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

2022

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
BAC #1 SUPPLEMENTAL RETIREMENT FUND

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 05/01/1997

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
BOARD OF TRUSTEES OF BAC LOCAL 1 SUPPLEMENTAL RETIREMENT FUND

2002 LONDON ROAD
ROOM 300
DULUTH, MN 55812

2b Employer Identification Number (EIN)
41-1868381

2c Plan Sponsor's telephone number
218-728-4231

2d Business code (see instructions)
238210

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.	09/01/2023	ROGER KIVELA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	09/01/2023	STAN PACZYNSKI
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: **a** Sponsor's name **c** Plan Name	**4b** EIN **4d** PN	
5 Total number of participants at the beginning of the plan year	**5**	401
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)**	378
a(2) Total number of active participants at the end of the plan year	**6a(2)**	348
b Retired or separated participants receiving benefits	**6b**	24
c Other retired or separated participants entitled to future benefits	**6c**	5
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	377
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**.	**6f**	378
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	378
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	27

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

2E

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

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [X] 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)** [X] 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)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2022** **This Form is Open to Public Inspection.**

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
BAC #1 SUPPLEMENTAL RETIREMENT FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OF BAC LOCAL 1 SUPPLEMENTAL RETIREMENT FUND

D Employer Identification Number (EIN)
41-1868381

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

THE VANGUARD GROUP, INC.

23-1945930

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

PNC BANK, NATIONAL ASSOCIATION

22-1146430

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

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

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

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

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

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

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

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

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

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

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

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

MAIRS & POWERS

41-0844499

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51 68	NONE	34155	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

MILLIMAN

91-0675641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 50	NONE	21553	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CLIFTONLARSONALLEN LLP

41-0746749

(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	18830	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

WILSON-MCSHANE

41-0956552

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 15 50	NONE	13205	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MARQUETTE ASSOCIATES

36-3485298

(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?
50 27 28 51	NONE	12500	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

ANDREW & BRANKSY P.A.

41-1502219

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	5125	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
BAC #1 SUPPLEMENTAL RETIREMENT FUND

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OF BAC LOCAL 1 SUPPLEMENTAL RETIREMENT FUND

D Employer Identification Number (EIN)
41-1868381

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

a Name of MTIA, CCT, PSA, or 103-12 IE: AFL-CIO BUILDING INVESTMENT TRUST

b Name of sponsor of entity listed in (a): PNC BANK, NATIONAL ASSOCIATION AS TRUSTEE

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
52-6328901-001	C	1226113

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
BAC #1 SUPPLEMENTAL RETIREMENT FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OF BAC LOCAL 1 SUPPLEMENTAL RETIREMENT FUND

D Employer Identification Number (EIN)
41-1868381

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	69410	51675
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	53257	42411
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	24246	28352
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	108786	36793
(2) U.S. Government securities	1c(2)	517580	482409
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	2990919	2551783
(B) All other	1c(3)(B)	85353	70461
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	6786153	5129616
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	1213173	1226113
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2856210	2286781
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	14705087	11906394
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	15033	34979
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through1j)	1k	15033	34979
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	14690054	11871415

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)	555772	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		555772
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	1129	
(B) U.S. Government securities	2b(1)(B)	9108	
(C) Corporate debt instruments	2b(1)(C)	117205	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	4235	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		131677
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	73692	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	48314	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		122006
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	1191892	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	1029573	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		162319
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	-2324933	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		-2324933

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		12940
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-664906
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		-2005125
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	696575	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		696575
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)	23955	
(2) Contract administrator fees	2i(2)	36433	
(3) Investment advisory and management fees	2i(3)	49258	
(4) Other	2i(4)	7293	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		116939
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		813514
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-2818639
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: CLIFTONLARSONALLEN LLP **(2)** EIN: 41-0746749

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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

2022

This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
BAC #1 SUPPLEMENTAL RETIREMENT FUND

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
BOARD OF TRUSTEES OF BAC LOCAL 1 SUPPLEMENTAL RETIREMENT FUND

D Employer Identification Number (EIN)
41-1868381

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): 41-1868381 _____

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** 0

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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_____

BAC #1 SUPPLEMENTAL RETIREMENT FUND

FINANCIAL STATEMENTS AND ERISA-REQUIRED SUPPLEMENTAL SCHEDULES

YEARS ENDED DECEMBER 31, 2022 AND 2021



CPAs | CONSULTANTS | WEALTH ADVISORS

CLAconnect.com

BAC #1 SUPPLEMENTAL RETIREMENT FUND
TABLE OF CONTENTS
YEARS ENDED DECEMBER 31, 2022 AND 2021

INDEPENDENT AUDITORS' REPORT	**1**
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS	**4**
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	**5**
NOTES TO FINANCIAL STATEMENTS	**6**
ERISA-REQUIRED SUPPLEMENTAL SCHEDULES (ATTACHMENTS TO FORM 5500)	
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)	**11**
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS	**23**

CliftonLarsonAllen LLP
CLAconnect.com

INDEPENDENT AUDITORS' REPORT

Board of Trustees
BAC #1 Supplemental Retirement Fund
Duluth, Minnesota

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of BAC #1 Supplemental Retirement Fund, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of BAC #1 Supplemental Retirement Fund as of December 31, 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 audits in accordance with auditing standards generally accepted in the United States of America (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 BAC #1 Supplemental Retirement Fund and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of 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 BAC #1 Supplemental Retirement Fund's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

CLA (CliftonLarsonAllen LLP) is an independent network member of CLA Global. See CLAglobal.com/disclaimer.

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 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 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 BAC #1 Supplemental Retirement Fund's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about BAC #1 Supplemental Retirement Fund's ability to continue as a going concern for a reasonable period of time.

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

Board of Trustees
BAC #1 Supplemental Retirement Fund

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2022 and schedule of reportable transactions for the year then ended, are presented for purposes of additional analysis and are 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Minneapolis, Minnesota
August 1, 2023

BAC #1 SUPPLEMENTAL RETIREMENT FUND
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2022 AND 2021

	2022	2021
ASSETS		
INVESTMENTS (at Fair Value)		
Money Market Mutual Fund	$ 36,793	$ 108,786
U.S. Treasury Obligations	403,312	398,685
Mutual Funds	2,286,781	2,856,210
Mortgage Backed Securities	79,097	118,895
Collective Trust Fund	1,226,113	1,213,173
Corporate Bonds	2,622,244	3,076,272
Common Stock	5,129,616	6,786,153
Total Investments (at Fair Value)	11,783,956	14,558,174
OTHER ASSETS		
Cash in Bank	51,675	69,410
Contributions Receivable	42,411	53,257
Investment Income Receivable	28,352	24,246
Total Other Assets	122,438	146,913
Total Assets	11,906,394	14,705,087
LIABILITIES		
ACCOUNTS PAYABLE	34,979	15,033
NET ASSETS AVAILABLE FOR BENEFITS	$ 11,871,415	$ 14,690,054

See accompanying Notes to Financial Statements.

BAC #1 SUPPLEMENTAL RETIREMENT FUND
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2022 AND 2021

	2022	2021
ADDITIONS TO (DEDUCTIONS FROM) NET ASSETS AVAILABLE FOR BENEFITS ATTRIBUTABLE TO:		
INVESTMENT INCOME (LOSS)		
Interest and Dividends	$ 253,683	$ 246,419
Net Appreciation (Depreciation) in Fair Value of Investments	(2,814,580)	1,761,948
Less: Investment Management, Advisory, and Custodial Fees	(49,258)	(63,448)
Net Investment Income (Loss)	(2,610,155)	1,944,919
EMPLOYER CONTRIBUTIONS	555,772	584,681
BENEFIT PAYMENTS	(696,575)	(515,916)
ADMINISTRATIVE EXPENSES		
WMC Administrator Fees	(10,200)	(9,900)
Service Corp Administrator Fees	(4,680)	(2,400)
Milliman Administrator Fees	(21,553)	(23,788)
Audit	(18,830)	(13,514)
Insurance	(3,577)	(5,353)
Legal	(5,125)	(3,805)
Postage/Supplies/Printing/Miscellaneous	(3,716)	(2,794)
Total Administrative Expenses	(67,681)	(61,554)
NET INCREASE (DECREASE)	(2,818,639)	1,952,130
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of Year	14,690,054	12,737,924
End of Year	$ 11,871,415	$ 14,690,054

See accompanying Notes to Financial Statements.

