

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 <u>01/01/2022</u> and ending <u>12/31/2022</u>	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) ____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☒
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information		
1a	Name of plan <u>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST</u>	1b	Three-digit plan number (PN) ▶ <u>004</u>
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158</u> <u>1149 BLOOMFIELD AVENUE</u> <u>CLIFTON, NJ 07012</u>	1c	Effective date of plan <u>01/01/2002</u>
		2b	Employer Identification Number (EIN) <u>22-0886457</u>
		2c	Plan Sponsor's telephone number <u>973-344-1800</u>
		2d	Business code (see instructions) <u>813930</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2023	GEORGE SERIO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2023	GEORGE SERIO
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2022)
v. 220413

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 627
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) 627
a(2) Total number of active participants at the end of the plan year		6a(2) 626
b Retired or separated participants receiving benefits		6b 0
c Other retired or separated participants entitled to future benefits.....		6c
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 626
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 626
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 626
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2H 2J		
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:		
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)		
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ 1 A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) 004	
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
--------	---	--

1 Coverage Information:

(a) Name of insurance carrier
VOYA RETIREMENT INSURANCE AND ANNUITY CO.

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294708	86509	874041	11	01/01/2022	12/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.
--

(a) Total amount of commissions paid	(b) Total amount of fees paid
1667	0

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MORGAN STANLEY SMITH BARNEY 1 NEW YORK PLAZA NEW YORK, NY 10004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
536			3

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

SBHU LIFE AGENCY INC	700 RED BROOK BLVD STE 300 OWINGS MILLS, MD 21117
----------------------	---

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1131	0		3

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end.....	4	72002
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	583578

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.....**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☒ other (specify) ▶ **INDIVIDUAL GROUP ANNUITY****f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)****a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year**7b**

68510

c Additions: (1) Contributions deposited during the year**7c(1)**

5271

(2) Dividends and credits.....

7c(2)

(3) Interest credited during the year.....

7c(3)

702

(4) Transferred from separate account.....

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions.....

7c(6)

5973

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

74483

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

(2) Administration charge made by carrier.....

7e(2)

(3) Transferred to separate account.....

7e(3)

2481

(4) Other (specify below)

7e(4)

▶

(5) Total deductions.....

7e(5)

2481

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)**7f**

72002

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ▶	004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

Part I

Service Provider Information (see instructions)

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

1

Information on Persons Receiving Only Eligible Indirect Compensation

- a

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

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

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

(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

(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)

MORGAN STANLEY

34 WEST 52ST
NEW YORK, NY 10019

26-4310632

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 28	BROKER	68440	Yes ☐ No ☒	Yes ☐ No ☒	0	Yes ☐ No ☒

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

ROSENBERG RICH BAKER BERMAN & CO.,

265 DAVIDSON AVE.
SOMERSET, NJ 08873

22-3271252

(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	AUDITOR	22000	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

E.H. THOMSON & CO., INC.

800 THE PLAZA
SEA GIRT, NJ 08750

22-2602083

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 12 14 15 17	RECORDKEEPER ACTUARY ADMI	38143	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

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

CARELLA BYRNE

5 BECKER FARM ROAD
ROSELAND, NJ 07068

22-2045935

(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	LEGAL	15168	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☒

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST	B Three-digit plan number (PN) ▶	004
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158	D Employer Identification Number (EIN) 22-0886457	

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: NT COLLECTIVE S&P 500 INDEX FUNDS		
b Name of sponsor of entity listed in (a): NORTHERN TRUST COLLECTIVE FUNDS TRUST		
c EIN-PN 45-6138589-003	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 888901
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)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST</u>	B Three-digit plan number (PN) ► 	004
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158</u>	D Employer Identification Number (EIN) <u>22-0886457</u>	

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	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....		1b(1)	161868100957
(2) Participant contributions.....		1b(2)	
(3) Other.....		1b(3)	1589219778
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....		1c(1)	341419384483
(2) U.S. Government securities		1c(2)	12481481431165
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A)	
(B) All other		1c(3)(B)	13530381092161
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A)	
(B) Common.....		1c(4)(B)	36455693304340
(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)	1086093888901
(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)	14299091381426
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	
(15) Other		1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	9281936	8603211

Liabilities

g Benefit claims payable	1g	0	
h Operating payables	1h	38798	20350
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	38798	20350

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	9243138	8582861
---	-----------	---------	---------

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)	1112075	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1112075
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	25	
(B) U.S. Government securities	2b(1)(B)	18940	
(C) Corporate debt instruments	2b(1)(C)	2263	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	1152	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		22380
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	87291	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	21683	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		108974
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2118333	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2173856	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-55523
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	-596412	
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		-596412

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-197192
(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)		-271599
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		122703
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	635504	
(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)		635504
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)	79036	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	68440	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		147476
j Total expenses. Add all expense amounts in column (b) and enter total	2j		782980
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-660277
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: ROSENBERG RICH BAKER BERMAN & CO.

(2) EIN: 22-3271252

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		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?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	X		
4j	X		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
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 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158 ANNUITY PLAN AND TRUST		B Three-digit plan number (PN) ► 004
C Plan sponsor's name as shown on line 2a of Form 5500 PASSAIC VALLEY SEWERAGE COMMISSION / I.B.E.W. LOCAL 1158		D Employer Identification Number (EIN) 22-0886457
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): 22-2021330		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

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 _____

IBEW Local 1158 Annuity Plan
Financial Statements
December 31, 2022 and 2021

**IBEW Local 1158 Annuity Plan
Index to the Financial Statements
December 31, 2022 and 2021**

	Page
Independent Auditor's Report	1-3
Financial Statements:	
Statements of Net Assets Available for Plan Benefits	4
Statements of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6-12
Supplementary Information:	
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)	13-32
Schedule H, Line 4(j) - Schedule of Reportable Transactions.....	33

ROSENBERG RICH BAKER BERMAN & COMPANY

265 Davidson Avenue, Suite 210 • Somerset, NJ 08873-4120 • PHONE 908-231-1000 • FAX 908-231-6894
111 Dunnell Road, Suite 100 • Maplewood, NJ 07040 • PHONE 973-763-6363 • FAX 973-763-4430

Independent Auditor's Report

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

Opinion

We have audited the accompanying financial statements of IBEW Local 1158 Annuity Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for plan benefits as of December 31, 2022 and 2021, and the related statements of changes in net assets available for plan 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 plan benefits of IBEW Local 1158 Annuity Plan as of December 31, 2022 and 2021, and the changes in its net assets available for plan benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of IBEW Local 1158 Annuity Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about IBEW Local 1158 Annuity Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists.

The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of IBEW Local 1158 Annuity Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about IBEW Local 1158 Annuity Plan's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedules Required by ERISA

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



ROSENBERG RICH BAKER BERMAN & COMPANY

To the Board of Trustees
of the IBEW Local 1158 Annuity Plan

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

In our opinion, the information in the accompanying schedules 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.

Rosenberg Rich Baker Berman, P.A.

Somerset, New Jersey
September 27, 2023

IBEW Local 1158 Annuity Plan
Statements of Net Assets Available for Benefits

	December 31,	
	2022	2021
Assets		
Investments at fair value:		
Short-term investments	\$ 384,483	\$ 341,419
Mutual funds	725,847	684,909
U.S. government securities	1,229,030	1,248,148
Mortgage backed securities	202,135	-
Corporate bonds	995,017	1,160,718
Asset backed securities	97,144	192,320
Common stock	3,304,340	3,645,569
Common collective trust	888,901	1,086,093
Investment contract	<u>655,579</u>	<u>745,000</u>
Total Investments	8,482,476	9,104,176
Receivables:		
Employer contributions receivable	100,957	161,868
Accrued investment income receivable	15,401	15,892
Due from broker	<u>4,377</u>	<u>-</u>
Total Receivables	<u>120,735</u>	<u>177,760</u>
Total Assets	<u>8,603,211</u>	<u>9,281,936</u>
Liabilities and Net Assets Available for Benefits		
Accounts payable and accrued expenses	20,350	18,850
Due to broker	<u>-</u>	<u>19,948</u>
Total Liabilities	<u>20,350</u>	<u>38,798</u>
Net Assets Available for Benefits	<u>\$ 8,582,861</u>	<u>\$ 9,243,138</u>

IBEW Local 1158 Annuity Plan
Statements of Changes in Net Assets Available for Benefits

	For the Years Ended December 31,	
	<u>2022</u>	<u>2021</u>
Additions to Net Assets Attributed to:		
Investment income:		
Net (depreciation) appreciation in fair value of investments	\$ (1,120,726)	\$ 809,972
Interest and dividends	<u>131,354</u>	<u>159,729</u>
Total investment (loss) income	(989,372)	969,701
Investment expenses	<u>(68,440)</u>	<u>(67,455)</u>
Net investment (loss) income	(1,057,812)	902,246
Employer contributions	<u>1,112,075</u>	<u>1,082,251</u>
Total Additions	<u>54,263</u>	<u>1,984,497</u>
Deductions from Net Assets Attributed to:		
Benefit Payments:		
Benefits paid to participants	<u>635,504</u>	<u>522,887</u>
Administrative Expenses:		
Auditing fees	22,000	19,000
Insurance expense	500	500
Legal fees	18,393	170
Plan administration fees	<u>38,143</u>	<u>34,640</u>
Total Administrative Expenses	<u>79,036</u>	<u>54,310</u>
Total Deductions	<u>714,540</u>	<u>577,197</u>
Net (Decrease) Increase in Net Assets Available for Benefits	(660,277)	1,407,300
Net Assets Available for Benefits - Beginning of Years	<u>9,243,138</u>	<u>7,835,838</u>
Net Assets Available for Benefits - End of Years	<u>\$ 8,582,861</u>	<u>\$ 9,243,138</u>

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

1. Description of Plan:

The following brief description of the IBEW Local 1158 Annuity Plan ("the Plan") is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a defined contribution plan administered jointly by IBEW Local 1158 and the Passaic Valley Sewerage Commissioners (PVSC). It was established for the benefit of eligible IBEW Local 1158 employees as of January 1, 1999. The PVSC adopted the Plan on behalf of their employees effective January 1, 2002. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Benefits

The Plan provides retirement benefits to employees whose employment is subject to a collective bargaining agreement with the IBEW Local 1158 Union and to other non-union employees who are employed by the PVSC. The Plan also provides retirement benefits to employees of IBEW Local 1158. IBEW Local 1158 represents a separate employer adopting the Plan.

