

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>07/01/2021</u> and ending <u>06/30/2022</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>ILWU-PMA SAVINGS (401(K)) 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>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/1991</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>07/01/1991</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>07/01/1991</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>PACIFIC MARITIME ASSOCIATION</u> <u>555 MARKET STREET, THIRD FLOOR</u> <u>SAN FRANCISCO, CA 94105</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>94-1126322</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>415-576-3200</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>483000</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>94-1126322</u>	2c Plan Sponsor's telephone number <u>415-576-3200</u>	2d Business code (see instructions) <u>483000</u>	
2b Employer Identification Number (EIN) <u>94-1126322</u>					
2c Plan Sponsor's telephone number <u>415-576-3200</u>					
2d Business code (see instructions) <u>483000</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.	03/20/2023	MICHAEL H WECHSLER
	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

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	17360
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)	15221
a(2) Total number of active participants at the end of the plan year		6a(2)	16930
b Retired or separated participants receiving benefits.....		6b	591
c Other retired or separated participants entitled to future benefits		6c	1243
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	18764
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	318
f Total. Add lines 6d and 6e		6f	19082
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	17094
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	1
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2T			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)	

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE 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 07/01/2021 and ending 06/30/2022		
A Name of plan ILWU-PMA SAVINGS (401(K)) PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 PACIFIC MARITIME ASSOCIATION	D Employer Identification Number (EIN) 94-1126322	

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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(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)

PRICEWATERHOUSECOOPERS LLP

13-4008324

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	117495	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALAN D BILLER ASSOCIATES INC

94-2854958

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 50	NONE	60000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

QDRO CONSULTANTS COMPANY, LLC

34-1820650

(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?
12 50	NONE	8850	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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 60 64 65	RECORDKEEPER	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BARON GROWTH - DST SYSTEMS INC 43-1581814	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BARON GROWTH INST - DST SYSTEMS IN 43-1581814	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
CALVERT EQUITY I - DST ASSET MANAG 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
DODGE&COX INTL STK I - DST ASSET M 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
OAKMARK SELECT INV - DST ASSET MAN 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PAX SUSTN ALLOC INST - BNY MELLON 301 BELLEVUE PARKWAY WILMINGTON, DE 19809	0.10%	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 07/01/2021 and ending 06/30/2022

A Name of plan <u>ILWU-PMA SAVINGS (401(K)) PLAN</u>	B Three-digit plan number (PN) <u>002</u>	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>PACIFIC MARITIME ASSOCIATION</u>	D Employer Identification Number (EIN) <u>94-1126322</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: FID FRDM BLND 2035 T

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

c EIN-PN <u>20-4659714-092</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>116977735</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2055 T

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

c EIN-PN <u>20-4659714-113</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>10933726</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2065 T

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

c EIN-PN <u>20-4659714-168</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>818180</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2045 T

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

c EIN-PN <u>20-4659714-094</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>52551743</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2020 T

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

c EIN-PN <u>20-4659714-089</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>103123459</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLEND INC T

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

c EIN-PN <u>20-4659714-085</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>9361139</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2010 T

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

c EIN-PN <u>20-4659714-087</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>19147616</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2040 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-093	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 118970635
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2005 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-086	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4228442
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2030 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-091	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 182495792
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2050 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-095	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38219574
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2025 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-090	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 111151324
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2015 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-088	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 17353916
a Name of MTIA, CCT, PSA, or 103-12 IE: FID MID CAP STK POOL		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-144	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 58435551
a Name of MTIA, CCT, PSA, or 103-12 IE: MIP II CL 3		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-025	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 341008746
a Name of MTIA, CCT, PSA, or 103-12 IE: FID GROWTH CO POOL		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-135	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 162018829
a Name of MTIA, CCT, PSA, or 103-12 IE: FID FRDM BLND 2060 T		
b Name of sponsor of entity listed in (a): FIAM TRUST COMPANY		
c EIN-PN 20-4659714-147	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2993358

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
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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 **07/01/2021** and ending **06/30/2022**

A Name of plan ILWU-PMA SAVINGS (401(K)) PLAN	B Three-digit plan number (PN) ►	002
C Plan sponsor's name as shown on line 2a of Form 5500 PACIFIC MARITIME ASSOCIATION	D Employer Identification Number (EIN) 94-1126322	

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	11125	51336
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	29685329	32412069
(2) Participant contributions.....	1b(2)	4790202	5163022
(3) Other	1b(3)	1770120	46790
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	1713672
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	182489830	138620102
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts.....	1c(9)	1527939205	1349789765
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1043382661	914493174
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	2790068472	2442289930

Liabilities

g Benefit claims payable	1g	32143	106382
h Operating payables	1h	153480	140136
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	897440	124834
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1083063	371352

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	2788985409	2441918578
---	-----------	------------	------------

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)	32415368	
(B) Participants	2a(1)(B)	140017679	
(C) Others (including rollovers).....	2a(1)(C)	3805845	
(2) Noncash contributions.....	2a(2)	0	176238892
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	3010	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3010
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	1824275	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	34765646	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		36589921
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	47805203	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	35322425	
(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)	0	
(B) Other	2b(5)(B)	-50636189	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-50636189

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		-223663420
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		-146086219
c Other income.....	2c		239399
d Total income. Add all income amounts in column (b) and enter total.....	2d		-194831828
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	152035147	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		152035147
f Corrective distributions (see instructions).....	2f		3691
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	196165	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other.....	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		196165
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		152235003
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-347066831
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

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: PRICEWATERHOUSECOOPERS LLP

(2) EIN: 13-4008324

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		5000000
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.)			
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 _____.