NOTE 1 DESCRIPTION OF THE PLAN

The following description of BAC #1 Supplemental Retirement Fund (the Plan) provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

General

The Plan was established May 1, 1997 between Bricklayers and Allied Craftsmen Local #1 and Insulators Local #49 and Contributing Employers with collective bargaining agreements. The Plan was most recently restated January 1, 2015.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Contributions

Each month, participating employers contribute to the Plan, on behalf of their eligible employees, a fixed amount per hour of service, as determined by the collective bargaining agreements. The fixed amount per hour of service is based on various categories of participants, as defined in the collective bargaining agreements.

Participant Accounts

The Plan is a defined contribution plan under which a separate individual account is established for each participant. Each participant's account is credited with the Employer's contribution and an allocation of Plan earnings and fees on a monthly basis. During the years ended December 31, 2022 and 2021, a fee of $15.00 per participant per month was assessed for administrative fees. The benefit to which a participant is entitled is the benefit that can be provided from the participant's account. Participants do not direct the investments within their account.

Eligibility

Participants are immediately eligible to participate in the Plan upon the date an Employer first makes a contribution on behalf of the employee as required by the collective bargaining agreements.

Vesting

Participants are immediately vested in contributions plus actual earnings thereon.

Payment of Benefits

Benefits are paid to participants or their beneficiaries upon death, retirement (early or normal) and total and permanent disability before retirement (early or normal) or upon termination of service with an employer in the Plan. Participants may elect to receive either a lump-sum amount equal to the value of their vested interest, annuities, annual installments or partial cash payments as defined in the Plan document upon retirement, termination, death, or disability. Account balances that exceed $5,000 will receive a joint and survivor annuity if married and a single life annuity if unmarried unless an alternative election is selected. The Plan allows for in-service distributions upon a Participant's attainment of age 59-1/2 and for hardship purposes, subject to Plan provisions.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

Methods of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (GAAP) requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of additions to net assets and deductions from net assets during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The Plan's investments are valued 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.

Investments in the money market mutual fund and mutual funds are valued at the daily closing price as reported by the fund. The mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. The funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded. Investments in common stock are valued at the closing price reported in the active market in which the individual security is traded. Investments in U.S. Treasury obligations, mortgage-backed securities, and corporate bonds are valued based on yields currently available on comparable securities of issuers with similar credit ratings. Collective trust funds are valued based on the NAV of units, as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying assets held by the fund less its liabilities. This practical expedient is not used when it is determined to be probably that the funds will sell the investment for an amount different than the reported NAV.

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

Fair Value Measurements

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

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Fair Value Measurements (Continued)

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 other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. There have been no changes in the valuation methodologies used at December 31, 2022 and 2021.

Payment of Benefits

Benefits are recorded as paid.

Administrative Expenses

Administrative expenses are paid by the Plan.

NOTE 3 RISKS AND UNCERTAINTIES

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

NOTE 4 PLAN TERMINATION

Although the Board of Trustees has not expressed any intent to do so, they have the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Board of Trustees may determine.

NOTE 5 FAIR VALUE OF INVESTMENTS

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31:

	2022			
	Level 1	Level 2	Level 3	Total
Assets:				
Money Market Mutual Fund	$ 36,793	$ -	$ -	$ 36,793
U.S. Treasury Obligations	-	403,312	-	403,312
Mutual Funds	2,286,781	-	-	2,286,781
Mortgage-Backed Securities	-	79,097	-	79,097
Corporate Bonds	-	2,622,244	-	2,622,244
Common Stock	5,129,616	-	-	5,129,616
Total Assets in the Fair Value Hierarchy	$ 7,453,190	$ 3,104,653	$ -	10,557,843
Investments Measured at NAV as a Practical Expedient				1,226,113
Investments at Fair Value				$ 11,783,956

	2021			
	Level 1	Level 2	Level 3	Total
Assets:				
Money Market Mutual Fund	$ 108,786	$ -	$ -	$ 108,786
U.S. Treasury Obligations	-	398,685	-	398,685
Mutual Funds	2,856,210		-	2,856,210
Mortgage-Backed Securities	-	118,895	-	118,895
Corporate Bonds	-	3,076,272	-	3,076,272
Common Stock	6,786,153	-	-	6,786,153
Total Assets in the Fair Value Hierarchy	$ 9,751,149	$ 3,593,852	$ -	13,345,001
Investments Measured at NAV as a Practical Expedient				1,213,173
Investments at Fair Value				$ 14,558,174

The following table sets forth additional disclosures for the fair value measurement of investments in certain entities that calculate net asset value per share (or its equivalent):

	December 31, 2022 Fair Value	December 31, 2021 Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Real Estate Collective Trust Fund	$ 1,226,113	$ 1,213,173	$ -	Quarterly	60 Days, One Year Prior to Withdrawal

NOTE 5 FAIR VALUE OF INVESTMENTS (CONTINUED)

Real Estate Collective Trust Fund is invested in commercial real estate, real estate loans, and other properties with the objective of generative competitive risk-adjusted returns, long-term capital appreciation, or both.

NOTE 6 TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Plan by a letter dated August 12, 2015 that the Plan and related trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). The Plan has been amended since receiving the determination letter; however, the Board of Trustees believes that the Plan is currently designed and is being operated in compliance with the applicable requirements of the IRC.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 7 PARTY-IN-INTEREST TRANSACTIONS

The Plan's checking accounts are maintained at North Shore Bank of Commerce, a custodian. North Shore Investments & Trust is a division of North Shore Bank of Commerce. Therefore, these transactions qualify as party-in-interest.

NOTE 8 CONCENTRATION

During the years ended December 31, 2022 and 2021, there were three employers that individually represented more than 10% of total employer contributions.

NOTE 9 SUBSEQUENT EVENTS

The Plan has evaluated subsequent events through August 1, 2023, the date on which the financial statements were available to be issued.

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		SHORT TERM INVESTMENTS						
36,792.8	FOAXX	GOLDMAN SACHS FINL SQUARE GOVT FUND ADMIN SHS #466 38141W265 ACCOUNT 1564193001 .27 ACCOUNT 1564193010 35,452.5 ACCOUNT 1564193029 1,340.03	36,792.80	36,792.80			223.84	2
		US TREASURY OBLIGATIONS						
		UNCLASSIFIED						
100,000		UNITED STATES TREASURY NOTES .25% 06/15/2024 91282CCG4 ACCOUNT 1564193010 100,000	93,852.00	99,296.88		Aaa	10.99	1
100,000		UNITED STATES TREASURY NOTES 1% NTS 31/07/2028 USD (N-2028) 1% 07/31/2028 91282CCR0 ACCOUNT 1564193010 100,000	85,004.00	99,839.49		Aaa	415.76	1
50,000		UNITED STATES TREASURY NOTES 3.5% NTS 15/09/2025 USD (AS-2025) 3.5% 09/15/2025 91282CFK2 ACCOUNT 1564193010 50,000	49,000.00	48,753.41		Aaa	517.27	1
50,000		UNITED STATES TREASURY NOTES 4.125% NTS 31/10/2027 USD (AF-2027) 4.125% 10/31/2027 91282CFU0 ACCOUNT 1564193010 50,000	50,183.50	49,662.11		Aaa	345.64	1
50,000		UNITED STATES TREASURY NOTES 4% NTS 15/12/2025 USD (AV-2025) 4% 12/15/2025 91282CGA3 ACCOUNT 1564193010 50,000	49,679.50	49,752.91		Aaa	87.91	
		TOTAL UNCLASSIFIED	327,719.00	347,304.80			1,377.57	
		CMO SECURITIES						
		TRANSPORTATION						
101,449.5		AMERICAN AIRLINES ABS 3.65% 12/15/2029 023764AA1 ACCOUNT 1564193010 101,449.5	79,096.62	101,829.90	BB	Baa3	308.58	2