Eligibility

A covered employee is eligible to participate in the Plan upon commencement of one hour of employment with an adopting employer and attaining age twenty one, provided that they are not a non-resident alien.

Contributions

The PVSC provides benefits to their union and non-union employees pursuant to a collective bargaining agreement. The PVSC contributed ninety-five (\$0.95) cents per hour, up to a maximum of thirty-eight (\$38) dollars per week during 2022 and 2021, respectively.

For the years ended December 31, 2022 and 2021, contributions on behalf of PVSC covered employees totaled \$1,067,192 and \$1,051,767, respectively. No employee contributions are required.

The IBEW Local 1158 provides benefits to their employees based on a discretionary formula determined each year. The IBEW Local 1158 contributed \$2.50 and \$2.00 per hour up to a maximum of forty hours per week (a maximum contribution of \$5,200 and \$4,160 per year) for each covered employee in 2022 and 2021, respectively.

For the years ended December 31, 2022 and 2021, contributions on behalf of IBEW Local 1158 covered employees totaled \$44,883 and \$30,484, respectively. No employee contributions are allowed or required.

Retirement

Participants will be eligible to retire and receive distribution of benefits on the later of the participant's sixty-fifth birthday or the fifth anniversary of commencement in the Plan. If a participant works past their normal retirement date, distributions will not begin until the participant actually retires. Distributions can be received by employees in the IBEW 1158 Staff Plan at age 59 1/2 related to salary deferral contributions or from qualified nonelective or qualified matching contributions. Participants of the Passaic Valley Sewerage Commission are only allowed to receive distributions upon separation of employment.

Participant Accounts

For participants employed by PVSC all allocations made on a participant's behalf are credited to a separate bookkeeping account established in the name of the participant. At the end of each Plan year, allocations are made to participant accounts and interest is credited based on the net earnings experienced by the Trust Fund for the Plan year.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

1. Description of Plan (continued):

Participant Accounts (continued)

IBEW Local 1158 participants may choose to invest contributions made on their behalf into 18 mutual funds of varying type and risk. The participants are allowed to change their choices or transfer between funds through automated systems.

Vesting and Forfeitures

All participants are immediately 100% vested in their individual participant accounts and no forfeitures occur. An eligible participant may receive their distribution upon normal retirement, termination of employment, disability, or death.

2. Summary of Significant Accounting Policies:

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (see Note 4, Fair Value Measurements). Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Contributions Receivable

Employer contributions receivable are accrued for contribution revenue earned but not collected by year-end.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Subsequent Events Evaluation Date

The Plan evaluated the events and transactions subsequent to the date of its Statements of Net Assets Available for Plan Benefits, in accordance with FASB ASC 855-10-50, "Subsequent Events" through September 27, 2023, which is the date the financial statements were available to be issued.

3. Investments:

During the years ended December 31, 2022 and 2021, the Plan's investments (including investments bought, sold, as well as held during the years) (depreciated) appreciated in fair value by \$(1,120,726) and \$809,972, respectively.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

4. Fair Value Measurements:

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820, "Fair Value Measurements and Disclosures", establishes a framework for measuring fair value. This 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 under FASB ASC 820 are described as follows:

- (1) 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.
- (2) Level 2 - 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.
- (3) Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2022 and 2021.

Short-term investments, mutual funds and common stock: Valued at the closing price reported in the active market in which the individual security is traded based on information obtained from independent quotation services (Level 1).

U.S. government securities and mortgage backed securities: U.S. Treasury Bonds are valued at the closing price reported in the active market in which the securities are traded based on information obtained from independent quotation services (Level 1). Other government securities, agency bonds and mortgage backed securities are valued using pricing models maximizing the use of observable inputs for similar securities (Level 2).

Corporate bonds and asset-backed securities: Valued based on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar securities, the security is valued under an approach that maximizes observable inputs, such as current yields of similar instruments, broker/dealer quotes, bids and benchmark securities (Level 2).

Common collective trust: Valued at the net asset value (NAV) of units of a collective trust. Consists of pools of investments used by institutional investors to obtain equity and fixed income market exposures by investing in funds which are intended to mirror indices such as the Standard & Poor's 500® Index, Russell 2000® Index, or a custom benchmark index. They are valued on the basis of the relative interest of each participating investor in the fair value of the underlying assets of each of the respective common collective trusts (NAV).

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

4. Fair Value Measurements (continued):

Investment contract: Valued at the net asset value (NAV) of the underlying registered mutual funds selected under the variable annuity contract based on observable market inputs of the funds as published on recognized market exchanges (NAV).

Assets measured at fair value on a recurring basis are summarized below:

Assets at Fair Value as of December 31, 2022				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 384,483	\$ 384,483	\$ -	\$ -
Mutual funds	725,847	725,847	-	-
U.S. government securities	1,229,030	998,739	230,291	-
Mortgage backed securities	202,135	-	202,135	-
Corporate bonds	995,017	-	995,017	-
Asset backed securities	97,144	-	97,144	-
Common stock	<u>3,304,340</u>	<u>3,304,340</u>	<u>-</u>	<u>-</u>
Total investments at fair value	6,937,996	5,413,409	1,524,587	-
Investments measured at NAV *	<u>1,544,480</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Investments	<u>\$ 8,482,476</u>	<u>\$ 5,413,409</u>	<u>\$ 1,524,587</u>	<u>\$ -</u>

Assets at Fair Value as of December 31, 2021				
	Total	Level 1	Level 2	Level 3
Short-term investments	\$ 341,419	\$ 341,419	\$ -	\$ -
Mutual funds	684,909	684,909	-	-
U.S. government securities	1,248,148	1,017,857	230,291	-
Corporate bonds	1,160,718	-	1,160,718	-
Asset backed securities	192,320	-	192,320	-
Common stock	<u>3,645,569</u>	<u>3,645,569</u>	<u>-</u>	<u>-</u>
Total investments at fair value	7,273,083	5,689,754	1,583,329	-
Investments measured at NAV *	<u>1,831,093</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Investments	<u>\$ 9,104,176</u>	<u>\$ 5,689,754</u>	<u>\$ 1,583,329</u>	<u>\$ -</u>

(*) In accordance with Subtopic 820-15, certain investments that were measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statement of net assets available for benefits.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

4. Fair Value Measurements (continued):

The following table sets forth additional disclosures of Plan's investments whose fair value is estimated using net asset value per share (or its equivalent) as of December 31, 2022 and 2021:

		December 31, 2022		
		<u>Fair Value</u>	<u>Unfunded Commitment</u>	<u>Redemption Frequency</u> <u>Redemption Notice Period</u>
Common Collective Trust:				
Collective S&P 500 Index Fund				
Non-Lending	\$	888,901	None	Daily 30 Days
Investment Contract:				
VOYA Retirement Insurance and				
Annuity Company		<u>655,579</u>	None	Daily 30 Days
Total	\$	<u><u>1,544,480</u></u>		

		December 31, 2021		
		<u>Fair Value</u>	<u>Unfunded Commitment</u>	<u>Redemption Frequency</u> <u>Redemption Notice Period</u>
Common Collective Trust:				
Collective S&P 500 Index Fund				
Non-Lending	\$	1,086,093	None	Daily 30 Days
Investment Contract				
VOYA Retirement Insurance and				
Annuity Company		<u>745,000</u>	None	Daily 30 Days
Total	\$	<u><u>1,831,093</u></u>		

Changes in Fair Value Levels - The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

We evaluate the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2022 and 2021, there were significant transfers out of Level 1 into Investments measured at Net Asset Value (NAV). This amounted to \$655,579 and \$745,000 for the years ended December 31, 2022 and 2021, respectively.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

5. Nonparticipant-Directed Investments:

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant-directed investments is as follows:

	<u>December 31,</u>	
	<u>2022</u>	<u>2021</u>
Net Assets:		
Investments at fair value:		
Short-Term Investments	\$ 384,483	\$ 341,419
U.S. Government Securities	1,229,030	1,248,148
Mortgage Backed Securities	202,135	-
Corporate Bonds	995,017	1,160,718
Asset Backed Securities	97,144	192,320
Common Stock	3,304,340	3,645,569
Common Collective Trust	888,901	1,086,093
Mutual Funds	<u>725,847</u>	<u>684,908</u>
Total investments at fair value	7,826,897	8,359,175
Receivables	120,735	177,760
Liabilities	<u>(20,350)</u>	<u>(38,798)</u>
	<u>\$ 7,927,282</u>	<u>\$ 8,498,137</u>
	<u>Years Ended December 31,</u>	
	<u>2022</u>	<u>2021</u>
Changes in Net Assets:		
Contributions	\$ 1,067,192	\$ 1,051,767
Interest and Dividends	131,354	159,025
Net (Depreciation) Appreciation	(986,422)	733,438
Investment Expenses	(68,440)	(67,455)
Administrative Expenses	(79,035)	(54,310)
Benefits Paid to Participants	<u>(635,505)</u>	<u>(522,887)</u>
	<u>\$ (570,856)</u>	<u>\$ 1,299,578</u>

6. Plan Termination:

In the event of a termination or partial termination of the Plan, or in the event of complete discontinuance of contributions, each employee shall have a non-forfeitable right to the assets remaining after providing for the expenses of the Plan and for the payment of any accumulated share. Each participant shall receive that part of the total remaining assets in the same ratio as his or her accumulated share bears to the aggregate amount of the accumulated shares of all participants.

7. Parties-in-Interest:

The Plan's investments are held at Morgan Stanley, VOYA and Northern Trust, thus these entities are parties-in-interest. Also, certain other professionals, officers and employees of the Plan perform administrative functions and are compensated by the Plan. Such transactions are not deemed prohibited party-in-interest transactions because they are covered by statutory or administrative exemptions from the IRS and ERISA rules on prohibited transactions.

IBEW Local 1158 Annuity Plan
Notes to Financial Statements
Years Ended December 31, 2022 and 2021

8. Tax Status:

The Plan has been restated as of January 1, 2022 by adopting a Non-Standardized Pre-Approved Profit Sharing/Money Purchase Plan, which received a favorable opinion letter from the Internal Revenue Service dated June 30, 2020, which stated that the plan and related trust were designed in accordance with the applicable sections of the Internal Revenue Code ("IRC"). The Plan administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2022, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. Risks and Uncertainties:

Investment Risk: 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 statement of net assets available for benefits.

