Sh	0.00	0.00	-3,480.64
02/01/22	Recd 307.791 Shs As A Reinvested Div At $ 10.630 Per Sh	0.00	0.00	-3,271.62
03/07/22	Recd 332.249 Shs As A Reinvested Div At $ 10.530 Per Sh	0.00	0.00	-3,498.58
03/31/22	Purchased 9689.922 Shs 03/30/22	0.00	0.00	-100,000.00

Purchases

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash
04/01/22	Recd 333.327 Shs As A Reinvested Div At $ 10.320 Per Sh	0.00	0.00	- 3,439.93
05/02/22	Recd 392.584 Shs As A Reinvested Div At $ 10.170 Per Sh	0.00	0.00	- 3,992.68
		0.00	0.00	- 490,651.28
	Total Fixed Income Funds	0.00	0.00	- 1,750,341.16
	Total Fixed Income	0.00	0.00	- 1,750,341.16
	Cash Equivalent			
	- BMO Govt Money Market Fd Y # 605 *09658L786*			
05/31/22	Purchases (24) 05/01/21 To 05/31/22	0.00	0.00	- 1,705,112.25
	- Federated Hermes Government *60934N104*			
05/31/22	Purchases (14) 05/01/21 To 05/31/22	0.00	0.00	- 1,201,059.01
	Total Cash Equivalent	0.00	0.00	- 2,906,171.26
	Total Purchases	0.00	0.00	- 5,449,294.46

Sales

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash	Cost	Realized Gain/Loss
	Equity					
	Equity Funds					
	- BMO Lgm Emerging Markets Equity Fund Class I #754 *09658L469*					
12/08/21	Long Term Capital Gains Dist of $ 4.555 Per Sh on 31.479 Sh	0.00	0.00	143,416.06	0.00	143,416.06
	- Dodge & Cox International Stock Fund #1048 *256206103*					
06/29/21	Sold 606.428 Shs 06/28/21	0.00	0.00	30,000.00	- 18,677.98	11,322.02
03/31/22	Sold 1046.025 Shs 03/30/22	0.00	0.00	50,000.00	- 33,779.20	16,220.80
		0.00	**0.00**	**80,000.00**	**- 52,457.18**	**27,542.82**
	- MFS International Intrinsic Value Fund Class I #867 *55273E822*					
12/10/21	Long Term Capital Gains Dist of $ 3.432 Per Sh on 12.749 Sh	0.00	0.00	43,757.07	0.00	43,757.07
12/10/21	Short Term Capital Gains Dist of $ .195 Per Sh on 12.749 Sh	0.00	0.00	2,492.47	0.00	2,492.47
12/29/21	Sold 355.240 Shs 12/28/21	0.00	0.00	20,000.00	- 16,490.24	3,509.76
		0.00	**0.00**	**66,259.54**	**- 16,490.24**	**49,769.30**
	- T Rowe Price International Discovery Fund Class I #436 *77956H377*					
12/17/21	Long Term Capital Gains Dist of $10.270 Per Sh on 3.586 Sh	0.00	0.00	36,837.11	0.00	36,837.11
12/17/21	Short Term Capital Gains Dist of $ 2.830 Per Sh on 3.586 Sh	0.00	0.00	10,150.83	0.00	10,150.83
		0.00	**0.00**	**46,987.94**	**0.00**	**46,987.94**