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		MUNICIPAL OBLIGATIONS							
		UNCLASSIFIED							
100,000		WEST BEND WIS AA 2.9% 02/01/2038-2029 951428FA4		75,593.00	100,283.00	AA		1,208.33	
		ACCOUNT 1564193010	100,000						
		CORPORATE BONDS							
		ENERGY							
50,000	KMI34	KINDER MORGAN INC DEL 5.3% SNR NTS 01/12/2034 USD (SEC REGD) 5.3% 12/01/2034 49456BAG6		46,792.50	60,296.91	BBB	Baa2	213.47	1
		ACCOUNT 1564193010	50,000						
		MATERIALS							
100,000		CABOT CORP 4% SNR PIDI NTS 01/07/2029 USD (SEC REGD) 4% 07/01/2029 127055AL5		89,452.00	101,325.00	DDD	Baa2	1,988.89	1
		ACCOUNT 1564193010	100,000						
150,000		KENNAMETAL INC 4.625% SNR PIDI NTS 15/06/2028 USD (SEC REGD) 4.625% 06/15/2028 489170AE0		140,715.00	162,960.00	BBB	Baa3	289.06	1
		ACCOUNT 1564193010	150,000						
		TOTAL MATERIALS		230,167.00	264,285.00			2,277.95	
		CAPITAL GOODS							
100,000	FBHS29	FORTUNE BRANDS INNOVATIONS INC 3.25% SNR PIDI NTS 15/09/2029 USD (SEC REGD) 3.25% 09/15/2029 34964CAE6		86,550.00	99,913.00	BBB+	Baa3	947.92	1
		ACCOUNT 1564193010	100,000						
115,000	SHW45B	SHERWIN WILLIAMS CO 4.4% SNR PIDI NTS 01/02/2045 USD (SEC REGD) 4.4% 02/01/2045 824348BH8		88,460.30	120,885.70	BBB	Baa2	2,094.28	1
		ACCOUNT 1564193010	115,000						
70,000		STEELCASE INC 5.125% SNR PIDI NTS 18/01/2029 USD (SEC REGD) 5.125% 01/18/2029 858155AE4		60,984.70	71,071.00	BB	Ba3	1,614.38	1
		ACCOUNT 1564193010	70,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TOTAL CAPITAL GOODS		235,995.00	291,869.70			4,656.58	
		AUTOMOBILES AND COMPONENTS							
100,000	LEA30	LEAR CORP 3.5% SNR PIDI NTS 30/05/2030 USD (SEC REGD) 3.5% 05/30/2030 521865BB0		84,007.00	101,934.00	BBB-	Baa2	291.67	1
		ACCOUNT 1564193010	100,000						
		CONSUMER DURABLES AND APPAREL							
100,000		MOHAWK IND INC 3.625% SNR PIDI NTS 15/05/2030 USD (SEC REGD) 3.625% 05/15/2030 608190AL8		86,140.00	100,641.00	BBB+	Baa1	453.13	1
		ACCOUNT 1564193010	100,000						
		CONSUMER SERVICES							
100,000	FDX43	FEDEX CORP 4.1% SNR PIDI NTS 15/04/2043 USD (SEC REGD) 4.1% 04/15/2043 31428XAU0		78,161.00	99,260.00	BBB	Baa2	854.17	1
		ACCOUNT 1564193010	100,000						
50,000		FEDEX CORP 4.25% SNR PIDI NTS 15/05/2030 USD (SEC REGD) 4.25% 05/15/2030 31428XBZ8		47,163.00	49,879.00	BBB	Baa2	265.63	1
		ACCOUNT 1564193010	50,000						
		TOTAL CONSUMER SERVICES		125,324.00	149,139.00			1,119.80	
		RETAILING							
75,000	KSS37	KOHLS CORP 6.875% 12/15/2037 500255AQ7		58,125.00	82,902.52	BB+	Ba2	214.84	1
		ACCOUNT 1564193010	75,000						
		FOOD BEVERAGE AND TOBACCO							
52,000		CONAGRA FOODS INC 3.2% 01/25/2023 205887BR2		51,961.00	52,926.12	BBB-	Baa3	716.44	2
		ACCOUNT 1564193010	52,000						
		PHARMACEUTICAL BIOTECH LIFE SCI							
100,000	CAH27	CARDINAL HEALTH INC 3.41% SNR PIDI NTS 15/06/2027 USD (SEC REGD) 3.41% 06/15/2027 14149YBJ6		93,484.00	99,524.50	BBB	Baa2	142.08	1
		ACCOUNT 1564193010	100,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVMI
		BANKS							
50,000		BANK AMERICA FDG CORP FXD-FRN SNR 22/07/2028 USD (SEC REGD) (N) 4.948% 07/22/2028 06051GKW8		48,833.00	50,406.50	A-	A2	1,085.81	1
		ACCOUNT 1564193010	50,000						
100,000		BANK OF NEW YORK MELLON CORP FXD-FRN PERP USD (SEC REGD) 3.75% 12/31/2049 064058AL4		80,546.00	100,000.00	BBB	Baa1	104.17	1
		ACCOUNT 1564193010	100,000						
100,000		PNC FINL CORP FXD-FRN PERP USD (SEC REGD) (T) 3.4% 693475BC8		79,250.00	100,225.00	BBB-	Baa2	0.00	
		ACCOUNT 1564193010	100,000						
100,000		US BANCORP FXD-FRN TIER I PERP USD (SEC REGD) (N) 3.7% 12/31/2049 902973BC9		81,750.00	100,225.00	BBB+	Baa1	770.83	1
		ACCOUNT 1564193010	100,000						
100,000		WINTRUST FINL CORP 4.85% SUB PIDI NTS 06/06/2029 USD (SEC REGD) 4.85% 06/06/2029 97650WAG3		90,652.00	108,527.00			323.33	1
		ACCOUNT 1564193010	100,000						
		TOTAL BANKS		381,031.00	459,383.50			2,284.14	
		DIVERSIFIED FINANCIALS							
150,000		JP MORGAN CHASE & CO FXD-FRN ALT TIER I PERP USD (SEC REGD) 3.65% 12/31/2099-2026 48128BAN1		128,437.50	149,925.00	BBB-	Baa2	441.04	1
		ACCOUNT 1564193010	150,000						
100,000		MORGAN STANLEY 3.875% 01/27/2026 61746BDZ6		96,802.00	101,676.00	A-	A1	1,646.88	2
		ACCOUNT 1564193010	100,000						
100,000		WESTERN UNION CO BBB 4.25% 06/09/2023 959802AX7		99,509.00	100,163.00	BBB	Baa2	247.92	2
		ACCOUNT 1564193010	100,000						
		TOTAL DIVERSIFIED FINANCIALS		324,748.50	351,764.00			2,335.84	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		INSURANCE							
76,000		ASSURANT INC 4.2% 09/27/2023 04621XAH1		75,153.36	76,155.04	BBB	Baa2	824.60	2
		ACCOUNT 1564193010	76,000						
75,000	AIZ30	ASSURANT INC 3.7% SNR PIDI NTS 22/02/2030 USD (SEC REGD) 3.7% 02/22/2030 04621XAM0		63,491.25	78,920.25	BBB	Baa2	986.67	1
		ACCOUNT 1564193010	75,000						
		TOTAL INSURANCE		138,644.61	155,075.29			1,811.27	
		SOFTWARE AND SERVICES							
100,000		NETAPP INC 3.3% 09/29/2024 64110DAF1		96,725.00	99,484.00	BBB1	Baa2	834.17	2
		ACCOUNT 1564193010	100,000						
50,000		SCIENCE APPLICATIONS 5.5% 07/01/2033 808626AG0		45,968.00	50,360.50	BBB-	Baa3	1,367.36	2
		ACCOUNT 1564193010	50,000						
		TOTAL SOFTWARE AND SERVICES		142,693.00	149,844.50			2,201.53	
		TECHNOLOGY HARDWARE AND EQUIP							
100,000	HPQ30	HP INC 3.4% SNR PIDI NTS 17/06/2030 USD (SEC REGD) 3.4% 06/17/2030 40434LAC9		84,709.00	103,272.00	BBB	Baa2	122.78	1
		ACCOUNT 1564193010	100,000						
		SEMICONDUCTORS AND EQUIPMENT							
100,000		INTEL CORP 4% 12/15/2032 458140AN0		92,657.00	99,734.00	A+	A1	166.67	2
		ACCOUNT 1564193010	100,000						
		TELECOMMUNICATION SERVICES							
100,000		VERIZON COMMUNICATIONS INC BBB+ 4.4% 11/01/2034 92343VCQ5		91,826.00	101,138.00	BBB+	Baa1	721.11	2
		ACCOUNT 1564193010	100,000						
		UTILITIES							
50,000	LNT/43	INTERSTATE PWR & LT CO 4.7% SNR UNSEC DEB 15/10/2043 USD (SEC REGD) 4.7% 10/15/2043 461070AK0		40,724.50	42,144.50	A-	Baa1	489.58	1
		ACCOUNT 1564193010	50,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TOTAL CORPORATE BONDS	2,309,029.11	2,665,874.54			20,218.88	
		CONVERTIBLE CORPORATE BONDS						
		DIVERSIFIED FINANCIALS						
200,000		SCHWAB CHARLES CORP FRN SUB-PERPETUAL CONVERTIBLE 4% 808513DJ3	159,490.00	200,531.25	BBB	Baa2	0.00	2
		ACCOUNT 1564193010 200,000						
		FOREIGN BONDS, NOTES & DEBENTURES						
		UNCLASSIFIED						
175,000	ALB/29	ALBEMARLE WODGINA PROPERTY LTD 3.45% SNR PIDI NTS 15/11/2029 USD (SEC REGD) 3.45% 11/15/2029 01273PAB8	153,725.25	183,813.25	BBB	Baa3	754.69	
		ACCOUNT 1564193010 175,000						
		COMMON STOCK						
		UNCLASSIFIED						
600	JAMF	JAMF HOLDING CORP COM 47074L105	12,780.00	21,196.65			0.00	1
		ACCOUNT 1564193010 600						
		ENERGY						
200	LNT	ALLIANT ENERGY CORP 018802108	11,042.00	10,438.95			0.00	1
		ACCOUNT 1564193010 200						
		MATERIALS						
600	BMI	BADGER METER INC 056525108	65,418.00	11,220.03			0.00	1
		ACCOUNT 1564193010 600						
2,300	FAST	FASTENAL CO 311900104	108,836.00	29,349.03			0.00	1
		ACCOUNT 1564193010 2,300						
193	MMM	3M CO 88579Y101	23,144.56	20,183.50			0.00	1
		ACCOUNT 1564193010 193						
		TOTAL MATERIALS	197,398.56	60,752.56			0.00	
		CAPITAL GOODS						
1,000	DCI	DONALDSON INC 257651109	58,870.00	20,080.77			0.00	1
		ACCOUNT 1564193010 1,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
1,000	FUL	FULLER H B CO 359694106		71,620.00	17,441.79			0.00	1
		ACCOUNT 1564193010	1,000						
2,700	GGG	GRACO INC 384109104		181,602.00	16,395.96			0.00	1
		ACCOUNT 1564193010	2,700						
500	HON	HONEYWELL INTL INC A 438516106		107,150.00	23,040.47	A		0.00	1
		ACCOUNT 1564193010	500						
300	SHW	SHERWIN WILLIAMS CO 824348106		71,199.00	48,297.49			0.00	1
		ACCOUNT 1564193010	300						
400	TNC	TENNANT CO 880345103		24,628.00	28,411.97			0.00	1
		ACCOUNT 1564193010	400						
1,100	TTC	TORO CO 891092108		124,520.00	26,240.58			374.00	1
		ACCOUNT 1564193010	1,100						
		TOTAL CAPITAL GOODS		639,589.00	179,909.03			374.00	
		TRANSPORTATION							
700	CHRW	C H ROBINSON WORLDWIDE INC 12541W209		64,092.00	45,588.83			427.00	1
		ACCOUNT 1564193010	700						
200	PII	POLARIS INDS INC 731068102		20,200.00	27,140.95			0.00	1
		ACCOUNT 1564193010	200						
450	UPS	UNITED PARCEL SERVICE INC 911312106		78,228.00	32,900.64			0.00	1
		ACCOUNT 1564193010	450						
		TOTAL TRANSPORTATION		162,520.00	105,630.42			427.00	
		AUTOMOBILES AND COMPONENTS							
550	GNRC	GENERAC HLDGS INC 368736104		55,363.00	25,405.92			0.00	1
		ACCOUNT 1564193010	550						
500	THRM	GENTHERM INC 37253A103		32,645.00	35,538.50			0.00	1
		ACCOUNT 1564193010	500						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVMI
		TOTAL AUTOMOBILES AND COMPONENTS		88,008.00	60,944.42			0.00	
		CONSUMER DURABLES AND APPAREL							
400	ENTG	ENTEGRIS INC 29362U104		26,236.00	18,821.94			0.00	1
		ACCOUNT 1564193010	400						
200	SNBR	SLEEP NUMBER CORP 83125X103		5,196.00	17,727.95			0.00	1
		ACCOUNT 1564193010	200						
		TOTAL CONSUMER DURABLES AND APPAREL		31,432.00	66,549.89			0.00	
		MEDIA							
700	DIS	WALT DISNEY CO 254687106		60,816.00	45,353.52			0.00	1
		ACCOUNT 1564193010	700						
		RETAILING							
2,000	AMZN	AMAZON INC 023135106		168,000.00	336,490.71			0.00	1
		ACCOUNT 1564193010	2,000						
425	HD	HOME DEPOT CO 437076102		134,240.50	17,652.64			0.00	1
		ACCOUNT 1564193010	425						
400	TGT	TARGET CORP 87612E106		59,616.00	18,526.62			0.00	1
		ACCOUNT 1564193010	400						
		TOTAL RETAILING		361,856.50	372,669.97			0.00	
		FOOD BEVERAGE AND TOBACCO							
200	HSY	THE HERSHEY CO 427866108		46,314.00	21,785.27			0.00	1
		ACCOUNT 1564193010	200						
2,000	HRL	HORMEL FOODS CORP 440452100		91,100.00	44,094.10			0.00	1
		ACCOUNT 1564193010	2,000						
300	SYY	SYSCO CORP 871829107		22,935.00	13,432.08			0.00	1
		ACCOUNT 1564193010	300						
		TOTAL FOOD BEVERAGE AND TOBACCO		160,349.00	79,311.45			0.00	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		HOUSEHOLD AND PERSONAL PRODUCTS						
1,025	ECL	ECOLAB INC 278865100 ACCOUNT 1564193010 1,025	149,199.00	55,636.34			543.25	1
		HEALTH CARE EQUIP AND SERVICES						
1,600	TECH	BIO-TECHNE CORP 09073M104 ACCOUNT 1564193010 1,600	132,608.00	21,407.76			0.00	1
47	NEOG	NEOGEN CORP 640491106 ACCOUNT 1564193010 47	715.81	725.88			0.00	1
550	UNH	UNITED HEALTH GROUP INC 91324P102 ACCOUNT 1564193010 550	291,599.00	62,591.35			0.00	1
		TOTAL HEALTH CARE EQUIP AND SERVICES	424,922.81	84,724.99			0.00	
		PHARMACEUTICAL BIOTECH LIFE SCI						
1,450	ABT	ABBOTT LABS 002824100 ACCOUNT 1564193010 1,450	159,195.50	43,848.65			0.00	1
950	JNJ	JOHNSON & JOHNSON 478160104 ACCOUNT 1564193010 950	167,817.50	70,734.16			0.00	1
700	LLY	LILLY ELI & CO 532457108 ACCOUNT 1564193010 700	256,088.00	36,672.91			0.00	1
500	PFE	PFIZER INC 717081103 ACCOUNT 1564193010 500	25,620.00	12,128.25			0.00	1
		TOTAL PHARMACEUTICAL BIOTECH LIFE SCI	608,721.00	163,383.97			0.00	
		BANKS						
300	JPM	JP MORGAN CHASE & CO 46625H100 ACCOUNT 1564193010 300	40,230.00	49,387.36			0.00	1
500	NTRS	NORTHERN TRUST CORP 665859104 ACCOUNT 1564193010 500	44,245.00	58,963.06			375.00	1