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 07/01/2021 and ending 06/30/2022

A Name of plan ILWU-PMA SAVINGS (401(K)) PLAN	B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 PACIFIC MARITIME ASSOCIATION	D Employer Identification Number (EIN) 94-1126322

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	0
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): 04-6568107		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

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

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

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

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

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

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

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

14a

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

14b

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

14c

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

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

15a

b The corresponding number for the second preceding plan year.....

15b

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

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

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

ILWU-PMA Savings (401(k)) Plan

**Financial Statements and Supplemental Schedule
June 30, 2022 and 2021**

ILWU-PMA Savings (401(k)) Plan

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* Note: Other schedules required by 29 CFR Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.



Report of Independent Auditors

To the Administrator of the ILWU-PMA Savings (401(k)) Plan

Opinion

We have audited the accompanying financial statements of the ILWU-PMA Savings (401(k)) 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 June 30, 2022 and 2021, and the related statements of changes in net assets available for benefits for the years then ended, including the related notes (collectively referred to as the "financial statements").

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of June 30, 2022 and 2021, 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 audit in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. 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 the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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



Auditors' Responsibilities for the Audit of the Financial Statements

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

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

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

Supplemental Schedule Required by ERISA

Our audit was conducted for the purpose of forming an opinion on the financial statements as a whole. Schedule H, line 4i - Schedule of Assets (Held at End of Year) as of June 30, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is 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 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 US GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its 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 supplemental schedule 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.

PricewaterhouseCoopers LLP

San Francisco, CA
February 23, 2023

ILWU-PMA Savings (401(k)) Plan
Statements of Net Assets Available for Benefits
June 30, 2022 and 2021

	2022	2021
Assets		
Cash	\$ 51,336	\$ 11,125
Investments, at fair value		
Interest-bearing cash	1,713,672	-
Commingled pooled funds	1,349,789,765	1,527,939,205
Common stocks	138,620,102	182,489,830
Mutual funds	914,493,174	1,043,382,661
Total investments	<u>2,404,616,713</u>	<u>2,753,811,696</u>
Receivables		
Employer contributions	32,412,069	29,685,329
Participants contributions	5,163,022	4,790,202
Securities settlement	-	1,728,514
Interest and dividends	46,790	41,606
Total receivables	<u>37,621,881</u>	<u>36,245,651</u>
Total assets	<u>2,442,289,930</u>	<u>2,790,068,472</u>
Liabilities		
Accrued expenses and other payables	264,970	276,671
Securities settlement payable	106,382	806,392
Total liabilities	<u>371,352</u>	<u>1,083,063</u>
Net assets available for benefits	<u>\$ 2,441,918,578</u>	<u>\$ 2,788,985,409</u>

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

ILWU-PMA Savings (401(k)) Plan
Statements of Changes in Net Assets Available for Benefits
Years Ended June 30, 2022 and 2021

	2022	2021
Additions to net assets attributed to		
Investment income, net		
Net (depreciation) appreciation in fair value of investments	\$ (412,061,785)	\$ 612,719,054
Interest and dividends	40,991,065	33,687,535
	<u>(371,070,720)</u>	<u>646,406,589</u>
Contributions		
Participants	143,823,524	130,743,918
Employers	32,415,368	29,731,535
Total contributions	<u>176,238,892</u>	<u>160,475,453</u>
Total additions, net	<u>(194,831,828)</u>	<u>806,882,042</u>
Deductions from net assets attributed to		
Benefits paid to participants	152,038,838	209,328,853
Administrative expense	196,165	252,184
Total deductions	<u>152,235,003</u>	<u>209,581,037</u>
Net (decrease) increase in net assets available for benefits	<u>(347,066,831)</u>	<u>597,301,005</u>
Net assets available for benefits		
Beginning of year	<u>2,788,985,409</u>	<u>2,191,684,404</u>
End of year	<u>\$ 2,441,918,578</u>	<u>\$ 2,788,985,409</u>

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

ILWU-PMA Savings (401(k)) Plan

Notes to Financial Statements

June 30, 2022 and 2021

1. Description of the Plan

The following description of the ILWU-PMA Savings (401(k)) Plan (the "Plan") provides only general information. Participants should refer to the Summary Plan Description for more complete information.