Concentrations: As of December 31, 2022 and 2021, there were only two contributing employers. There exists the possibility that contributions could be reduced significantly due to changing circumstances and conditions, which would have a significant negative impact on the Fund.

10. Plan Restatement:

Effective January 1, 2022, the Plan was restated through a FIS Volume Submitter Document to comply with the Internal Revenue Service Cycle 3 Defined Contribution Plan Restatement.

11. Other Matters:

On April 19, 2023, the Plan received an Internal Revenue Service Closeout Letter for the examination of the plan year ending December 31, 2019. The Close Out Letter concluded that there were two deficiencies that should be corrected going forward in the 2022 Form 5500. These corrections resulted in the identification of the Plan as a multiple-employer plan and updating the effective date of the Plan to January 1, 1999.

IBEW Local 1158 Annuity Plan
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
December 31, 2022

2022 Form 5500
 EIN: 22-0886457
 Plan #004

(a)	(b) Identity of issuer, borrower, lessor, or similar part	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	American Funds - Balanced	Investment Contract	**	\$ 4,898
	American Funds - Fundamental Investors	Investment Contract	**	7,481
	BlackRock Equity Dividend Fund	Investment Contract	**	78,661
	Carillon Eagle Sm Cap Grw R3	Investment Contract	**	6,310
	Dodge & Cox International Stock Fund	Investment Contract	**	2,215
	Fidelity Advisors New Insights Fund	Investment Contract	**	129,244
	Invesco Dev Markets Equity Fund	Investment Contract	**	520
	Invest Eqv International Equity Fund	Investment Contract	**	445
	Invesco Small Cap Equity Fund	Investment Contract	**	11,904
	Pimco Vit Real Return Port Admin	Investment Contract	**	489
*	VOYA Fixed Account	Investment Contract	**	72,001
*	VOYA Government Money Market Port I	Investment Contract	**	232
*	VOYA HighYield Portfolio	Investment Contract	**	5,368
*	VOYA Index Solution 2025 Portfolio	Investment Contract	**	41,469
*	VOYA Index Solution 2035 Portfolio	Investment Contract	**	25,295
*	VOYA Index Solution 2040 Portfolio	Investment Contract	**	12,172
*	VOYA Index Solution 2050 Portfolio	Investment Contract	**	7,303
*	VOYA Index Solution Inc P Adv	Investment Contract	**	4,074
*	VOYA Intermediate Bond Portfolio	Investment Contract	**	108,235
*	VOYA MidCap Opportunities Portfolio	Investment Contract	**	89,853
*	VOYA Russell MidCap Index Portfolio	Investment Contract	**	47,408
*	Northern Trust Collective S&P 500 Index Fund Non-Lending	Common Collective Trust	448,552	888,901
*	Morgan Stanley Account #552-112030-644	See attached details	6,713,156	6,937,998
				<u>\$ 8,482,476</u>

* Indicates a party-in-interest as defined in the Employee Security Act of 1974.

** Cost information is not presented for participant-directed investments.



Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

Cash, Deposits, Money Market Funds, and Certificates of Deposit

NET UNSETTLED PURCHASES/SALES

Security Description	Account Number	Market Value
NET UNSETTLED PURCHASES/SALES	552-030185-644	\$4,377.18
Total Net Unsettled Purchases/Sales		\$4,377.18

BANK DEPOSITS

Security Description	Account Number	Market Value
MORGAN STANLEY BANK N.A.	552-030185-644	\$10,584.06
MORGAN STANLEY BANK N.A.	552-038330-644	1,733.29
MORGAN STANLEY BANK N.A.	552-038332-644	215.59
MORGAN STANLEY BANK N.A.	552-038334-644	121,714.66
MORGAN STANLEY BANK N.A.	552-038346-644	4,288.60
MORGAN STANLEY BANK N.A.	552-038456-644	944.21
MORGAN STANLEY PRIVATE BANK NA	552-030185-644	9,335.76
MORGAN STANLEY PRIVATE BANK NA	552-038330-644	47,663.49
MORGAN STANLEY PRIVATE BANK NA	552-038332-644	7,680.54
MORGAN STANLEY PRIVATE BANK NA	552-038334-644	60,538.76
MORGAN STANLEY PRIVATE BANK NA	552-038346-644	65,289.67
MORGAN STANLEY PRIVATE BANK NA	552-038456-644	53,812.54
MORGAN STANLEY PRIVATE BANK NA	552-071764-644	681.31
Total Bank Deposits		\$384,482.48

	Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
Total Cash, Deposits, Money Market Funds and Certificates of Deposit	5.59%	\$0.00	\$0.00	\$388,859.66	\$0.00	\$0.00	\$0.00

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000131

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

US Government Securities

TREASURY SECURITIES

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
UNITED STATES TREASURY NOTE Coupon Rate 0.250%; Matures 08/31/2025; CUSIP 91282CAJ0 Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 4.263%; Moody AAA; Issued 08/31/20; Asset Class: FI & Pref	552-038330-644	350,000.00	\$89.984	\$330,697.94	\$328,773.59	\$314,945.31	\$(15,752.63)	\$(13,531.07)	\$297.21
UNITED STATES TREASURY NOTE Coupon Rate 2.625%; Matures 05/31/2027; CUSIP 91282CET4 Interest Paid Semi-Annually May/Nov; Yield to Maturity 4.051%; Moody AAA; Issued 05/31/22; Asset Class: FI & Pref	552-038330-644	123,000.00	94.285	119,963.87	120,228.52	115,970.74	(3,993.13)	(3,982.80)	274.98
UNITED STATES TREASURY NOTE Coupon Rate 1.125%; Matures 02/28/2025; CUSIP 912828ZC7 Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 4.366%; Moody AAA; Issued 03/02/20; Asset Class: FI & Pref	552-038330-644	61,000.00	93.391	62,806.35	61,315.93	56,968.28	(4,843.19)	(4,116.37)	231.28
UNITED STATES TREASURY NOTE Coupon Rate 1.125%; Matures 10/31/2026; CUSIP 91282CDG3 Interest Paid Semi-Annually Apr/Oct; Yield to Maturity 4.130%; Issued 11/01/21; Asset Class: FI & Pref	552-038330-644	172,000.00	89.445	167,592.64	169,236.36	153,845.94	(13,746.70)	(15,060.83)	329.59
UNITED STATES TREASURY NOTE Coupon Rate 2.750%; Matures 07/31/2027; CUSIP 91282CFB2 Interest Paid Semi-Annually; Yield to Maturity 4.042%; Moody AAA; Issued 08/01/22; Asset Class: FI & Pref	552-038330-644	199,000.00	94.641	188,110.71	189,712.29	188,334.84	224.13	882.93	2,260.38
UNITED STATES TREASURY NOTE Coupon Rate 1.375%; Matures 09/30/2023; CUSIP 912828T26 Interest Paid Semi-Annually Mar/Sep; Yield to Maturity 4.709%; Moody AAA; Issued 09/30/16; Asset Class: FI & Pref	552-038330-644	5,000.00	97.557	5,057.75	5,077.93	4,877.83	(145.52)	(182.72)	17.38
UNITED STATES TREASURY NOTE Coupon Rate 2.125%; Matures 03/31/2024; CUSIP 912828W71 Interest Paid Semi-Annually Mar/Sep; Yield to Maturity 4.711%; Moody AAA; Issued 03/31/17; Asset Class: FI & Pref	552-038330-644	4,000.00	96.893	4,087.36	4,116.93	3,875.70	(173.91)	(219.75)	21.48
UNITED STATES TREASURY NOTE Coupon Rate 1.375%; Matures 11/15/2031; CUSIP 91282CDJ7 Interest Paid Semi-Annually May/Nov; Yield to Maturity 3.863%; Moody AAA; Issued 11/15/21; Asset Class: FI & Pref	552-038330-644	154,000.00	81.461	148,923.39	149,262.66	125,449.84	(23,473.55)	(23,543.75)	269.07
UNITED STATES TREASURY NOTE Coupon Rate 1.250%; Matures 08/31/2024; CUSIP 912828YE4 Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 4.594%; Moody AAA; Issued 09/03/19; Asset Class: FI & Pref	552-038330-644	130,000.00	94.691	131,637.61	131,568.25	123,098.83	(7,857.50)	(7,918.87)	550.55
UNITED STATES TREASURY NOTE Coupon Rate 1.875%; Matures 02/15/2032; CUSIP 91282CDY4 Interest Paid Semi-Annually Feb/Aug; Yield to Maturity 3.864%; Moody AAA; Issued 02/15/22; Asset Class: FI & Pref	552-038330-644	167,000.00	84.828	149,517.63	150,109.46	141,662.97	(7,854.65)	(7,272.27)	1,174.22
Total Treasury Securities				\$1,308,395.25	\$1,309,401.92	\$1,229,030.28	\$(77,616.65)	\$(74,945.50)	\$5,426.14

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

FEDERAL AGENCIES

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
FEDERAL NATIONAL MTG ASSN POOL MA4654 Coupon Rate 3.500%; Matures 07/01/2052; CUSIP 31418EE48 Interest Paid Monthly; Yield to Maturity 4.022%; Factor .9767542; Issued 06/01/22; Current Face 29,302.626; Asset Class: FI & Pref	552-038330-644	30,000.00	\$91.025	\$26,008.24	\$25,901.60	\$26,672.72	\$841.61	\$856.59	\$85.47
FEDERAL NATIONAL MTG ASSN POOL MA4600 Coupon Rate 3.500%; Matures 05/01/2052; CUSIP 31418EDE7 Interest Paid Monthly; Yield to Maturity 4.026%; Factor .9636508; Issued 04/01/22; Current Face 71,310.162; Asset Class: FI & Pref	552-038330-644	74,000.00	90.986	71,673.07	69,234.26	64,882.26	(4,185.55)	(4,144.01)	207.99
FEDERAL NATIONAL MTG ASSN POOL MA4580 Coupon Rate 3.500%; Matures 04/01/2052; CUSIP 31418ECS7 Interest Paid Monthly; Yield to Maturity 4.025%; Factor .9492113; Issued 03/01/22; Current Face 121,499.049; Asset Class: FI & Pref	552-038330-644	128,000.00	91.013	127,083.95	120,954.39	110,579.93	(10,187.61)	(10,020.09)	354.37
Total Federal Agencies				\$224,765.26	\$216,090.25	\$202,134.91	\$(13,531.55)	\$(13,307.51)	\$647.83

	Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
Total Government Securities	20.66%	\$1,533,160.51	\$1,525,492.17	\$1,431,165.19	\$(91,148.20)	\$(88,253.01)	\$6,073.97

Corporate Fixed Income

CORPORATE BONDS

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
ABBVIE INC Coupon Rate 2.950%; Matures 11/21/2026; CUSIP 00287YBVO Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 09/21/26; Yield to Maturity 4.894%; Moody BAA1 S&P BBB+; Issued 05/21/20; Asset Class: FI & Pref	552-038330-644	51,000.00	\$93.188	\$53,624.46	\$53,938.51	\$47,525.88	\$(5,559.51)	\$(6,245.46)	\$167.17
AIR LEASE CORP Coupon Rate 3.250%; Matures 10/01/2029; CUSIP 00914AAE2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 07/01/29; Yield to Maturity 5.885%; S&P BBB; Issued 09/16/19; Asset Class: FI & Pref	552-038330-644	58,000.00	85.489	57,037.11	59,772.77	49,583.62	(7,453.49)	(9,717.90)	471.25
AMERICAN EXPRESS CO Coupon Rate 4.200%; Matures 11/06/2025; CUSIP 025816CA5 Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 10/06/25; Yield to Maturity 4.611%; Moody A2 S&P BBB+; Issued 11/06/18; Asset Class: FI & Pref	552-038330-644	49,000.00	98.909	56,748.86	54,221.28	48,465.41	(5,081.29)	(5,441.45)	314.42

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000132

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
BANK OF AMERICA CORP FXD TO 102024 VAR THRAFR 2.4560% Coupon Rate 2.456%; Matures 10/22/2025; CUSIP 06051GHW2 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 10/22/24; Floating Rate; Moody A2 S&P A-; Issued 10/22/19; LIBOR Linked; Asset Class: FI & Pref	552-038330-644	54,000.00	94.584	56,231.52	55,556.00	51,075.09	(4,385.35)	(4,230.40)	250.51
BANK OF AMERICA CORP FXD TO 072031 VAR THRAFR 2.2990% Coupon Rate 2.299%; Matures 07/21/2032; CUSIP 06051GKA6 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 07/21/31; Floating Rate; Moody A2 S&P A-; Issued 07/21/21; Asset Class: FI & Pref	552-038330-644	62,000.00	77.040	60,791.94	60,121.08	47,764.49	(12,974.66)	(11,727.05)	629.54
BOEING CO/THE Coupon Rate 2.196%; Matures 02/04/2026; CUSIP 097023DG7 Interest Paid Semi-Annually Feb/Aug; Callable \$100.00 on 02/04/23; Yield to Maturity 5.434%; Moody BAA2 S&P BBB-; Issued 02/04/21; Asset Class: FI & Pref	552-038330-644	53,000.00	90.895	53,041.87	53,477.37	48,174.35	(4,856.53)	(4,827.77)	475.25
CAPITAL ONE FINANCIAL CORP Coupon Rate 4.200%; Matures 10/29/2025; CUSIP 14040HBJ3 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 09/29/25; Yield to Maturity 5.407%; Moody BAA1 S&P BBB-; Issued 10/29/15; Asset Class: FI & Pref	552-038330-644	51,000.00	96.868	54,126.11	55,842.62	49,402.43	(3,166.98)	(6,071.29)	368.90
CHENIERE CORPUS CHRISTI HOLDINGS LLC Coupon Rate 5.875%; Matures 03/31/2025; CUSIP 16412XAC9 Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 10/02/24; Yield to Call 5.507%; Moody BAA3 S&P BBB-; Issued 12/09/16; Asset Class: FI & Pref	552-038330-644	41,000.00	100.597	41,480.11	42,028.77	41,244.77	(183.93)	(784.00)	
CITIGROUP INC FXD TO 012027 VAR THRAFR 3.8870% Coupon Rate 3.887%; Matures 01/10/2028; CUSIP 172967LD1 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 01/10/27; Floating Rate; Moody A3 S&P BBB+; Issued 01/10/17; LIBOR Linked; Asset Class: FI & Pref	552-038330-644	76,000.00	93.659	83,234.44	83,849.53	71,180.84	(10,729.04)	(11,273.69)	1,395.00
EDISON INTERNATIONAL Coupon Rate 5.750%; Matures 06/15/2027; CUSIP 281020AN7 Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 04/15/27; Yield to Call 5.644%; Moody BAA3 S&P BBB-; Issued 06/21/19; Asset Class: FI & Pref	552-038330-644	41,000.00	100.391	47,073.01	46,879.63	41,160.11	(3,705.81)	(5,614.74)	104.78
ENERGY TRANSFER LP Coupon Rate 5.250%; Matures 04/15/2029; CUSIP 29278NAG8 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 01/15/29; Yield to Maturity 5.834%; Moody BAA3 S&P BBB-; Issued 01/15/19; Asset Class: FI & Pref	552-038330-644	51,000.00	96.953	52,942.18	59,028.59	49,445.78	(2,910.39)	(9,017.56)	565.25
GENERAL MOTORS FINANCIAL CO INC Coupon Rate 4.300%; Matures 07/13/2025; CUSIP 37045XAZ9 Interest Paid Semi-Annually Jan/Jul; Callable \$100.00 on 04/13/25; Yield to Maturity 5.551%; Moody BAA3 S&P BBB-; Issued 07/13/15; Asset Class: FI & Pref	552-038330-644	51,000.00	97.080	56,880.30	56,019.25	49,510.80	(4,750.34)	(5,485.05)	1,023.40
GOLDMAN SACHS GROUP INC/THE FX D TO 122025 VAR THRAFR 1.093% Coupon Rate 1.093%; Matures 12/09/2026; CUSIP 38141GXM1 Interest Paid Semi-Annually Jun/Dec; Callable \$100.00 on 12/09/25; Floating Rate; Moody A2 S&P BBB+; Issued 12/09/20; Asset Class: FI & Pref	552-038330-644	56,000.00	88.358	49,176.53	49,350.20	49,480.20	303.68	165.70	35.70

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

CORPORATE BONDS (CONTINUED)

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
HEWLETT PACKARD ENTERPRISE CO Coupon Rate 4.900%; Matures 10/15/2025; CUSIP 42824CAW9 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 07/15/25; Yield to Maturity 5.250%; Moody BAA2 S&P BBB; Issued 10/15/16; Asset Class: FI & Pref	552-038330-644	48,000.00	99.095	48,856.80	49,614.67	47,565.60	(1,189.19)	(1,552.54)	496.53
JPMORGAN CHASE & CO FXD TO 042025 VAR THRAFR 4% Coupon Rate 4.000%; Perpetual Maturity; CUSIP 48128BAH4 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 04/01/25; Floating Rate; Moody BAA2 S&P BBB-; Issued 02/24/20; Pays Div; Asset Class: FI & Pref	552-038330-644	30,000.00	85.634	26,391.67	30,450.00	25,690.20	(701.47)	(4,463.13)	296.67
JPMORGAN CHASE & CO FXD TO 032024 VAR THRAFR 3.2200% Coupon Rate 3.220%; Matures 03/01/2025; CUSIP 46647PAH9 Interest Paid Semi-Annually Mar/Sep; Callable \$100.00 on 03/01/24; Floating Rate; Moody A1 S&P A-; Issued 06/01/17; LIBOR Linked; Asset Class: FI & Pref	552-038330-644	51,000.00	97.230	51,455.64	53,574.14	49,587.30	(1,637.48)	(3,444.00)	542.84
NORTHERN TRUST CORP Coupon Rate 6.125%; Matures 11/02/2032; CUSIP 665859AX2 Interest Paid Semi-Annually; Callable \$100.00 on 08/02/32; Yield to Call 5.336%; First Coupon 05/02/23; Moody A2 S&P A; Issued 11/02/22; Asset Class: FI & Pref	552-038330-644	49,000.00	105.855	51,239.30	51,489.40	51,868.95	645.46	871.42	491.87
T-MOBILE USA INC Coupon Rate 4.750%; Matures 02/01/2028; CUSIP 87264AAV7 Interest Paid Semi-Annually Feb/Aug; Callable \$102.37 on 02/01/23; Yield to Maturity 5.328%; Moody BAA3 S&P BBB-; Issued 01/25/18; Asset Class: FI & Pref	552-038330-644	49,000.00	97.454	48,758.56	48,877.97	47,752.22	(1,006.34)	(155.96)	969.79
WELLS FARGO & CO FXD TO 022025 VAR THRAFR 2.1640% Coupon Rate 2.164%; Matures 02/11/2026; CUSIP 95000U2K8 Interest Paid Semi-Annually Feb/Aug; Callable \$100.00 on 02/11/25; Floating Rate; Moody A1 S&P BBB+; Issued 02/11/20; LIBOR Linked; Asset Class: FI & Pref	552-038330-644	14,000.00	93.298	14,643.72	14,332.30	13,061.72	(1,345.46)	(1,153.60)	116.98
WELLS FARGO & CO FXD TO 042025 VAR THRAFR 3.908% Coupon Rate 3.908%; Matures 04/25/2026; CUSIP 95000U2X0 Interest Paid Semi-Annually Apr/Oct; Callable \$100.00 on 04/25/25; Floating Rate; Moody A1 S&P BBB+; Issued 04/25/22; Asset Class: FI & Pref	552-038330-644	68,000.00	97.282	65,361.60	65,516.62	66,151.42	789.82	1,114.62	479.82
ZIMMER BIOMET HOLDINGS INC Coupon Rate 1.450%; Matures 11/22/2024; CUSIP 98956PAU6 Interest Paid Semi-Annually May/Nov; Callable \$100.00 on 01/29/23; Yield to Maturity 5.350%; Moody BAA3 S&P BBB; Issued 11/24/21; Asset Class: FI & Pref	552-038330-644	53,000.00	93.069	50,661.11	50,945.03	49,326.57	(1,334.54)	(1,535.21)	83.25
Total Corporate Bonds				\$1,079,756.84	\$1,094,885.73	\$995,017.75	\$(71,232.84)	\$(90,589.06)	\$9,278.92