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
2,500	USB	US BANCORP 902973304		109,025.00	90,005.85			1,200.00	1
		ACCOUNT 1564193010	2,500						
2,700	WFC	WELLS FARGO BANK NA 949746101		111,483.00	83,701.86			0.00	1
		ACCOUNT 1564193010	2,700						
		TOTAL BANKS		304,983.00	282,058.13			1,575.00	
		DIVERSIFIED FINANCIALS							
600	AXP	AMERICAN EXPRESS CO 025816109		88,650.00	49,520.73			0.00	1
		ACCOUNT 1564193010	600						
700	V	VISA INC 92826C839		145,432.00	94,066.11			0.00	1
		ACCOUNT 1564193010	700						
		TOTAL DIVERSIFIED FINANCIALS		234,082.00	143,586.84			0.00	
		INSURANCE							
500	PFG	PRINCIPAL FINL GROUP 74251V102		41,960.00	17,408.51			0.00	1
		ACCOUNT 1564193010	500						
		SOFTWARE AND SERVICES							
400	ATVI	ACTIVISION BLIZZARD INC 00507V109		30,620.00	28,633.15			0.00	1
		ACCOUNT 1564193010	400						
3,200	GOOG	ALPHABET INC 02079K107		283,936.00	125,717.19			0.00	1
		ACCOUNT 1564193010	3,200						
1,600	FISV	FISERV INC 337738108		161,712.00	19,014.42			0.00	1
		ACCOUNT 1564193010	1,600						
1,000	MSFT	MICROSOFT CORP 594918104		239,820.00	115,536.53			0.00	1
		ACCOUNT 1564193010	1,000						
400	CRM	SALESFORCE INC 79466L302		53,036.00	117,968.33			0.00	1
		ACCOUNT 1564193010	400						
		TOTAL SOFTWARE AND SERVICES		769,124.00	406,869.62			0.00	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TECHNOLOGY HARDWARE AND EQUIP						
500	LFUS	LITTELFUSE INC 537008104 ACCOUNT 1564193010 500	110,100.00	91,601.23			0.00	1
500	MSI	MOTOROLA SOLUTIONS INC 620076307 ACCOUNT 1564193010 500	128,855.00	72,940.92			440.00	1
900	QCOM	QUALCOMM INC 747525103 ACCOUNT 1564193010 900	98,946.00	56,279.08			0.00	1
		TOTAL TECHNOLOGY HARDWARE AND EQUIP	337,901.00	220,821.23			440.00	
		SEMICONDUCTORS AND EQUIPMENT						
1,500	NVDA	NVIDIA CORP 67066G104 ACCOUNT 1564193010 1,500	219,210.00	63,282.77			0.00	1
		TELECOMMUNICATION SERVICES						
2,300	DGII	DIGI INTERNATIONAL INC 253798102 ACCOUNT 1564193010 2,300	84,065.00	31,771.16			0.00	1
		UTILITIES						
175	XEL	XCEL ENERGY INC 98389B100 ACCOUNT 1564193010 175	12,269.25	3,821.52			85.31	1
		TOTAL COMMON STOCK	4,912,228.12	2,476,121.94			3,444.56	
		EQUITY FUNDS						
		UNCLASSIFIED						
10,699.31	VEXAX	VANGUARD EXTENDED MARKET INDEX ADMIRAL #598 922908694 ACCOUNT 1564193001 10,699.31	1,079,025.41	871,412.67			0.00	1
		FOREIGN STOCK						
		UNCLASSIFIED						
1,700	NVT	NVENT ELECTRIC PLC G6700G107 ACCOUNT 1564193010 1,700	65,399.00	30,190.01			0.00	1