General

The Plan has been established to provide eligible dockworkers with an opportunity to participate in tax deferred savings. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Eligibility

Registered longshore workers, marine clerks, foremen, walking bosses and watchmen covered under the Pacific Coast Longshore and Clerks' Agreement, Pacific Coast Walking Bosses' and Foremen's Agreement, and/or Watchmen's Agreement (collectively, the "Agreements") are generally eligible for the Plan. Registered dockworkers who are employees of affiliate International Longshore and Warehouse Union ("ILWU") union employers as well as area arbitrators are also generally eligible to participate in the Plan.

Vesting

Each participant in the Plan is vested in 100% of his or her savings trust account attributable to elective employee and employer contributions and any earnings and losses thereon at all times.

Contributions

Employee contributions to the Plan are made through weekly employee payroll deductions based on each employee's elective deferral contributions subject to limitations imposed by the Internal Revenue Service ("IRS").

Annual non-elective employer contributions to employees are made in accordance with qualifying requirements and maximum limits.

Payment of Benefits

On termination of service due to retirement, deregistration or withdrawal from the industry, a participant may elect (but is not required) to receive either a lump-sum amount equal to the value of the participant's account or partial distributions, including annual installments. For termination of service due to death, a participant's beneficiary may receive the value of his or her account as a lump-sum distribution. Hardship withdrawals of the participant's employee salary deferral contributions are also permitted under the Plan.

The Coronavirus Aid, Relief, and Economic Security Act (CARES Act), effective March 27, 2020, provides for expanded distribution options and favorable tax treatment of coronavirus-related distributions from the Plan. Under the CARES Act, a participant may withdraw up to \$100,000 from the Plan through December 31, 2021 without incurring a 10% early withdrawal penalty if they are under age 59½.

Administration

The Plan is sponsored by Pacific Maritime Association ("PMA") and administered by the ILWU-PMA Savings (401(k)) Plan Committee (the "Committee"). Fidelity Management Trust Company serves as the trustee and custodian. Fidelity Workplace Services LLC serves as the recordkeeper. Expenses paid for the audit of the Plan are party-in-interest transactions under ERISA and are

ILWU-PMA Savings (401(k)) Plan

Notes to Financial Statements

June 30, 2022 and 2021

reflected on the Statement of Changes in Net Assets Available for Benefits as administrative expenses.

Investment Management Fees

Investment management fees, when applicable, are included as investment expenses in the Statements of Changes in Net Assets Available for Benefits. These transactions are party-in-interest transactions under ERISA.

Plan Termination

PMA intends to continue the Plan for as long as a collective bargaining relationship exists between the ILWU and PMA. If the ILWU and PMA shall by agreement terminate or partially terminate the Plan, the Committee shall supervise the winding-up of the Plan and the full distribution of benefits to plan participants.

2. Summary of Significant Accounting Policies

Basis of Accounting

The Plan's financial statements are prepared on the accrual basis of accounting and in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Use of Estimates

The preparation of financial statements in conformity with GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures at the date of the financial statements and the reported amounts of changes in net assets available for benefits during the reporting period. While Plan management uses their best estimates and judgments, actual results could differ from those estimates.

Investment Valuation and Income Recognition

In accordance with GAAP, investments held by a defined-contribution plan are required to be reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Committee determines the Plan's valuation policies using information provided by the custodian. Refer to Note 3 for a discussion of fair value measurement.

Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses on investments sold are recorded as sales proceeds less investment costs at the sales trade dates. Interest income is recorded as earned on the accrual basis. Dividend income is recorded on the ex-dividend date. The Plan presents, in the Statements of Changes in Net Assets Available for Benefits, the net appreciation or depreciation in the fair value of its investments which consists of the realized gains or losses and the unrealized appreciation or depreciation on those investments.

All investments are participant directed, and common stocks are managed in a separate account, part of the Voya Investment Management, US Large Cap Core Growth fund, a participant directed fund.

Payment of Benefits

Benefits are recorded when paid.

Securities Settlement Receivables and Payables

Balances in securities settlement receivables and payables represent open investment trades that have yet to be settled as of fiscal year end.

ILWU-PMA Savings (401(k)) Plan
Notes to Financial Statements
June 30, 2022 and 2021

3. 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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under the framework are described as follows:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- 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; or inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specific (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.

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

The following tables summarize the valuation of the Plan's investments per the FASB ASC 820 fair value hierarchy levels at June 30, 2022 and 2021:

Assets at Fair Value as of June 30, 2022			
		Investments measured at	
	Level 1	net asset value ¹	Total
Interest-bearing cash	\$ -	\$ 1,713,672	\$ 1,713,672
Commingled pooled funds	-	1,349,789,765	1,349,789,765
Common stocks	138,620,102	-	138,620,102
Mutual funds	914,493,174	-	914,493,174
Total	<u>\$ 1,053,113,276</u>	<u>\$ 1,351,503,437</u>	<u>\$ 2,404,616,713</u>

ILWU-PMA Savings (401(k)) Plan
Notes to Financial Statements
June 30, 2022 and 2021

	Assets at Fair Value as of June 30, 2021		
	Level 1	Investments measured at net asset value ¹	Total
Commingled pooled funds	\$ -	\$ 1,527,939,205	\$ 1,527,939,205
Common stocks	182,489,830	-	182,489,830
Mutual funds	1,043,382,661	-	1,043,382,661
Total	<u>\$ 1,225,872,491</u>	<u>\$ 1,527,939,205</u>	<u>\$ 2,753,811,696</u>

¹ In accordance with GAAP, certain investments that are measured at fair value using the net asset value (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.