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000133

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

OTHER FIXED INCOME

Security Description	Account Number	Face Value	Unit Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
CAPITAL ONE MULTI TR 2021-3 A Coupon Rate 1.040%; Matures 11/16/2026; CUSIP 14041NFY2 Interest Paid Monthly; Yield to Maturity 2.849%; S&P AAA; Issued 11/30/21; Asset Class: FI & Pref	552-038330-644	104,000.00	\$93.408	\$103,985.64	\$103,651.01	\$97,144.34	\$(6,841.30)	\$(6,458.60)	\$48.07
Total Other Fixed Income				\$103,985.64	\$103,651.01	\$97,144.34	\$(6,841.30)	\$(6,458.60)	\$48.07

	Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)	Accrued Income
Total Fixed Income	15.83%	\$1,183,742.48	\$1,198,536.74	\$1,092,162.09	\$(78,074.14)	\$(97,047.66)	\$9,326.99

Stocks

COMMON STOCKS

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ACADIA HEALTHCARE COMPANY INC (ACHC) Asset Class: Equities	552-038332-644	91.000	\$82.320	\$5,709.69	\$5,529.94	\$7,491.12	\$1,781.43	\$1,961.18
AGREE REALTY CORP (ADC) Next Dividend Payable 01/13/23; Asset Class: Alt	552-038332-644	98.000	70.930	6,609.13	6,609.13	6,951.14	342.01	342.01
AIA GROUP LTD SPON ADR (AAGIY) Asset Class: Equities	552-030185-644	314.000	44.485	11,749.82	12,666.50	13,968.29	2,218.48	1,301.79
AIR LIQUIDE ADR (AIQUY) Asset Class: Equities	552-030185-644	373.000	28.261	12,097.64	12,147.69	10,541.35	(1,556.29)	(1,606.34)
ALTRIA GROUP INC (MO) Next Dividend Payable 01/10/23; Asset Class: Equities	552-038456-644	770.000	45.710	27,821.98	36,156.73	35,196.70	7,374.72	(960.03)
AMADEUS IT GROUP S.A ADR (AMADY) Asset Class: Equities	552-030185-644	272.000	51.815	16,150.52	15,558.25	14,093.68	(2,056.82)	(1,464.57)
APTARGROUP INC (ATR) Next Dividend Payable 02/2023; Asset Class: Equities	552-038332-644	37.000	109.980	4,937.20	4,523.14	4,069.26	(867.94)	(453.88)
ARKEMA SPONS ADR (ARKAY) Asset Class: Equities	552-030185-644	114.000	89.521	15,485.59	15,988.56	10,205.39	(5,280.21)	(5,783.17)
ARTISAN PARTNERS ASSET MGMT (APAM) Next Dividend Payable 02/2023; Asset Class: Equities	552-038332-644	66.000	29.700	3,233.34	3,133.23	1,960.20	(1,273.14)	(1,173.03)

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ASHTAD GROUP PLC ADR (ASHTY)	552-030185-644	54.000	227.109	10,759.03	15,343.61	12,263.89	1,504.86	(3,079.72)
Asset Class: Equities								
ASML HOLDING NV NY REG NEW (ASML)	552-030185-644	24.000	546.400	8,642.41	17,297.48	13,113.60	4,471.19	(4,183.88)
Asset Class: Equities								
AT&T INC (T)	552-038456-644	2,382.000	18.410	53,748.39	58,597.20	43,852.62	(9,895.77)	(14,744.58)
Next Dividend Payable 02/2023; Asset Class: Equities								
ATKORE INC (ATKR)	552-038332-644	58.000	113.420	5,999.15	5,999.15	6,578.36	579.21	579.21
Asset Class: Equities								
ATLANTIC UN BANKSHARES CORP (AUB)	552-038332-644	185.000	35.140	6,920.31	6,912.33	6,500.90	(419.41)	(411.43)
Next Dividend Payable 02/2023; Asset Class: Equities								
AZENTA INC (AZTA)	552-038332-644	57.000	58.220	4,512.03	5,829.49	3,318.54	(1,193.49)	(2,510.95)
Asset Class: Equities								
BANK OF AMERICA CORP (BAC)	552-038456-644	1,503.000	33.120	41,594.05	66,355.43	49,779.36	8,185.31	(16,576.07)
Next Dividend Payable 03/2023; Asset Class: Equities								
BCE INC (BCE)	552-038456-644	1,189.000	43.950	53,325.53	61,875.56	52,256.55	(1,068.98)	(9,619.01)
Next Dividend Payable 01/16/23; Asset Class: Equities								
BEIERSDORF AG UNSPONS ADR (BDRFY)	552-030185-644	275.000	22.882	5,853.83	5,831.32	6,292.55	438.72	461.23
Asset Class: Equities								
BIO RAD LAB A (BIO)	552-038332-644	16.000	420.490	10,623.06	10,393.90	6,727.84	(3,895.22)	(3,666.06)
Asset Class: Equities								
BJS WHSL CLUB HLDGS INC (BJ)	552-038332-644	181.000	66.160	10,300.09	12,071.95	11,974.96	1,674.87	(96.99)
Asset Class: Equities								
BOOZ ALLEN HAMILTON HLDG CL-A (BAH)	552-038332-644	94.000	104.520	7,586.49	7,782.97	9,824.88	2,238.39	2,041.91
Next Dividend Payable 03/2023; Asset Class: Equities								
BOSTON PROPERTIES INC (BXP)	552-038456-644	316.000	67.580	35,417.30	35,417.30	21,355.28	(14,062.02)	(14,062.02)
Next Dividend Payable 01/30/23; Asset Class: Alt								
BRIGHT HORIZONS FAMILY SOLUT (BFAM)	552-038332-644	47.000	63.100	6,416.44	5,930.97	2,965.70	(3,450.74)	(2,965.27)
Asset Class: Equities								
BROADCOM INC (AVGO)	552-030185-644	49.000	559.130	10,019.76	30,706.37	27,397.37	17,377.61	(3,309.00)
Next Dividend Payable 03/2023; Asset Class: Equities								
BROADCOM INC (AVGO)	552-038456-644	98.000	559.130	35,197.34	65,210.18	54,794.74	19,597.40	(10,415.44)
Next Dividend Payable 03/2023; Asset Class: Equities								
BURLINGTON STORES INC (BURL)	552-038332-644	31.000	202.760	9,515.01	8,353.85	6,285.56	(3,229.45)	(2,068.29)
Asset Class: Equities								
CARLSBERG AS (CABGY)	552-030185-644	362.000	26.499	8,727.03	12,271.21	9,592.64	865.62	(2,678.57)
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000134