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		DIVERSIFIED FINANCIALS						
1,500	RHHBY	ROCHE HLDG LTD 771195104 ACCOUNT 1564193010 1,500	58,725.00	50,202.42			0.00	1
		TECHNOLOGY HARDWARE AND EQUIP						
1,200	MDT	MEDTRONIC PLC G5960L103 ACCOUNT 1564193010 1,200	93,264.00	92,432.45			816.00	1
		TOTAL FOREIGN STOCK	217,388.00	172,824.88			816.00	
		INTL EQUITY FUNDS						
		UNCLASSIFIED						
43,350.824	VTIAX	VANGUARD INTL STOCK INDEX ADMIRAL #569 921909818 ACCOUNT 1564193001 43,350.824	1,207,753.96	1,202,957.72			0.00	1
		MUTUAL FUNDS						
		UNCLASSIFIED						
148.511124		AFL-CIO BUILDING INVESTMENT TRUST FUND 998500BD3 ACCOUNT 1564193029 148.511124	1,226,113	940,923.46			0.00	1
		Total Fund	11,783,956	9,329,022.66			28,352.45	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2022

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Cost of Assets	Current Value of Asset on Transaction Date	Net Gain (Loss)
Category (iii) - Series of Transactions						
Goldman Sachs Financial Square Government Fund W265	Money Market Fund	$ 624,482	$ -	$ 642,482	$ 624,482	$ -
Goldman Sachs Financial Square Government Fund W265	Money Market Fund	-	696,475	696,475	696,475	-

There were no category (i), (ii) or (iv) transactions.
Columns (e) and (f) omitted as they are not applicable.



CLA (CliftonLarsonAllen LLP) is a network member of CLA Global. See CLAglobal.com/disclaimer. Investment advisory services are offered through CliftonLarsonAllen Wealth Advisors, LLC, an SEC-registered investment advisor.

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4j—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2022

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of Party Involved	Description of Asset	Purchase Price	Selling Price	Cost of Assets	Current Value of Asset on Transaction Date	Net Gain (Loss)
Category (iii) - Series of Transactions						
Goldman Sachs Financial Square Government Fund W265	Money Market Fund	$ 624,482	$ -	$ 642,482	$ 624,482	$ -
Goldman Sachs Financial Square Government Fund W265	Money Market Fund	-	696,475	696,475	696,475	-

There were no category (i), (ii) or (iv) transactions.
Columns (e) and (f) omitted as they are not applicable.