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 June 30, 2022 and 2021.

Level 1 Valuation Techniques

The valuation techniques used to measure assets classified within Level 1 of the fair value hierarchy are as follows:

Common stocks and Mutual funds

The Plan invests in common stocks and publicly traded mutual funds valued at the closing price or end of day net asset value reported on the active market on which the individual securities are traded at the Plan's year-end.

Certain Investments Measured at Fair Value Using the Net Asset Value per Share (or its Equivalent) Practical Expedient Not Categorized in the Fair Value Hierarchy.

The following is a description of the Plan's investments for which NAV is used as a practical expedient for fair value measurement:

Interest-bearing cash

Interest-bearing cash represents cash invested in the State Street Bank and Trust Company Government Short Term Investment Fund ("STIF fund") which primarily invests in securities issued by the U.S. government or its agencies and in repurchase agreements fully collateralized by U.S. treasuries, government agency securities, equity securities, municipal bonds and/or high quality corporate bonds. The STIF is subject to an annual calendar year-end audit. The Plan's interest in the STIF is valued based on the net asset value provided by State Street Bank & Trust at the Plan's year-end, which the Plan believes is a reasonable estimate of fair value. The STIF fund has no restrictions or waiting period for redemptions, and participants can transact every business day.

Commingled pooled funds

The Commingled Pooled Funds ("CPF") were established under Declarations of Trust for the Fidelity Group Trust for Employee Benefit Plans ("FG Trust") dated April 23, 1981, and FIAM Group Trust for Employee Benefit Plans ("FIAM Trust") dated May 1, 2006, both Trusts have been amended thereafter from time to time.

ILWU-PMA Savings (401(k)) Plan

Notes to Financial Statements

June 30, 2022 and 2021

Fidelity Institutional Asset Management Trust Company ("FIAMTC"), a New Hampshire trust company, is the Trustee of the FIAM Trust. The net assets of the FIAM Blend Target Date Commingled Pools include the FIAM Blend Target Date Income Commingled Pool, FIAM Blend Target Date 2005 Commingled Pool, FIAM Blend Target Date 2010 Commingled Pool, FIAM Blend Target Date 2015 Commingled Pool, FIAM Blend Target Date 2020 Commingled Pool, FIAM Blend Target Date 2025 Commingled Pool, FIAM Blend Target Date 2030 Commingled Pool, FIAM Blend Target Date 2035 Commingled Pool, FIAM Blend Target Date 2040 Commingled Pool, FIAM Blend Target Date 2045 Commingled Pool, FIAM Blend Target Date 2050 Commingled Pool, FIAM Blend Target Date 2055 Commingled Pool, FIAM Blend Target Date 2060 Commingled Pool, and FIAM Blend Target Date 2065 (collectively "FIAM Portfolios"). The FIAM Portfolios are invested in a combination of equity, fixed-income and short-term funds and are managed by an affiliate of the FIAMTC, Geode Capital Management Trust Company, LLC ("Geode"). The investments are valued as of the last calendar day of the period using current market prices, quotations or currency exchange rates. In the event where the aforementioned valuation methods are not available or reliable, the Fair Value Committee, authorized by FIAMTC, will determine the FIAM Portfolio's fair value of its investments including debt securities, and futures contracts, using market or investment specific events including net asset value ("NAV").

FIAM trades are executed through the end of the last business day of the period. The NAV for processing unitholder transactions is calculated as of the close of business of the New York Stock Exchange, and included trades executed through the end of the prior business day.

Fidelity Management Trust Company ("FMTC"), a Massachusetts chartered trust company, is the Trustee of the FG Trust. The beneficial interest in the net assets of the Fidelity Growth Commingled Pool ("FGC"), Fidelity Mid-Cap Stock Commingled Pool ("FMC"), and the Fidelity Managed Income Portfolio II Class III ("MIP II") are represented by units. The NAV per unit for FGC, FMC and MIP II is determined each business day. Issues and redemptions of units are recorded, upon receipt of the unitholder's instructions in good order, based on the next determined NAV per unit normally each day.

All CPFs held by the Plan are subject to annual audits.

The investment objective of the FIAM is to seek high total return until its target retirement date, thereafter, to seek high current income, and as a secondary objective, capital appreciation.

The investment objective of the FGC is to provide capital appreciation over a market cycle relative to the Portfolio Index or other suitable growth index, through the active management of equities across a broad growth segment of the equity markets.