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
CARTER'S (CRI)	552-038332-644	72.000	74.610	6,603.97	6,475.11	5,371.92	(1,232.05)	(1,103.19)
Next Dividend Payable 03/2023; Asset Class: Equities								
CATALENT INC (CTLT)	552-038332-644	154.000	45.010	12,588.85	12,786.07	6,931.54	(5,657.31)	(5,854.53)
Asset Class: Equities								
CAVCO INDUSTRIES INC (CVCO)	552-038332-644	34.000	226.250	8,587.49	10,705.80	7,692.50	(894.99)	(3,013.30)
Asset Class: Equities								
CGI INC CL A SUB VTG (GIB)	552-030185-644	185.000	86.130	8,730.73	16,166.12	15,934.05	7,203.32	(232.07)
Asset Class: Equities								
CHAMPIONX CORPORATION (CHX)	552-038332-644	126.000	28.990	2,583.84	2,583.84	3,652.74	1,068.90	1,068.90
Next Dividend Payable 01/2023; Asset Class: Equities								
CHEVRON CORP (CVX)	552-038456-644	369.000	179.490	34,811.72	43,302.15	66,231.81	31,420.09	22,929.66
Next Dividend Payable 03/2023; Asset Class: Equities								
CHINA MENGNIU DAIRY CO LTD ADR (CIADY)	552-030185-644	263.000	45.356	11,614.67	14,976.49	11,928.63	313.96	(3,047.86)
Asset Class: Equities								
CHINA RES BEER HLDG CO LTD ADR (CRHKY)	552-030185-644	879.000	13.978	12,469.85	12,865.37	12,286.66	(183.19)	(578.71)
Asset Class: Equities								
CHUBB LTD (CB)	552-038456-644	325.000	220.600	34,462.39	62,825.75	71,695.00	37,232.61	8,869.25
Next Dividend Payable 01/06/23; Asset Class: Equities								
CISCO SYS INC (CSCO)	552-038456-644	949.000	47.640	22,360.99	58,458.99	45,210.36	22,849.37	(13,248.63)
Next Dividend Payable 01/2023; Asset Class: Equities								
CITIGROUP INC NEW (C)	552-038456-644	881.000	45.230	54,663.50	50,845.98	39,847.63	(14,815.87)	(10,998.35)
Next Dividend Payable 02/2023; Asset Class: Equities								
COGNEX CORP (CGNX)	552-038332-644	172.000	47.110	12,324.11	11,701.71	8,102.92	(4,221.19)	(3,598.79)
Next Dividend Payable 03/2023; Asset Class: Equities								
COLUMBUS MCKINNON CORP (CMCO)	552-038332-644	144.000	32.470	6,936.11	6,626.19	4,675.68	(2,260.43)	(1,950.51)
Next Dividend Payable 02/2023; Asset Class: Equities								
COMCAST CORP (NEW) CLASS A (CMCSA)	552-038456-644	934.000	34.970	37,524.66	37,524.66	32,661.98	(4,862.68)	(4,862.68)
Next Dividend Payable 01/25/23; Asset Class: Equities								
COMFORT SYSTEMS USA INC (FIX)	552-038332-644	68.000	115.080	5,082.57	6,675.00	7,825.44	2,742.87	1,150.44
Next Dividend Payable 02/2023; Asset Class: Equities								
CONOCOPHILLIPS (COP)	552-038456-644	389.000	118.000	18,340.70	29,651.62	45,902.00	27,561.30	16,250.38
Next Dividend Payable 01/13/23; Asset Class: Equities								
CRH PLC ADR (CRH)	552-030185-644	317.000	39.790	13,960.89	16,602.02	12,613.43	(1,347.46)	(3,988.59)
Asset Class: Equities								
CSL LTD (CSLLY)	552-030185-644	127.000	97.572	10,466.40	12,688.12	12,391.64	1,925.24	(296.48)
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
CYBERARK SOFTWARE LTD SHS (CYBR)	552-038332-644	50.000	129.650	7,654.80	7,654.80	6,482.50	(1,172.30)	(1,172.30)
Asset Class: Equities								
DEUTSCHE BOERSE AG UNSPON ADR (DBOY)	552-030185-644	814.000	17.225	11,137.65	13,516.56	14,021.15	2,883.54	504.59
Asset Class: Equities								
DIAGEO PLC SPON ADR NEW (DEO)	552-038456-644	134.000	178.190	10,507.04	29,231.61	23,877.46	13,370.42	(5,354.15)
Asset Class: Equities								
DORMAN PRODUCTS, INC (DORM)	552-038332-644	76.000	80.870	7,327.46	8,449.01	6,146.12	(1,181.34)	(2,302.89)
Asset Class: Equities								
DOW INC (DOW)	552-038456-644	730.000	50.390	34,429.11	40,137.87	36,784.70	2,355.57	(3,353.17)
Next Dividend Payable 03/2023; Asset Class: Equities								
DUKE ENERGY CORPORATION (DUK)	552-038456-644	571.000	102.990	51,164.10	58,995.14	58,807.29	7,643.19	(187.85)
Next Dividend Payable 03/2023; Asset Class: Equities								
EAGLE MATLS INC (EXP)	552-038332-644	64.000	132.850	9,529.87	10,515.45	8,502.40	(1,027.47)	(2,013.05)
Next Dividend Payable 01/12/23; Asset Class: Equities								
EASTERLY GOVT PPTYS INC COM (DEA)	552-038332-644	331.000	14.270	7,187.03	7,523.64	4,723.37	(2,463.66)	(2,800.27)
Next Dividend Payable 02/2023; Asset Class: Alt								
EASTGROUP PROPERTIES INC (EGP)	552-038332-644	39.000	148.060	6,406.92	6,406.92	5,774.34	(632.58)	(632.58)
Next Dividend Payable 01/13/23; Asset Class: Alt								
ELEMENT SOLUTIONS INC (ESI)	552-038332-644	526.000	18.190	11,950.71	12,714.88	9,567.94	(2,382.77)	(3,146.94)
Next Dividend Payable 03/2023; Asset Class: Equities								
ENTEGRIS INC (ENTG)	552-038332-644	92.000	65.590	10,197.74	12,221.35	6,034.28	(4,163.46)	(6,187.07)
Next Dividend Payable 02/2023; Asset Class: Equities								
EXPONENT INC (EXPO)	552-038332-644	63.000	99.090	7,234.40	7,308.69	6,242.67	(991.73)	(1,066.02)
Next Dividend Payable 03/2023; Asset Class: Equities								
EXXON MOBIL CORP (XOM)	552-038456-644	582.000	110.300	25,102.56	35,612.58	64,194.60	39,092.04	28,582.02
Next Dividend Payable 03/2023; Asset Class: Equities								
FANUC CORPORATION UNSP ADR (FANUY)	552-030185-644	996.000	15.033	15,747.83	17,655.08	14,972.87	(774.96)	(2,682.21)
Asset Class: Equities								
FEDERAL SIGNAL CORP (FSS)	552-038332-644	182.000	46.470	7,011.04	7,745.44	8,457.54	1,446.50	712.10
Next Dividend Payable 03/2023; Asset Class: Equities								
FIVE BELOW (FIVE)	552-038332-644	52.000	176.870	11,285.67	10,614.42	9,197.24	(2,088.43)	(1,417.18)
Asset Class: Equities								
FLUTTER ENTMT PLC ADR (PDYPY)	552-030185-644	130.000	68.197	6,666.28	10,260.78	8,865.61	2,199.33	(1,395.17)
Asset Class: Equities								
GATES INDUSTRIAL CORP PLC (GTES)	552-038332-644	514.000	11.410	8,249.34	8,145.99	5,864.74	(2,384.60)	(2,281.25)
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000135

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
GENL DYNAMICS CORP (GD)	552-038456-644	215.000	248.110	34,666.43	44,821.05	53,343.65	18,677.22	8,522.60
Next Dividend Payable 02/2023; Asset Class: Equities								
GENTHERM INC COM (THRM)	552-038332-644	84.000	65.290	6,878.19	7,269.42	5,484.36	(1,393.83)	(1,785.06)
Asset Class: Equities								
GENUINE PARTS CO (GPC)	552-038456-644	340.000	173.510	18,186.42	47,668.00	58,993.40	40,806.98	11,325.40
Next Dividend Payable 01/03/23; Asset Class: Equities								
GIBRALTAR INDUSTRIES INC (ROCK)	552-038332-644	125.000	45.880	8,093.78	7,620.70	5,735.00	(2,358.78)	(1,885.70)
Asset Class: Equities								
GLACIER BANCORP INC NEW (GBCI)	552-038332-644	99.000	49.420	5,255.29	5,581.46	4,892.58	(362.71)	(688.88)
Next Dividend Payable 03/2023; Asset Class: Equities								
GLOBANT S.A (GLOB)	552-038332-644	48.000	168.160	11,818.54	12,846.45	8,071.68	(3,746.86)	(4,774.77)
Asset Class: Equities								
GLOBUS MEDICAL INC A (GMED)	552-038332-644	113.000	74.270	8,487.67	7,983.58	8,392.51	(95.16)	408.93
Asset Class: Equities								
GRAND CANYON ED INC COM (LOPE)	552-038332-644	43.000	105.660	3,722.49	3,697.23	4,543.38	820.89	846.15
Asset Class: Equities								
GRUPO AEROPORTUARIO DEL (PAC)	552-030185-644	44.000	143.810	2,618.94	6,052.86	6,327.64	3,708.70	274.78
Asset Class: Equities								
HALEON PLC ADR (HLN)	552-030185-644	1,131.000	8.000	8,720.01	8,720.01	9,048.00	327.99	327.99
Asset Class: Equities								
HALOZYME THERAPEUTICS INC (HALO)	552-038332-644	126.000	56.900	5,431.79	5,431.79	7,169.40	1,737.61	1,737.61
Asset Class: Equities								
HDFC BANK LTD ADR (HDB)	552-030185-644	283.000	68.410	12,465.06	18,489.51	19,360.03	6,894.97	870.52
Asset Class: Equities								
HEALTHPEAK PPTYS INC (PEAK)	552-038456-644	1,722.000	25.070	50,975.08	58,157.77	43,170.54	(7,804.54)	(14,987.23)
Next Dividend Payable 02/2023; Asset Class: Alt								
HEINEKEN NV SPN ADR (HEINY)	552-030185-644	298.000	46.895	15,018.17	16,844.22	13,974.71	(1,043.44)	(2,869.51)
Asset Class: Equities								
HEXCEL CORP NEW (HXL)	552-038332-644	110.000	58.850	6,016.82	5,729.65	6,473.50	456.68	743.85
Next Dividend Payable 02/2023; Asset Class: Equities								
HOLOGIC INC (HOLX)	552-038332-644	74.000	74.810	5,183.91	5,183.91	5,535.94	352.03	352.03
Asset Class: Equities								
HORIZON THERAPEUTICS PUB LTD (HZNP)	552-038332-644	123.000	113.800	12,890.90	13,175.42	13,997.40	1,106.50	821.98
Asset Class: Equities								
HOYA CORP SPONS ADR (HOCPY)	552-030185-644	100.000	96.290	7,122.64	14,331.94	9,629.00	2,506.36	(4,702.94)
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
HUBSPOT, INC. (HUBS)	552-038332-644	26.000	289.130	11,900.82	11,871.23	7,517.38	(4,383.44)	(4,353.85)
Asset Class: Equities								
HUSQUARVA AB SPONS ADR (HSQVY)	552-030185-644	371.000	14.035	9,299.18	9,467.34	5,206.99	(4,092.18)	(4,260.35)
Asset Class: Equities								
ICON PLC (ICLR)	552-030185-644	100.000	194.250	19,873.19	25,925.65	19,425.00	(448.19)	(6,500.65)
Asset Class: Equities								
IDACORP INC (IDA)	552-038332-644	73.000	107.850	7,910.76	8,204.10	7,873.05	(37.71)	(331.05)
Next Dividend Payable 02/2023; Asset Class: Equities								
INGERSOLL RAND INC (IR)	552-038332-644	196.000	52.250	9,708.53	11,663.62	10,241.00	532.47	(1,422.62)
Next Dividend Payable 03/2023; Asset Class: Equities								
INTEGER HOLDINGS CORP (ITGR)	552-038332-644	77.000	68.460	7,050.99	6,401.30	5,271.42	(1,779.57)	(1,129.88)
Asset Class: Equities								
INTEL CORP (INTC)	552-038456-644	1,518.000	26.430	61,131.83	74,588.61	40,120.74	(21,011.09)	(34,467.87)
Next Dividend Payable 03/2023; Asset Class: Equities								
INTRA-CELLULAR THERAPIES INC (ITCI)	552-038332-644	109.000	52.920	6,017.00	6,017.00	5,768.28	(248.72)	(248.72)
Asset Class: Equities								
JAZZ PHARMACEUTICALS PLC (JAZZ)	552-038332-644	51.000	159.310	6,835.95	6,526.81	8,124.81	1,288.86	1,598.00
Asset Class: Equities								
JD COM INC SPON ADR CL A (JD)	552-030185-644	193.000	56.130	10,343.03	12,119.33	10,833.09	490.06	(1,286.24)
Asset Class: Equities								
JOHNSON & JOHNSON (JNJ)	552-038456-644	400.000	176.650	32,798.95	68,428.00	70,660.00	37,861.05	2,232.00
Next Dividend Payable 03/2023; Asset Class: Equities								
JOHNSON CTLS INTL PLC (JCI)	552-038456-644	1,092.000	64.000	47,060.28	79,184.98	69,888.00	22,827.72	(9,296.98)
Next Dividend Payable 01/13/23; Asset Class: Equities								
JPMORGAN CHASE & CO (JPM)	552-038456-644	541.000	134.100	35,896.89	79,706.16	72,548.10	36,651.21	(7,158.06)
Next Dividend Payable 01/2023; Asset Class: Equities								
KIMBERLY CLARK CORP (KMB)	552-038456-644	382.000	135.750	36,877.00	54,078.67	51,856.50	14,979.50	(2,222.17)
Next Dividend Payable 01/04/23; Asset Class: Equities								
KINSALE CAP GROUP INC (KNSL)	552-038332-644	32.000	261.520	5,947.10	7,543.06	8,368.64	2,421.54	825.58
Next Dividend Payable 03/2023; Asset Class: Equities								
KOMATSU LTD SPON ADR NEW (KMTUY)	552-030185-644	330.000	21.797	6,327.89	7,173.67	7,193.01	865.12	19.34
Asset Class: Equities								
KRISPY KREME INC (DNUT)	552-038332-644	183.000	10.320	2,651.74	2,651.74	1,888.56	(763.18)	(763.18)
Next Dividend Payable 02/2023; Asset Class: Equities								
KUEHNE & NAGEL INTL AG ADR (KHNGY)	552-030185-644	102.000	46.520	2,951.33	6,272.46	4,745.04	1,793.71	(1,527.42)
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000136