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		SHORT TERM INVESTMENTS						
36,792.8	FOAXX	GOLDMAN SACHS FINL SQUARE GOVT FUND ADMIN SHS #466 38141W265 ACCOUNT 1564193001 .27 ACCOUNT 1564193010 35,452.5 ACCOUNT 1564193029 1,340.03	36,792.80	36,792.80			223.84	2
		US TREASURY OBLIGATIONS						
		UNCLASSIFIED						
100,000		UNITED STATES TREASURY NOTES .25% 06/15/2024 91282CCG4 ACCOUNT 1564193010 100,000	93,852.00	99,296.88		Aaa	10.99	1
100,000		UNITED STATES TREASURY NOTES 1% NTS 31/07/2028 USD (N-2028) 1% 07/31/2028 91282CCR0 ACCOUNT 1564193010 100,000	85,004.00	99,839.49		Aaa	415.76	1
50,000		UNITED STATES TREASURY NOTES 3.5% NTS 15/09/2025 USD (AS-2025) 3.5% 09/15/2025 91282CFK2 ACCOUNT 1564193010 50,000	49,000.00	48,753.41		Aaa	517.27	1
50,000		UNITED STATES TREASURY NOTES 4.125% NTS 31/10/2027 USD (AF-2027) 4.125% 10/31/2027 91282CFU0 ACCOUNT 1564193010 50,000	50,183.50	49,662.11		Aaa	345.64	1
50,000		UNITED STATES TREASURY NOTES 4% NTS 15/12/2025 USD (AV-2025) 4% 12/15/2025 91282CGA3 ACCOUNT 1564193010 50,000	49,679.50	49,752.91		Aaa	87.91	
		TOTAL UNCLASSIFIED	327,719.00	347,304.80			1,377.57	
		CMO SECURITIES						
		TRANSPORTATION						
101,449.5		AMERICAN AIRLINES ABS 3.65% 12/15/2029 023764AA1 ACCOUNT 1564193010 101,449.5	79,096.62	101,829.90	BB	Baa3	308.58	2