The investment objective of the FMC is to seek capital growth over a market cycle relative to the Portfolio Index.

The investment objective of the MIP II is to seek the preservation of capital and to provide a competitive level of income over time that is consistent with the preservation of capital.

ILWU-PMA Savings (401(k)) Plan

Notes to Financial Statements

June 30, 2022 and 2021

To achieve its investment objective, MIP II invests in assets (typically fixed-income securities or bond funds and may include derivative instruments such as futures contracts and swap agreements), enters into "wrap" contracts issued by third-parties, and invests in cash equivalents represented by shares in money market funds. Wrap contracts are designed to allow a stable value portfolio such as MIP II to maintain a constant NAV and to protect a portfolio in extreme unfavorable circumstances. FMTC seeks to minimize the exposure of MIP II to wrap credit risk through, among other means, diversification of the wrap contracts across an approved group of issuers. The MIP II's ability to receive amounts due pursuant to these contracts is dependent upon the issuers' ability to meet their financial obligations. The Plan's interest in the MIP II is fair valued at its relative contract value as provided by Fidelity Management Trust Company. Issues and redemptions of units are recorded, upon receipt of unitholder's instructions in good order, based on the next determined net asset value per unit normally each day. In unusual market conditions, in accordance with the Declaration of Trust, the Trustee may in its sole discretion, impose restrictions on issue and redemptions of units.

For all investments valued using NAV, the Plan exercises due diligence procedures in assessing the policies, procedures, and controls implemented by investment managers, as well as the financial information reported by the funds. This process includes, amongst other procedures, reviewing quarterly financial information provided by the funds and assessing the performance of the funds against applicable benchmarks. The values of the funds are based on the NAV reported by the investment manager of each fund at the Plan's year-end, which the Plan believes is a reasonable estimate of fair value.

The preceding 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.

4. Related Party and Party-In-Interest Transactions

Certain Plan investments are held in mutual funds and commingled pooled funds managed by Fidelity Management Trust Company. Fidelity is the custodian and trustee of the Plan's assets and, therefore, these investments represent exempt party-in-interest transactions. These investments total \$1,777,325,687 and \$1,998,307,959, respectively, as of June 30, 2022 and 2021.

5. Plan Tax Status

The Plan has received a favorable determination letter from the IRS dated August 24, 2015 as to the qualified status of the Plan under applicable sections of the Internal Revenue Code and Plan management believes that the Plan, as amended, continues to qualify and operate as designed. Accordingly, no federal or state income taxes have been recorded for unrelated business taxable income.

As required by accounting principles generally accepted in the United States of America, the Plan management has evaluated the tax positions taken by the Plan. The Plan management believes there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements of the Plan or that would not be sustained upon examination by the Internal Revenue Services. As of June 30, 2022, Plan management believes the Plan is no longer subject to income tax examinations for the years prior to 2018. There are currently no audits for any tax periods in progress.

ILWU-PMA Savings (401(k)) Plan
Notes to Financial Statements
June 30, 2022 and 2021

6. 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 participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

7. Subsequent Events

The Plan trustees have evaluated subsequent events through February 23, 2023, which is the date the financial statements were available to be issued.

The most recent Agreements between the ILWU and PMA expired on July 1, 2022. Benefits continue to be provided as required and the parties are in negotiations. Contributions and benefit payments may be impacted by Agreements under negotiation.

ILWU-PMA Savings (401(k)) Plan
Schedule H, Line 4i, Schedule of Assets (Held at End of Year)
June 30, 2022 Employer I.D. #94-1126322