Sales

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash	Cost	Realized Gain/Loss
	- Vanguard Developed Markets Index Fund - Adm #127 *921943809*					
06/29/21	Sold 1799.640 Shs 06/28/21	0.00	0.00	30,000.00	- 21,217.75	8,782.25
	- Vanguard Institutional Index Fd #94 *922040100*					
12/29/21	Sold 238.402 Shs 12/28/21	0.00	0.00	100,000.00	- 58,172.47	41,827.53
12/30/21	Long Term Capital Gains Dist of $10.193 Per Sh on 5,947 Sh	0.00	0.00	60,565.36	0.00	60,565.36
12/30/21	Short Term Capital Gains Dist of $ .398 Per Sh on 5,947 Sh	0.00	0.00	2,369.95	0.00	2,369.95
03/23/22	Long Term Capital Gains Dist of $ 1.996 Per Sh on 6,122 Sh	0.00	0.00	12,220.03	0.00	12,220.03
03/23/22	Short Term Capital Gains Dist of $ .051 Per Sh on 6,122 Sh	0.00	0.00	312.86	0.00	312.86
		0.00	0.00	175,474.22	- 58,172.47	117,301.75
	- Vanguard Mid Cap Index Fund Class I #864 *922908835*					
06/28/21	Sold 921.801 Shs 06/28/21	0.00	0.00	60,000.00	- 18,591.02	41,408.98
09/28/21	Sold 1122.586 Shs 09/27/21	0.00	0.00	75,000.00	- 22,838.47	52,161.53
		0.00	0.00	135,000.00	- 41,429.49	93,570.51
	Total Equity Funds	0.00	0.00	677,137.76	- 189,767.13	487,370.63
	Total Equity	0.00	0.00	677,137.76	- 189,767.13	487,370.63
	Fixed Income					
	Fixed Income Funds					

Sales

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash	Cost	Realized Gain/Loss
	- BMO TCH Core Plus Bond Fund Class I #796 *09658L885*					
12/08/21	Long Term Capital Gains Dist of $ .447 Per Sh on 186,835 Sh	0.00	0.00	83,142.63	0.00	83,142.63
12/08/21	Short Term Capital Gains Dist of $ .036 Per Sh on 186,835 Sh	0.00	0.00	6,690.06	0.00	6,690.06
12/16/21	Long Term Capital Gains Dist of $ .016 Per Sh on 193,539 Sh	0.00	0.00	3,096.63	0.00	3,096.63
		0.00	**0.00**	**92,929.32**	**0.00**	**92,929.32**
	- Columbia Total Return Bond Fund Adv *19766M774*					
03/31/22	Sold 9347.889 Shs 03/30/22	0.00	0.00	115,000.00	-123,425.47	-8,425.47
	- Federated Hermes Institutional High Yield Bond Fund *314205300*					
09/28/21	Sold 2495.010 Shs 09/27/21	0.00	0.00	25,000.00	24,950.10	49.90
	- Vanguard Total Bd Mkt Idx Instl Cl #222 *921937504*					
12/23/21	Long Term Capital Gains Dist of $ .017 Per Sh on 201,078 Sh	0.00	0.00	3,444.47	0.00	3,444.47
03/31/22	Sold 13862.333 Shs 03/30/22	0.00	0.00	145,000.00	-145,138.62	-138.62
04/21/22	Long Term Capital Gains Dist of $ .007 Per Sh on 188,501 Sh	0.00	0.00	1,470.31	0.00	1,470.31
		0.00	**0.00**	**149,914.78**	**-145,138.62**	**4,776.16**
	- Vanguard Sht Term Invt Grade Adm #539 *922031836*					
12/30/21	Long Term Capital Gains Dist of $ .039 Per Sh on 242,683 Sh	0.00	0.00	9,561.73	0.00	9,561.73
	Total Fixed Income Funds	**0.00**	**0.00**	**392,405.83**	**-293,514.19**	**98,891.64**

Sales

Date	Description *Asset ID (CUSIP)*	Commission	Other Costs	Net Cash	Cost	Realized Gain/Loss
	Total Fixed Income	**0.00**	**0.00**	**392,405.83**	**- 293,514.19**	**98,891.64**
	Cash Equivalent					
	- BMO Govt Money Market Fd Y # 605 *096598766*					
05/31/22	Sales (124) 06/01/21 To 06/31/22	0.00	0.00	2,768,811.57	-2,768,811.57	0.00
	- Federated Hermes Government *60934N104*					
05/31/22	Sales (52) 06/01/21 To 05/31/22	0.00	0.00	775,646.63	- 775,646.63	0.00
	Total Cash Equivalent	**0.00**	**0.00**	**3,544,458.20**	**- 3,544,458.20**	**0.00**
	Total Sales	**0.00**	**0.00**	**4,614,001.79**	**- 4,027,739.52**	**586,262.27**