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		MUNICIPAL OBLIGATIONS							
		UNCLASSIFIED							
100,000		WEST BEND WIS AA 2.9% 02/01/2038-2029 951428FA4		75,593.00	100,283.00	AA		1,208.33	
		ACCOUNT 1564193010	100,000						
		CORPORATE BONDS							
		ENERGY							
50,000	KMI34	KINDER MORGAN INC DEL 5.3% SNR NTS 01/12/2034 USD (SEC REGD) 5.3% 12/01/2034 49456BAG6		46,792.50	60,296.91	BBB	Baa2	213.47	1
		ACCOUNT 1564193010	50,000						
		MATERIALS							
100,000		CABOT CORP 4% SNR PIDI NTS 01/07/2029 USD (SEC REGD) 4% 07/01/2029 127055AL5		89,452.00	101,325.00	DDD	Baa2	1,988.89	1
		ACCOUNT 1564193010	100,000						
150,000		KENNAMETAL INC 4.625% SNR PIDI NTS 15/06/2028 USD (SEC REGD) 4.625% 06/15/2028 489170AE0		140,715.00	162,960.00	BBB	Baa3	289.06	1
		ACCOUNT 1564193010	150,000						
		TOTAL MATERIALS		230,167.00	264,285.00			2,277.95	
		CAPITAL GOODS							
100,000	FBHS29	FORTUNE BRANDS INNOVATIONS INC 3.25% SNR PIDI NTS 15/09/2029 USD (SEC REGD) 3.25% 09/15/2029 34964CAE6		86,550.00	99,913.00	BBB+	Baa3	947.92	1
		ACCOUNT 1564193010	100,000						
115,000	SHW45B	SHERWIN WILLIAMS CO 4.4% SNR PIDI NTS 01/02/2045 USD (SEC REGD) 4.4% 02/01/2045 824348BH8		88,460.30	120,885.70	BBB	Baa2	2,094.28	1
		ACCOUNT 1564193010	115,000						
70,000		STEELCASE INC 5.125% SNR PIDI NTS 18/01/2029 USD (SEC REGD) 5.125% 01/18/2029 858155AE4		60,984.70	71,071.00	BB	Ba3	1,614.38	1
		ACCOUNT 1564193010	70,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TOTAL CAPITAL GOODS		235,995.00	291,869.70			4,656.58	
		AUTOMOBILES AND COMPONENTS							
100,000	LEA30	LEAR CORP 3.5% SNR PIDI NTS 30/05/2030 USD (SEC REGD) 3.5% 05/30/2030 521865BB0		84,007.00	101,934.00	BBB-	Baa2	291.67	1
		ACCOUNT 1564193010	100,000						
		CONSUMER DURABLES AND APPAREL							
100,000		MOHAWK IND INC 3.625% SNR PIDI NTS 15/05/2030 USD (SEC REGD) 3.625% 05/15/2030 608190AL8		86,140.00	100,641.00	BBB+	Baa1	453.13	1
		ACCOUNT 1564193010	100,000						
		CONSUMER SERVICES							
100,000	FDX43	FEDEX CORP 4.1% SNR PIDI NTS 15/04/2043 USD (SEC REGD) 4.1% 04/15/2043 31428XAU0		78,161.00	99,260.00	BBB	Baa2	854.17	1
		ACCOUNT 1564193010	100,000						
50,000		FEDEX CORP 4.25% SNR PIDI NTS 15/05/2030 USD (SEC REGD) 4.25% 05/15/2030 31428XBZ8		47,163.00	49,879.00	BBB	Baa2	265.63	1
		ACCOUNT 1564193010	50,000						
		TOTAL CONSUMER SERVICES		125,324.00	149,139.00			1,119.80	
		RETAILING							
75,000	KSS37	KOHLS CORP 6.875% 12/15/2037 500255AQ7		58,125.00	82,902.52	BB+	Ba2	214.84	1
		ACCOUNT 1564193010	75,000						
		FOOD BEVERAGE AND TOBACCO							
52,000		CONAGRA FOODS INC 3.2% 01/25/2023 205887BR2		51,961.00	52,926.12	BBB-	Baa3	716.44	2
		ACCOUNT 1564193010	52,000						
		PHARMACEUTICAL BIOTECH LIFE SCI							
100,000	CAH27	CARDINAL HEALTH INC 3.41% SNR PIDI NTS 15/06/2027 USD (SEC REGD) 3.41% 06/15/2027 14149YBJ6		93,484.00	99,524.50	BBB	Baa2	142.08	1
		ACCOUNT 1564193010	100,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVMI
		BANKS							
50,000		BANK AMERICA FDG CORP FXD-FRN SNR 22/07/2028 USD (SEC REGD) (N) 4.948% 07/22/2028 06051GKW8		48,833.00	50,406.50	A-	A2	1,085.81	1
		ACCOUNT 1564193010	50,000						
100,000		BANK OF NEW YORK MELLON CORP FXD-FRN PERP USD (SEC REGD) 3.75% 12/31/2049 064058AL4		80,546.00	100,000.00	BBB	Baa1	104.17	1
		ACCOUNT 1564193010	100,000						
100,000		PNC FINL CORP FXD-FRN PERP USD (SEC REGD) (T) 3.4% 693475BC8		79,250.00	100,225.00	BBB-	Baa2	0.00	
		ACCOUNT 1564193010	100,000						
100,000		US BANCORP FXD-FRN TIER I PERP USD (SEC REGD) (N) 3.7% 12/31/2049 902973BC9		81,750.00	100,225.00	BBB+	Baa1	770.83	1
		ACCOUNT 1564193010	100,000						
100,000		WINTRUST FINL CORP 4.85% SUB PIDI NTS 06/06/2029 USD (SEC REGD) 4.85% 06/06/2029 97650WAG3		90,652.00	108,527.00			323.33	1
		ACCOUNT 1564193010	100,000						
		TOTAL BANKS		381,031.00	459,383.50			2,284.14	
		DIVERSIFIED FINANCIALS							
150,000		JP MORGAN CHASE & CO FXD-FRN ALT TIER I PERP USD (SEC REGD) 3.65% 12/31/2099-2026 48128BAN1		128,437.50	149,925.00	BBB-	Baa2	441.04	1
		ACCOUNT 1564193010	150,000						
100,000		MORGAN STANLEY 3.875% 01/27/2026 61746BDZ6		96,802.00	101,676.00	A-	A1	1,646.88	2
		ACCOUNT 1564193010	100,000						
100,000		WESTERN UNION CO BBB 4.25% 06/09/2023 959802AX7		99,509.00	100,163.00	BBB	Baa2	247.92	2
		ACCOUNT 1564193010	100,000						
		TOTAL DIVERSIFIED FINANCIALS		324,748.50	351,764.00			2,335.84	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		INSURANCE							
76,000		ASSURANT INC 4.2% 09/27/2023 04621XAH1		75,153.36	76,155.04	BBB	Baa2	824.60	2
		ACCOUNT 1564193010	76,000						
75,000	AIZ30	ASSURANT INC 3.7% SNR PIDI NTS 22/02/2030 USD (SEC REGD) 3.7% 02/22/2030 04621XAM0		63,491.25	78,920.25	BBB	Baa2	986.67	1
		ACCOUNT 1564193010	75,000						
		TOTAL INSURANCE		138,644.61	155,075.29			1,811.27	
		SOFTWARE AND SERVICES							
100,000		NETAPP INC 3.3% 09/29/2024 64110DAF1		96,725.00	99,484.00	BBB1	Baa2	834.17	2
		ACCOUNT 1564193010	100,000						
50,000		SCIENCE APPLICATIONS 5.5% 07/01/2033 808626AG0		45,968.00	50,360.50	BBB-	Baa3	1,367.36	2
		ACCOUNT 1564193010	50,000						
		TOTAL SOFTWARE AND SERVICES		142,693.00	149,844.50			2,201.53	
		TECHNOLOGY HARDWARE AND EQUIP							
100,000	HPQ30	HP INC 3.4% SNR PIDI NTS 17/06/2030 USD (SEC REGD) 3.4% 06/17/2030 40434LAC9		84,709.00	103,272.00	BBB	Baa2	122.78	1
		ACCOUNT 1564193010	100,000						
		SEMICONDUCTORS AND EQUIPMENT							
100,000		INTEL CORP 4% 12/15/2032 458140AN0		92,657.00	99,734.00	A+	A1	166.67	2
		ACCOUNT 1564193010	100,000						
		TELECOMMUNICATION SERVICES							
100,000		VERIZON COMMUNICATIONS INC BBB+ 4.4% 11/01/2034 92343VCQ5		91,826.00	101,138.00	BBB+	Baa1	721.11	2
		ACCOUNT 1564193010	100,000						
		UTILITIES							
50,000	LNT/43	INTERSTATE PWR & LT CO 4.7% SNR UNSEC DEB 15/10/2043 USD (SEC REGD) 4.7% 10/15/2043 461070AK0		40,724.50	42,144.50	A-	Baa1	489.58	1
		ACCOUNT 1564193010	50,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TOTAL CORPORATE BONDS	2,309,029.11	2,665,874.54			20,218.88	
		CONVERTIBLE CORPORATE BONDS						
		DIVERSIFIED FINANCIALS						
200,000		SCHWAB CHARLES CORP FRN SUB-PERPETUAL CONVERTIBLE 4% 808513DJ3	159,490.00	200,531.25	BBB	Baa2	0.00	2
		ACCOUNT 1564193010 200,000						
		FOREIGN BONDS, NOTES & DEBENTURES						
		UNCLASSIFIED						
175,000	ALB/29	ALBEMARLE WODGINA PROPERTY LTD 3.45% SNR PIDI NTS 15/11/2029 USD (SEC REGD) 3.45% 11/15/2029 01273PAB8	153,725.25	183,813.25	BBB	Baa3	754.69	
		ACCOUNT 1564193010 175,000						
		COMMON STOCK						
		UNCLASSIFIED						
600	JAMF	JAMF HOLDING CORP COM 47074L105	12,780.00	21,196.65			0.00	1
		ACCOUNT 1564193010 600						
		ENERGY						
200	LNT	ALLIANT ENERGY CORP 018802108	11,042.00	10,438.95			0.00	1
		ACCOUNT 1564193010 200						
		MATERIALS						
600	BMI	BADGER METER INC 056525108	65,418.00	11,220.03			0.00	1
		ACCOUNT 1564193010 600						
2,300	FAST	FASTENAL CO 311900104	108,836.00	29,349.03			0.00	1
		ACCOUNT 1564193010 2,300						
193	MMM	3M CO 88579Y101	23,144.56	20,183.50			0.00	1
		ACCOUNT 1564193010 193						
		TOTAL MATERIALS	197,398.56	60,752.56			0.00	
		CAPITAL GOODS						
1,000	DCI	DONALDSON INC 257651109	58,870.00	20,080.77			0.00	1
		ACCOUNT 1564193010 1,000						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
1,000	FUL	FULLER H B CO 359694106		71,620.00	17,441.79			0.00	1
		ACCOUNT 1564193010	1,000						
2,700	GGG	GRACO INC 384109104		181,602.00	16,395.96			0.00	1
		ACCOUNT 1564193010	2,700						
500	HON	HONEYWELL INTL INC A 438516106		107,150.00	23,040.47	A		0.00	1
		ACCOUNT 1564193010	500						
300	SHW	SHERWIN WILLIAMS CO 824348106		71,199.00	48,297.49			0.00	1
		ACCOUNT 1564193010	300						
400	TNC	TENNANT CO 880345103		24,628.00	28,411.97			0.00	1
		ACCOUNT 1564193010	400						
1,100	TTC	TORO CO 891092108		124,520.00	26,240.58			374.00	1
		ACCOUNT 1564193010	1,100						
		TOTAL CAPITAL GOODS		639,589.00	179,909.03			374.00	
		TRANSPORTATION							
700	CHRW	C H ROBINSON WORLDWIDE INC 12541W209		64,092.00	45,588.83			427.00	1
		ACCOUNT 1564193010	700						
200	PII	POLARIS INDS INC 731068102		20,200.00	27,140.95			0.00	1
		ACCOUNT 1564193010	200						
450	UPS	UNITED PARCEL SERVICE INC 911312106		78,228.00	32,900.64			0.00	1
		ACCOUNT 1564193010	450						
		TOTAL TRANSPORTATION		162,520.00	105,630.42			427.00	
		AUTOMOBILES AND COMPONENTS							
550	GNRC	GENERAC HLDGS INC 368736104		55,363.00	25,405.92			0.00	1
		ACCOUNT 1564193010	550						
500	THRM	GENTHERM INC 37253A103		32,645.00	35,538.50			0.00	1
		ACCOUNT 1564193010	500						