(a) (b) Identity of Issue	(c) Description of Investment	(e) Current Value
Interest-bearing cash		
SSgA U.S. Government Short Term Investment Fund	Interest-bearing cash 0 units	\$ 1,713,672
Commingled pooled funds		
* Fidelity Freedom Blend 2005 Commingled Pool Class T	Commingled Pooled Fund 253,960 units	4,228,442
* Fidelity Freedom Blend 2010 Commingled Pool Class T	Commingled Pooled Fund 1,040,066 units	19,147,616
* Fidelity Freedom Blend 2015 Commingled Pool Class T	Commingled Pooled Fund 910,011 units	17,353,916
* Fidelity Freedom Blend 2020 Commingled Pool Class T	Commingled Pooled Fund 5,407,628 units	103,123,459
* Fidelity Freedom Blend 2025 Commingled Pool Class T	Commingled Pooled Fund 5,505,266 units	111,151,324
* Fidelity Freedom Blend 2030 Commingled Pool Class T	Commingled Pooled Fund 8,867,628 units	182,495,792
* Fidelity Freedom Blend 2035 Commingled Pool Class T	Commingled Pooled Fund 5,302,708 units	116,977,735
* Fidelity Freedom Blend 2040 Commingled Pool Class T	Commingled Pooled Fund 5,380,852 units	118,970,635
* Fidelity Freedom Blend 2045 Commingled Pool Class T	Commingled Pooled Fund 2,369,330 units	52,551,743
* Fidelity Freedom Blend 2050 Commingled Pool Class T	Commingled Pooled Fund 1,748,379 units	38,219,574
* Fidelity Freedom Blend 2055 Commingled Pool Class T	Commingled Pooled Fund 466,456 units	10,933,726
* Fidelity Freedom Blend 2060 Commingled Pool Class T	Commingled Pooled Fund 190,538 units	2,993,358
* Fidelity Freedom Blend 2065 Commingled Pool Class T	Commingled Pooled Fund 66,411 units	818,180
* Fidelity Freedom Blend Income Commingled Pool Class T	Commingled Pooled Fund 615,460 units	9,361,139
* Fidelity Growth Company Commingled Pool	Commingled Pooled Fund 4,618,553 units	162,018,829
* Fidelity Mid Cap Stock Commingled Pool	Commingled Pooled Fund 3,248,224 units	58,435,551
* Fidelity Managed Income Portfolio II - Class 3	Commingled Pooled Fund 341,008,746 units	341,008,746
Total commingled pooled funds		1,349,789,765
Mutual funds		
American Funds Washington Mutual Investors Fund - Class F	Mutual fund 2,570,694 units	\$ 130,411,327
Baron Growth Fund - Institutional Class	Mutual fund 996,278 units	85,400,972
Calvert Equity Portfolio Class I	Mutual fund 305,097 units	23,440,599
Dodge & Cox International Stock Fund	Mutual fund 944,456 units	40,186,618
* Fidelity 500 Index	Mutual fund 1,408,226 units	185,773,175
* Fidelity Diversified International Fund K	Mutual fund 3,366,437 units	37,973,413
* Fidelity Equity Income K	Mutual fund 458,773 units	28,682,510
* Fidelity Global ex U.S. Index Fund	Mutual fund 615,620 units	7,726,027
* Fidelity Government Money Market	Mutual fund 81,235,766 units	81,235,766
* Fidelity Large Cap Growth Index	Mutual fund 2,335,538 units	49,700,242
* Fidelity Low-Priced Stock	Mutual fund 2,725,863 units	36,444,789
Janus Henderson Small Cap Value	Mutual fund 2,062,131 units	43,634,686
Oakmark Select Fund - Class I	Mutual fund 1,067,656 units	53,841,903
Pax World Balanced Individual Investor Class Fund	Mutual fund 366,163 units	8,960,012
PIMCO All Asset Fund - Institutional Class	Mutual fund 188,710 units	2,068,266
PIMCO Income Fund - Institutional Class	Mutual fund 1,729,615 units	18,351,219
PIMCO Total Return Fund - Institutional Class	Mutual fund 8,715,225 units	78,437,026
Thornburg International Value Fund - Class R6	Mutual fund 105,233 units	2,224,624
Total mutual funds		914,493,174
Common stock		
Alphabet Inc CL A	Common stock 1,505 shares	\$ 3,279,786
Amazon.com Inc	Common stock 53,140 shares	5,643,999
Apple Inc	Common stock 94,915 shares	12,976,779
Applied Materials Inc	Common stock 24,698 shares	2,247,024
Arthur J. Gallagher and Co.	Common stock 16,040 shares	2,615,162
Astrzeneca PLC Spons ADR	Common stock 49,298 shares	3,257,119
Avantor Inc.	Common stock 75,961 shares	2,362,387
Bank of America Corporation	Common stock 94,033 shares	2,927,247
Blackstone Inc.	Common stock 21,903 shares	1,998,211
Broadcom Inc	Common stock 6,926 shares	3,364,720

ILWU-PMA Savings (401(k)) Plan
Schedule H, Line 4i, Schedule of Assets (Held at End of Year)
June 30, 2022 Employer I.D. #94-1126322