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
LANCASTER COLONY CRP (LANC) Next Dividend Payable 03/2023; Asset Class: Equities	552-038332-644	42.000	197.300	7,759.44	6,958.05	8,286.60	527.16	1,328.55
LINCOLN ELEC HLDGS INC (LECO) Next Dividend Payable 01/13/23; Asset Class: Equities	552-038332-644	52.000	144.490	7,183.23	7,183.23	7,513.48	330.25	330.25
LINDE PLC (LIN) Next Dividend Payable 03/2023; Asset Class: Equities	552-030185-644	35.000	326.180	8,023.91	11,386.71	11,416.30	3,392.39	29.59
LITHIA MTRS INC (LAD) Next Dividend Payable 02/2023; Asset Class: Equities	552-038332-644	33.000	204.740	10,861.84	9,881.33	6,756.42	(4,105.42)	(3,124.91)
LOGITECH INTL SA (LOGI) Next Dividend Payable 09/2023; Asset Class: Equities	552-030185-644	119.000	61.673	8,109.58	9,946.58	7,339.11	(770.47)	(2,607.47)
LOWES COMPANIES INC (LOW) Next Dividend Payable 02/2023; Asset Class: Equities	552-038456-644	186.000	199.240	19,451.03	45,891.85	37,058.64	17,607.61	(8,833.21)
LVMH MOET HENNESSY LOUIS VUITT (LVMUY) Asset Class: Equities	552-030185-644	142.000	145.124	15,378.23	21,098.80	20,607.61	5,229.39	(491.19)
MAGNA INTERNATIONAL INC (MGA) Next Dividend Payable 03/2023; Asset Class: Equities	552-030185-644	183.000	56.180	15,604.79	15,030.06	10,280.94	(5,323.85)	(4,749.12)
MAGNOLIA OIL & GAS CORP CL A (MGY) Next Dividend Payable 03/2023; Asset Class: Equities	552-038332-644	252.000	23.450	6,173.94	6,173.94	5,909.40	(264.54)	(264.54)
MANHATTAN ASSOC INC (MANH) Asset Class: Equities	552-038332-644	91.000	121.400	13,872.06	13,698.15	11,047.40	(2,824.66)	(2,650.75)
MARKETAXESS HOLDINGS INC (MKTX) Next Dividend Payable 02/2023; Asset Class: Equities	552-038332-644	17.000	278.890	4,095.05	4,095.05	4,741.13	646.08	646.08
MEDTRONIC PLC SHS (MDT) Next Dividend Payable 01/13/23; Asset Class: Equities	552-038456-644	606.000	77.720	60,540.99	62,286.17	47,098.32	(13,442.67)	(15,187.85)
MERCADOLIBRE INC (MELI) Asset Class: Equities	552-030185-644	6.000	846.240	5,953.27	5,953.27	5,077.44	(875.83)	(875.83)
MERCK & CO INC NEW COM (MRK) Next Dividend Payable 01/09/23; Asset Class: Equities	552-038456-644	580.000	110.950	27,354.47	44,840.87	64,351.00	36,996.53	19,510.13
MICROSOFT CORP (MSFT) Next Dividend Payable 03/2023; Asset Class: Equities	552-038456-644	74.000	239.820	3,744.84	24,320.54	17,746.68	14,001.84	(6,573.86)
MOLINA HEALTHCARE INC (MOH) Asset Class: Equities	552-038332-644	21.000	330.220	5,568.99	6,647.78	6,934.62	1,365.63	286.84
MORGAN STANLEY (MS) Next Dividend Payable 02/2023; Asset Class: Equities	552-038456-644	716.000	85.020	29,863.47	69,225.74	60,874.32	31,010.85	(8,351.42)
NATIONAL STORAGE AFFILIATES TR (NSA) Next Dividend Payable 03/2023; Asset Class: Alt	552-038332-644	84.000	36.120	4,604.94	4,604.94	3,034.08	(1,570.86)	(1,570.86)

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
NESTLE SPON ADR REP REG SHR (NSRGY)	552-030185-644	123.000	115.802	13,642.73	16,666.40	14,243.65	600.92	(2,422.75)
Asset Class: Equities								
NEUROCRINE BIOSCIENCES INC (NBIX)	552-038332-644	77.000	119.440	6,992.01	6,614.47	9,196.88	2,204.87	2,582.41
Asset Class: Equities								
NEXTERA ENERGY INC (NEE)	552-038456-644	764.000	83.600	20,806.38	70,318.86	63,870.40	43,064.02	(6,448.46)
Next Dividend Payable 03/2023; Asset Class: Equities								
NORDSON CP (NDSN)	552-038332-644	44.000	237.720	10,122.09	11,128.20	10,459.68	337.59	(668.52)
Next Dividend Payable 01/03/23; Asset Class: Equities								
NOVARTIS AG ADR (NVS)	552-038456-644	683.000	90.720	49,579.44	59,742.01	61,961.76	12,382.32	2,219.75
Asset Class: Equities								
NOVO NORDISK A/S ADR (NVO)	552-030185-644	125.000	135.340	8,933.72	13,647.34	16,917.50	7,983.78	3,270.16
Asset Class: Equities								
OLYMPUS CORPORATION SPONS ADR (OCPNY)	552-030185-644	955.000	17.826	19,389.25	21,243.39	17,023.83	(2,365.42)	(4,219.56)
Asset Class: Equities								
OVINTIV INC (OVV)	552-038332-644	112.000	50.710	5,606.40	5,606.40	5,679.52	73.12	73.12
Next Dividend Payable 03/2023; Asset Class: Equities								
PAYLOCITY HOLDING CORPORATION (PCTY)	552-038332-644	43.000	194.260	10,732.73	10,076.08	8,353.18	(2,379.55)	(1,722.90)
Asset Class: Equities								
PERFORMANCE FOOD GROUP CO (PFGC)	552-038332-644	162.000	58.390	7,590.22	7,832.78	9,459.18	1,868.96	1,626.40
Asset Class: Equities								
PERNOD RICARD SA ADR (PRNDY)	552-030185-644	230.000	39.221	6,555.57	11,127.03	9,020.83	2,465.27	(2,106.20)
Asset Class: Equities								
PFIZER INC (PFE)	552-038456-644	1,074.000	51.240	32,852.61	63,419.70	55,031.76	22,179.15	(8,387.94)
Next Dividend Payable 03/2023; Asset Class: Equities								
PHILIP MORRIS INTL INC (PM)	552-038456-644	633.000	101.210	52,677.93	60,135.00	64,065.93	11,388.00	3,930.93
Next Dividend Payable 01/11/23; Asset Class: Equities								
PHYSICIANS REALTY TRUST (DOC)	552-038332-644	342.000	14.470	6,301.06	6,386.64	4,948.74	(1,352.32)	(1,437.90)
Next Dividend Payable 01/18/23; Asset Class: Alt								
PINNACLE FINCL PARTNERS INC (PNFP)	552-038332-644	125.000	73.400	8,916.60	11,932.53	9,175.00	258.40	(2,757.53)
Next Dividend Payable 02/2023; Asset Class: Equities								
PIPER SANDLER COMPANIES (PIPR)	552-038332-644	57.000	130.190	7,989.99	10,008.79	7,420.83	(569.16)	(2,587.96)
Next Dividend Payable 03/2023; Asset Class: Equities								
POLARIS INC (PII)	552-038332-644	78.000	101.000	9,658.64	8,617.61	7,878.00	(1,780.64)	(739.61)
Next Dividend Payable 03/2023; Asset Class: Equities								
PORTLAND GENERAL ELEC CO (POR)	552-038332-644	122.000	49.000	6,266.23	6,432.04	5,978.00	(288.23)	(454.04)
Next Dividend Payable 01/17/23; Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000137