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVMI
		TOTAL AUTOMOBILES AND COMPONENTS		88,008.00	60,944.42			0.00	
		CONSUMER DURABLES AND APPAREL							
400	ENTG	ENTEGRIS INC 29362U104		26,236.00	18,821.94			0.00	1
		ACCOUNT 1564193010	400						
200	SNBR	SLEEP NUMBER CORP 83125X103		5,196.00	17,727.95			0.00	1
		ACCOUNT 1564193010	200						
		TOTAL CONSUMER DURABLES AND APPAREL		31,432.00	66,549.89			0.00	
		MEDIA							
700	DIS	WALT DISNEY CO 254687106		60,816.00	45,353.52			0.00	1
		ACCOUNT 1564193010	700						
		RETAILING							
2,000	AMZN	AMAZON INC 023135106		168,000.00	336,490.71			0.00	1
		ACCOUNT 1564193010	2,000						
425	HD	HOME DEPOT CO 437076102		134,240.50	17,652.64			0.00	1
		ACCOUNT 1564193010	425						
400	TGT	TARGET CORP 87612E106		59,616.00	18,526.62			0.00	1
		ACCOUNT 1564193010	400						
		TOTAL RETAILING		361,856.50	372,669.97			0.00	
		FOOD BEVERAGE AND TOBACCO							
200	HSY	THE HERSHEY CO 427866108		46,314.00	21,785.27			0.00	1
		ACCOUNT 1564193010	200						
2,000	HRL	HORMEL FOODS CORP 440452100		91,100.00	44,094.10			0.00	1
		ACCOUNT 1564193010	2,000						
300	SYY	SYSCO CORP 871829107		22,935.00	13,432.08			0.00	1
		ACCOUNT 1564193010	300						
		TOTAL FOOD BEVERAGE AND TOBACCO		160,349.00	79,311.45			0.00	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		HOUSEHOLD AND PERSONAL PRODUCTS						
1,025	ECL	ECOLAB INC 278865100 ACCOUNT 1564193010 1,025	149,199.00	55,636.34			543.25	1
		HEALTH CARE EQUIP AND SERVICES						
1,600	TECH	BIO-TECHNE CORP 09073M104 ACCOUNT 1564193010 1,600	132,608.00	21,407.76			0.00	1
47	NEOG	NEOGEN CORP 640491106 ACCOUNT 1564193010 47	715.81	725.88			0.00	1
550	UNH	UNITED HEALTH GROUP INC 91324P102 ACCOUNT 1564193010 550	291,599.00	62,591.35			0.00	1
		TOTAL HEALTH CARE EQUIP AND SERVICES	424,922.81	84,724.99			0.00	
		PHARMACEUTICAL BIOTECH LIFE SCI						
1,450	ABT	ABBOTT LABS 002824100 ACCOUNT 1564193010 1,450	159,195.50	43,848.65			0.00	1
950	JNJ	JOHNSON & JOHNSON 478160104 ACCOUNT 1564193010 950	167,817.50	70,734.16			0.00	1
700	LLY	LILLY ELI & CO 532457108 ACCOUNT 1564193010 700	256,088.00	36,672.91			0.00	1
500	PFE	PFIZER INC 717081103 ACCOUNT 1564193010 500	25,620.00	12,128.25			0.00	1
		TOTAL PHARMACEUTICAL BIOTECH LIFE SCI	608,721.00	163,383.97			0.00	
		BANKS						
300	JPM	JP MORGAN CHASE & CO 46625H100 ACCOUNT 1564193010 300	40,230.00	49,387.36			0.00	1
500	NTRS	NORTHERN TRUST CORP 665859104 ACCOUNT 1564193010 500	44,245.00	58,963.06			375.00	1

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION		MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
2,500	USB	US BANCORP 902973304		109,025.00	90,005.85			1,200.00	1
		ACCOUNT 1564193010	2,500						
2,700	WFC	WELLS FARGO BANK NA 949746101		111,483.00	83,701.86			0.00	1
		ACCOUNT 1564193010	2,700						
		TOTAL BANKS		304,983.00	282,058.13			1,575.00	
		DIVERSIFIED FINANCIALS							
600	AXP	AMERICAN EXPRESS CO 025816109		88,650.00	49,520.73			0.00	1
		ACCOUNT 1564193010	600						
700	V	VISA INC 92826C839		145,432.00	94,066.11			0.00	1
		ACCOUNT 1564193010	700						
		TOTAL DIVERSIFIED FINANCIALS		234,082.00	143,586.84			0.00	
		INSURANCE							
500	PFG	PRINCIPAL FINL GROUP 74251V102		41,960.00	17,408.51			0.00	1
		ACCOUNT 1564193010	500						
		SOFTWARE AND SERVICES							
400	ATVI	ACTIVISION BLIZZARD INC 00507V109		30,620.00	28,633.15			0.00	1
		ACCOUNT 1564193010	400						
3,200	GOOG	ALPHABET INC 02079K107		283,936.00	125,717.19			0.00	1
		ACCOUNT 1564193010	3,200						
1,600	FISV	FISERV INC 337738108		161,712.00	19,014.42			0.00	1
		ACCOUNT 1564193010	1,600						
1,000	MSFT	MICROSOFT CORP 594918104		239,820.00	115,536.53			0.00	1
		ACCOUNT 1564193010	1,000						
400	CRM	SALESFORCE INC 79466L302		53,036.00	117,968.33			0.00	1
		ACCOUNT 1564193010	400						
		TOTAL SOFTWARE AND SERVICES		769,124.00	406,869.62			0.00	

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		TECHNOLOGY HARDWARE AND EQUIP						
500	LFUS	LITTELFUSE INC 537008104 ACCOUNT 1564193010 500	110,100.00	91,601.23			0.00	1
500	MSI	MOTOROLA SOLUTIONS INC 620076307 ACCOUNT 1564193010 500	128,855.00	72,940.92			440.00	1
900	QCOM	QUALCOMM INC 747525103 ACCOUNT 1564193010 900	98,946.00	56,279.08			0.00	1
		TOTAL TECHNOLOGY HARDWARE AND EQUIP	337,901.00	220,821.23			440.00	
		SEMICONDUCTORS AND EQUIPMENT						
1,500	NVDA	NVIDIA CORP 67066G104 ACCOUNT 1564193010 1,500	219,210.00	63,282.77			0.00	1
		TELECOMMUNICATION SERVICES						
2,300	DGII	DIGI INTERNATIONAL INC 253798102 ACCOUNT 1564193010 2,300	84,065.00	31,771.16			0.00	1
		UTILITIES						
175	XEL	XCEL ENERGY INC 98389B100 ACCOUNT 1564193010 175	12,269.25	3,821.52			85.31	1
		TOTAL COMMON STOCK	4,912,228.12	2,476,121.94			3,444.56	
		EQUITY FUNDS						
		UNCLASSIFIED						
10,699.31	VEXAX	VANGUARD EXTENDED MARKET INDEX ADMIRAL #598 922908694 ACCOUNT 1564193001 10,699.31	1,079,025.41	871,412.67			0.00	1
		FOREIGN STOCK						
		UNCLASSIFIED						
1,700	NVT	NVENT ELECTRIC PLC G6700G107 ACCOUNT 1564193010 1,700	65,399.00	30,190.01			0.00	1

BAC #1 SUPPLEMENTAL RETIREMENT FUND
E.I.N. 41-1868381 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

Schedule Of Investments

UNITS	TICKER	DESCRIPTION	MARKET VALUE	BOOK VALUE	S&P RATE	MOODY RATE	ACCRUED INCOME	FVML
		DIVERSIFIED FINANCIALS						
1,500	RHHBY	ROCHE HLDG LTD 771195104 ACCOUNT 1564193010 1,500	58,725.00	50,202.42			0.00	1
		TECHNOLOGY HARDWARE AND EQUIP						
1,200	MDT	MEDTRONIC PLC G5960L103 ACCOUNT 1564193010 1,200	93,264.00	92,432.45			816.00	1
		TOTAL FOREIGN STOCK	217,388.00	172,824.88			816.00	
		INTL EQUITY FUNDS						
		UNCLASSIFIED						
43,350.824	VTIAX	VANGUARD INTL STOCK INDEX ADMIRAL #569 921909818 ACCOUNT 1564193001 43,350.824	1,207,753.96	1,202,957.72			0.00	1
		MUTUAL FUNDS						
		UNCLASSIFIED						
148.511124		AFL-CIO BUILDING INVESTMENT TRUST FUND 998500BD3 ACCOUNT 1564193029 148.511124	1,226,113	940,923.46			0.00	1
		Total Fund	11,783,956	9,329,022.66			28,352.45	