(a) (b) Identity of Issue	(c) Description of Investment	(e) Current Value
Caesars Entertainment Inc.	Common stock 31,400 shares	\$ 1,202,620
Cheniere Energy Inc.	Common stock 12,865 shares	1,711,431
Costco Wholesale Corp	Common stock 6,667 shares	3,195,360
Crowdstrike Holdings Inc.	Common stock 10,113 shares	1,704,647
CVS Health Corp	Common stock 25,525 shares	2,365,147
Deere & Co.	Common stock 9,187 shares	2,751,231
Dexcom Inc.	Common stock 27,500 shares	2,049,575
Disney (Walt) Co.	Common stock 19,905 shares	1,879,032
Dollar General Corporation	Common stock 11,822 shares	2,901,592
Estee Lauder Cos Inc CL A	Common stock 10,568 shares	2,691,353
Fedex Corp	Common stock 8,684 shares	1,968,750
Generac Holdings Inc.	Common stock 8,255 shares	1,738,338
Horizon Therapeutics PLC	Common stock 29,729 shares	2,371,185
Humana Inc.	Common stock 6,688 shares	3,130,452
JPMorgan Chase & Co	Common stock 26,475 shares	2,981,350
Lilly (Eli) & Co.	Common stock 12,711 shares	4,121,288
Mastercard Inc. CL A	Common stock 9,966 shares	3,144,074
Meta Platforms Inc. CL A	Common stock 21,590 shares	3,481,388
Microsoft Corp	Common stock 44,680 shares	11,475,164
Monster Beverage Corp	Common stock 28,680 shares	2,658,636
Morgan Stanley	Common stock 38,959 shares	2,963,222
Nike Inc CL B	Common stock 22,574 shares	2,307,063
Nvidia Corp	Common stock 15,445 shares	2,341,308
Parker Hannifin Corp	Common stock 8,991 shares	2,212,236
Pioneer Natural Resources Co	Common stock 17,442 shares	3,890,961
Plug Power Inc.	Common stock 86,360 shares	1,430,985
Regions Financial Corp	Common stock 71,170 shares	1,334,438
Royal Caribbean Cruises Ltd	Common stock 29,178 shares	1,018,604
Salesforce Inc	Common stock 14,844 shares	2,449,854
Tesla Inc.	Common stock 5,869 shares	3,952,302
Union Pacific Corp.	Common stock 12,000 shares	2,559,360
United Rentals Inc.	Common stock 8,343 shares	2,026,598
Valero Energy Corp.	Common stock 34,147 shares	3,629,143
VISA Inc CL A	Common stock 17,530 shares	3,451,482
Zoetis Inc CL A	Common stock 16,624 shares	2,857,499
Total common stock		138,620,102
Total investments		\$ 2,404,616,713

* Represents party-in-interest to the Plan

In accordance with the instructions related to Schedule H, Part IV, Line 4i of the Form 5500, column (d) has been omitted since all balances are participant directed.

ILWU-PMA Savings (401(k)) Plan
Schedule H, Line 4i, Schedule of Assets (Held at End of Year)
June 30, 2022 Employer I.D. #94-1126322

(a) (b) Identity of Issue	(c) Description of Investment	(e) Current Value
Interest-bearing cash		
SSgA U.S. Government Short Term Investment Fund	Interest-bearing cash 0 units	\$ 1,713,672
Commingled pooled funds		
* Fidelity Freedom Blend 2005 Commingled Pool Class T	Commingled Pooled Fund 253,960 units	4,228,442
* Fidelity Freedom Blend 2010 Commingled Pool Class T	Commingled Pooled Fund 1,040,066 units	19,147,616
* Fidelity Freedom Blend 2015 Commingled Pool Class T	Commingled Pooled Fund 910,011 units	17,353,916
* Fidelity Freedom Blend 2020 Commingled Pool Class T	Commingled Pooled Fund 5,407,628 units	103,123,459
* Fidelity Freedom Blend 2025 Commingled Pool Class T	Commingled Pooled Fund 5,505,266 units	111,151,324
* Fidelity Freedom Blend 2030 Commingled Pool Class T	Commingled Pooled Fund 8,867,628 units	182,495,792
* Fidelity Freedom Blend 2035 Commingled Pool Class T	Commingled Pooled Fund 5,302,708 units	116,977,735
* Fidelity Freedom Blend 2040 Commingled Pool Class T	Commingled Pooled Fund 5,380,852 units	118,970,635
* Fidelity Freedom Blend 2045 Commingled Pool Class T	Commingled Pooled Fund 2,369,330 units	52,551,743
* Fidelity Freedom Blend 2050 Commingled Pool Class T	Commingled Pooled Fund 1,748,379 units	38,219,574
* Fidelity Freedom Blend 2055 Commingled Pool Class T	Commingled Pooled Fund 466,456 units	10,933,726
* Fidelity Freedom Blend 2060 Commingled Pool Class T	Commingled Pooled Fund 190,538 units	2,993,358
* Fidelity Freedom Blend 2065 Commingled Pool Class T	Commingled Pooled Fund 66,411 units	818,180
* Fidelity Freedom Blend Income Commingled Pool Class T	Commingled Pooled Fund 615,460 units	9,361,139
* Fidelity Growth Company Commingled Pool	Commingled Pooled Fund 4,618,553 units	162,018,829
* Fidelity Mid Cap Stock Commingled Pool	Commingled Pooled Fund 3,248,224 units	58,435,551
* Fidelity Managed Income Portfolio II - Class 3	Commingled Pooled Fund 341,008,746 units	341,008,746
Total commingled pooled funds		1,349,789,765
Mutual funds		
American Funds Washington Mutual Investors Fund - Class F	Mutual fund 2,570,694 units	\$ 130,411,327
Baron Growth Fund - Institutional Class	Mutual fund 996,278 units	85,400,972
Calvert Equity Portfolio Class I	Mutual fund 305,097 units	23,440,599
Dodge & Cox International Stock Fund	Mutual fund 944,456 units	40,186,618
* Fidelity 500 Index	Mutual fund 1,408,226 units	185,773,175
* Fidelity Diversified International Fund K	Mutual fund 3,366,437 units	37,973,413
* Fidelity Equity Income K	Mutual fund 458,773 units	28,682,510
* Fidelity Global ex U.S. Index Fund	Mutual fund 615,620 units	7,726,027
* Fidelity Government Money Market	Mutual fund 81,235,766 units	81,235,766
* Fidelity Large Cap Growth Index	Mutual fund 2,335,538 units	49,700,242
* Fidelity Low-Priced Stock	Mutual fund 2,725,863 units	36,444,789
Janus Henderson Small Cap Value	Mutual fund 2,062,131 units	43,634,686
Oakmark Select Fund - Class I	Mutual fund 1,067,656 units	53,841,903
Pax World Balanced Individual Investor Class Fund	Mutual fund 366,163 units	8,960,012
PIMCO All Asset Fund - Institutional Class	Mutual fund 188,710 units	2,068,266
PIMCO Income Fund - Institutional Class	Mutual fund 1,729,615 units	18,351,219
PIMCO Total Return Fund - Institutional Class	Mutual fund 8,715,225 units	78,437,026
Thornburg International Value Fund - Class R6	Mutual fund 105,233 units	2,224,624
Total mutual funds		914,493,174
Common stock		
Alphabet Inc CL A	Common stock 1,505 shares	\$ 3,279,786
Amazon.com Inc	Common stock 53,140 shares	5,643,999
Apple Inc	Common stock 94,915 shares	12,976,779
Applied Materials Inc	Common stock 24,698 shares	2,247,024
Arthur J. Gallagher and Co.	Common stock 16,040 shares	2,615,162
Astrzeneca PLC Spons ADR	Common stock 49,298 shares	3,257,119
Avantor Inc.	Common stock 75,961 shares	2,362,387
Bank of America Corporation	Common stock 94,033 shares	2,927,247
Blackstone Inc.	Common stock 21,903 shares	1,998,211
Broadcom Inc	Common stock 6,926 shares	3,364,720