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13 PENSION
EIN # 88-0399044
PLAN NUMBER: 001
SCHEDULE H, LINE 4j
SCHEDULE OF REPORTABLE TRANSACTIONS (5%)
MAY 31, 2022

(a) Identity of party involved	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
x	BMO Gov't Money Market Cl Y	$ 1,705,112	$	$	$	$ 1,705,112	$ 1,705,112	$
x	BMO Gov't Money Market Cl Y		2,768,812			2,768,812	2,768,812	
	Federated Hermes Government	1,201,059				1,201,059	1,201,059	
	Federated Hermes Government		775,647			775,647	775,647	
		$ 2,906,171	$ 3,544,459	$	$	$ 6,450,630	$ 6,450,630	$

See accompanying independent auditor's report

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13 PENSION
EIN # 88-0399044
PLAN NUMBER: 001
SCHEDULE H, LINE 4i -
SCHEDULE OF ASSETS HELD AT END OF YEAR
MAY 31, 2022

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	BNY Mellon Global Real Return Fund	Mutual funds	$ 653,375	$ 706,309
	Columbia Emerging Markets Fund	Mutual funds	620,972	392,529
	Columbia Short Term Bond Fund	Mutual funds	2,752,003	2,639,540
	Columbia Total Return Bond Fund	Mutual funds	2,170,483	1,890,388
	Comerica Trowel Trades S&P Index Fund	Mutual funds	687,465	3,226,893
	Dodge & Cox International Stock Fd	Mutual funds	596,033	691,729
	Federated Government Obligations Fund	Mutual funds	425,412	425,412
	Federated Institutional High Yield Bond Fund	Mutual funds	970,458	894,537
	MFS International Intrinsic Value	Mutual funds	667,710	646,626
	Natixis Gateway Fund Class N	Mutual funds	400,434	449,002
	T Rowe Price International Discovery Fund CL I	Mutual funds	274,281	265,177
	TCW Emerging Markets Income Fund CL I	Mutual funds	1,044,884	876,147
	Vanguard Short Term Invt Grade Adm	Mutual funds	2,738,058	2,608,151
	Vanguard Mid Cap Index Fd Cl I	Mutual funds	657,969	1,151,912
	Vanguard Institutional Index Fd	Mutual funds	1,606,716	2,167,194
	Vanguard Small-Cap Index Fund	Mutual funds	510,194	699,272
	Vanguard Developed Markets Index	Mutual funds	580,672	670,508
	Vanguard Total Bd Mkt Index Fd	Mutual funds	2,053,292	1,908,717
			$ 19,410,411	$ 22,310,043

Note: Column (a) parties-in-interest.

See accompanying independent auditor's report

BRICKLAYERS AND ALLIED CRAFTWORKERS LOCAL 13 PENSION
EIN # 88-0399044
PLAN NUMBER: 001
SCHEDULE H, LINE 4j
SCHEDULE OF REPORTABLE TRANSACTIONS (5%)
MAY 31, 2022

(a) Identity of party involved	(b) Description of asset	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expense incurred with transaction	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
x	BMO Gov't Money Market Cl Y	$ 1,705,112	$	$	$	$ 1,705,112	$ 1,705,112	$
x	BMO Gov't Money Market Cl Y		2,768,812			2,768,812	2,768,812	
	Federated Hermes Government	1,201,059				1,201,059	1,201,059	
	Federated Hermes Government		775,647			775,647	775,647	
		$ 2,906,171	$ 3,544,459	$	$	$ 6,450,630	$ 6,450,630	$

See accompanying independent auditor's report