ILWU-PMA Savings (401(k)) Plan
Schedule H, Line 4i, Schedule of Assets (Held at End of Year)
June 30, 2022 Employer I.D. #94-1126322

(a) (b) Identity of Issue	(c) Description of Investment	(e) Current Value
Caesars Entertainment Inc.	Common stock 31,400 shares	\$ 1,202,620
Cheniere Energy Inc.	Common stock 12,865 shares	1,711,431
Costco Wholesale Corp	Common stock 6,667 shares	3,195,360
Crowdstrike Holdings Inc.	Common stock 10,113 shares	1,704,647
CVS Health Corp	Common stock 25,525 shares	2,365,147
Deere & Co.	Common stock 9,187 shares	2,751,231
Dexcom Inc.	Common stock 27,500 shares	2,049,575
Disney (Walt) Co.	Common stock 19,905 shares	1,879,032
Dollar General Corporation	Common stock 11,822 shares	2,901,592
Estee Lauder Cos Inc CL A	Common stock 10,568 shares	2,691,353
Fedex Corp	Common stock 8,684 shares	1,968,750
Generac Holdings Inc.	Common stock 8,255 shares	1,738,338
Horizon Therapeutics PLC	Common stock 29,729 shares	2,371,185
Humana Inc.	Common stock 6,688 shares	3,130,452
JPMorgan Chase & Co	Common stock 26,475 shares	2,981,350
Lilly (Eli) & Co.	Common stock 12,711 shares	4,121,288
Mastercard Inc. CL A	Common stock 9,966 shares	3,144,074
Meta Platforms Inc. CL A	Common stock 21,590 shares	3,481,388
Microsoft Corp	Common stock 44,680 shares	11,475,164
Monster Beverage Corp	Common stock 28,680 shares	2,658,636
Morgan Stanley	Common stock 38,959 shares	2,963,222
Nike Inc CL B	Common stock 22,574 shares	2,307,063
Nvidia Corp	Common stock 15,445 shares	2,341,308
Parker Hannifin Corp	Common stock 8,991 shares	2,212,236
Pioneer Natural Resources Co	Common stock 17,442 shares	3,890,961
Plug Power Inc.	Common stock 86,360 shares	1,430,985
Regions Financial Corp	Common stock 71,170 shares	1,334,438
Royal Caribbean Cruises Ltd	Common stock 29,178 shares	1,018,604
Salesforce Inc	Common stock 14,844 shares	2,449,854
Tesla Inc.	Common stock 5,869 shares	3,952,302
Union Pacific Corp.	Common stock 12,000 shares	2,559,360
United Rentals Inc.	Common stock 8,343 shares	2,026,598
Valero Energy Corp.	Common stock 34,147 shares	3,629,143
VISA Inc CL A	Common stock 17,530 shares	3,451,482
Zoetis Inc CL A	Common stock 16,624 shares	2,857,499
Total common stock		138,620,102
Total investments		\$ 2,404,616,713

* Represents party-in-interest to the Plan

In accordance with the instructions related to Schedule H, Part IV, Line 4i of the Form 5500, column (d) has been omitted since all balances are participant directed.