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
POWER INTEGRATIONS INC (POWI) Next Dividend Payable 03/2023; Asset Class: Equities	552-038332-644	58.000	71.720	5,258.53	5,323.13	4,159.76	(1,098.77)	(1,163.37)
PROPETRO HOLDING CORP (PUMP) Asset Class: Equities	552-038332-644	273.000	10.370	3,634.21	3,634.21	2,831.01	(803.20)	(803.20)
QUAKER HOUGHTON (KWR) Next Dividend Payable 01/2023; Asset Class: Equities	552-038332-644	37.000	166.900	8,760.51	8,375.19	6,175.30	(2,585.21)	(2,199.89)
R P M INC (RPM) Next Dividend Payable 01/2023; Asset Class: Equities	552-038332-644	86.000	97.450	7,221.34	8,529.43	8,380.70	1,159.36	(148.73)
RAPID7 INC (RPD) Asset Class: Equities	552-038332-644	91.000	33.980	10,042.06	10,640.29	3,092.18	(6,949.88)	(7,548.11)
RAYTHEON TECHNOLOGIES CORP (RTX) Next Dividend Payable 03/2023; Asset Class: Equities	552-038456-644	546.000	100.920	21,735.59	46,988.76	55,102.32	33,366.73	8,113.56
RBC BEARINGS INC (RBC) Asset Class: Equities	552-038332-644	47.000	209.350	10,030.66	9,426.73	9,839.45	(191.21)	412.72
RECKITT BENCKISER PLC SPNS ADR (RBGLY) Asset Class: Equities	552-030185-644	1,271.000	13.843	21,430.24	21,965.74	17,594.45	(3,835.79)	(4,371.29)
RITCHIE BROTHERS AUCTIONEERS (RBA) Next Dividend Payable 03/2023; Asset Class: Equities	552-030185-644	196.000	57.830	11,580.55	11,976.55	11,334.68	(245.87)	(641.87)
ROCHE HOLDINGS ADR (RHHBY) Asset Class: Equities	552-030185-644	215.000	39.150	8,890.37	10,745.97	8,417.25	(473.12)	(2,328.72)
SANDVIK AB SPONS ADR (SDVKY) Asset Class: Equities	552-030185-644	1,030.000	18.082	20,576.45	28,127.71	18,624.46	(1,952.01)	(9,503.25)
SCHNEIDER ELEC SA UNSP ADR (SBGSY) Asset Class: Equities	552-030185-644	633.000	27.902	11,066.39	23,905.20	17,661.97	6,595.55	(6,243.23)
SCHNEIDER NATIONAL INC CL B (SNDR) Next Dividend Payable 01/10/23; Asset Class: Equities	552-038332-644	152.000	23.400	3,406.47	4,084.38	3,556.80	150.33	(527.58)
SHELL PLC ADR (SHEL) Asset Class: Equities	552-030185-644	127.000	56.950	6,721.89	6,721.89	7,232.65	510.76	510.76
SIEMENS AKTIENGESSELLSCHAFT (SIEGY) Asset Class: Equities	552-038456-644	792.000	69.179	48,586.80	60,837.22	54,789.77	6,202.98	(6,047.45)
SIGNATURE BANK/NEW YORK NY (SBNY) Next Dividend Payable 02/2023; Asset Class: Equities	552-038332-644	48.000	115.220	12,007.65	15,484.09	5,530.56	(6,477.09)	(9,953.53)
SILICON LAB INC (SLAB) Asset Class: Equities	552-038332-644	51.000	135.670	7,943.00	10,256.67	6,919.17	(1,023.83)	(3,337.50)
SM ENERGY COMPANY (SM) Next Dividend Payable 05/2023; Asset Class: Equities	552-038332-644	153.000	34.830	6,434.90	6,434.90	5,328.99	(1,105.91)	(1,105.91)

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
SMC CORP JAPAN SPONSORED ADR (SMCAY)	552-030185-644	306.000	21.062	6,755.24	9,629.43	6,444.97	(310.27)	(3,184.46)
Asset Class: Equities								
SONY GROUP CORPORATION ADR (SONY)	552-030185-644	111.000	76.280	7,641.57	12,364.46	8,467.08	825.51	(3,897.38)
Asset Class: Equities								
SUMMIT HOTEL PROPERTIES INC (INN)	552-038332-644	461.000	7.220	4,488.12	4,495.30	3,328.42	(1,159.70)	(1,166.88)
Next Dividend Payable 02/2023; Asset Class: Alt								
SUN COMMUNITIES INC (SUI)	552-038332-644	62.000	143.000	12,284.73	12,860.88	8,866.00	(3,418.73)	(3,994.88)
Next Dividend Payable 01/17/23; Asset Class: Alt								
SVENSKA HANDELSBANKEN AB ADR (SVNLY)	552-030185-644	2,089.000	5.043	9,573.63	9,573.63	10,534.83	961.20	961.20
Asset Class: Equities								
SYNEOS HEALTH INC CL A (SYNH)	552-038332-644	58.000	36.680	4,471.89	5,865.79	2,127.44	(2,344.45)	(3,738.35)
Asset Class: Equities								
TAIWAN SMCNDCR MFG CO LTD ADR (TSM)	552-030185-644	141.000	74.490	3,089.72	16,639.70	10,503.09	7,413.37	(6,136.61)
Next Dividend Payable 01/12/23; Asset Class: Equities								
TARGET CORPORATION (TGT)	552-038456-644	308.000	149.040	29,212.70	62,411.14	45,904.32	16,691.62	(16,506.82)
Next Dividend Payable 03/2023; Asset Class: Equities								
TECHTRONIC IND LTD SPONS ADR (TTNDY)	552-030185-644	260.000	55.798	15,265.70	15,265.70	14,507.48	(758.22)	(758.22)
Asset Class: Equities								
TEXAS ROADHOUSE INC CL A (TXRH)	552-038332-644	102.000	90.950	9,220.06	9,115.80	9,276.90	56.84	161.10
Next Dividend Payable 03/2023; Asset Class: Equities								
TOKYO ELECTRON LTD UNSPON ADR (TOELY)	552-030185-644	166.000	73.667	12,562.40	12,562.40	12,228.72	(333.68)	(333.68)
Asset Class: Equities								
TORO CO (TTC)	552-038332-644	77.000	113.200	8,295.73	7,658.09	8,716.40	420.67	1,058.31
Next Dividend Payable 01/11/23; Asset Class: Equities								
TOTALENERGIES SE SPONSORED ADS (TTE)	552-030185-644	215.000	62.080	11,462.17	11,566.54	13,347.20	1,885.03	1,780.66
Asset Class: Equities								
TRAVELERS COMPANIES INC COM (TRV)	552-038456-644	175.000	187.490	8,841.69	27,375.25	32,810.75	23,969.06	5,435.50
Next Dividend Payable 03/2023; Asset Class: Equities								
TRUIST FINL CORP (TFC)	552-038456-644	986.000	43.030	49,447.87	55,638.19	42,427.58	(7,020.29)	(13,210.61)
Next Dividend Payable 03/2023; Asset Class: Equities								
UNILEVER PLC (NEW) ADS (UL)	552-038456-644	979.000	50.350	39,878.73	51,599.20	49,292.65	9,413.92	(2,306.55)
Asset Class: Equities								
UNITED PARCEL SER INC CL-B (UPS)	552-038456-644	213.000	173.840	34,449.34	45,654.42	37,027.92	2,578.58	(8,626.50)
Next Dividend Payable 03/2023; Asset Class: Equities								
UTD OVERSEAS BK LTD SPON ADR (UOVEY)	552-030185-644	413.000	45.780	14,279.72	16,758.85	18,907.14	4,627.42	2,148.29
Asset Class: Equities								

CONTINUED

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.

000015 MSCY7DF1 000138

Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

COMMON STOCKS (CONTINUED)

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
VAIL RESORTS (MTN) Next Dividend Payable 01/10/23; Asset Class: Equities	552-038332-644	23.000	238.350	6,071.90	6,658.61	5,482.05	(589.85)	(1,176.56)
VERICEL CORP (VCEL) Asset Class: Equities	552-038332-644	126.000	26.340	4,207.22	4,207.22	3,318.84	(888.38)	(888.38)
VICI PROPERTIES INC (VICI) Next Dividend Payable 01/05/23; Asset Class: Alt	552-038456-644	1,298.000	32.400	40,052.88	39,309.84	42,055.20	2,002.32	2,745.36
VOYA FINL INC (VOYA) Next Dividend Payable 03/2023; Asset Class: Equities	552-038332-644	166.000	61.490	10,589.88	10,968.48	10,207.34	(382.54)	(761.14)
WAL-MART DE MEXICO SA SPON ADR (WMMVY) Next Dividend Payable 01/06/23; Asset Class: Equities	552-030185-644	587.000	35.346	16,302.81	21,389.98	20,748.10	4,445.29	(641.88)
WESTERN ALLIANCE BANCORP (WAL) Next Dividend Payable 03/2023; Asset Class: Equities	552-038332-644	140.000	59.560	13,126.01	14,891.63	8,338.40	(4,787.61)	(6,553.23)
WOLTERS KLUWER NV SPON ADR (WTKWY) Asset Class: Equities	552-030185-644	141.000	104.334	6,357.00	16,592.40	14,711.09	8,354.07	(1,881.31)
YUM CHINA HLDNGS (YUMC) Next Dividend Payable 03/2023; Asset Class: Equities	552-030185-644	231.000	54.650	9,925.58	11,563.47	12,624.15	2,698.57	1,060.68
ZEBRA TECH CL-A (ZBRA) Asset Class: Equities	552-038332-644	25.000	256.410	13,362.73	13,828.11	6,410.25	(6,952.48)	(7,417.86)
3M CO (MMM) Next Dividend Payable 03/2023; Asset Class: Equities	552-038456-644	266.000	119.920	32,344.13	47,249.58	31,898.72	(445.41)	(15,350.86)
Total Common Stocks				\$2,733,636.17	\$3,667,403.82	\$3,304,340.21	\$570,704.08	\$(363,063.61)
			Percentage of Assets	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
Total Stocks			47.49%	\$2,733,636.17	\$3,667,403.82	\$3,304,340.21	\$570,704.08	\$(363,063.61)

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Holdings

Exchange-Traded & Closed-End Funds

Security Description	Account Number	Quantity	Share Price	Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
ISHARES MSCI EAFE ETF (EFA)	552-071764-644	10,755.000	\$65.640	\$859,147.56	\$839,489.19	\$705,958.20	\$(153,189.36)	\$(133,530.99)
Purchases		10,755.000		859,147.56	839,489.19	705,958.20	(153,189.36)	(133,530.99)
Reinvestments		303.000		18,986.87	23,650.88	19,888.92	902.05	(3,761.96)
Total		11,058.000		878,134.43	863,140.07	725,847.12	(152,287.31)	(137,292.95)
Next Dividend Payable 06/2023; Asset Class: Equities								
		Percentage of Assets		Original Total Cost	Carrying Value	Market Value	Unrealized Gain/(Loss)	5500 Unrealized Gain/(Loss)
Total Exchange-Traded & Closed-End Funds		10.43%		\$878,134.43	\$863,140.07	\$725,847.12	\$(152,287.31)	\$(137,292.95)

000015 MSCY7DF1 000139

Additional information and disclosures about this report and the information contained herein can be found in the section entitled Messages at the end of this report.



Plan Administration Report

I.B.E.W. LOCAL 1158
Plan 874041
01/01/2022 through 12/31/2022

Run Date: January 03, 2023

Overview - Summary By Fund							
Fund Name	Beginning Balance	Contributions	Fund Transfers	Internal Transfers	Misc	Gain/Loss	Ending Balance
American Funds Am Balanced R3	\$5,608.24	\$0.00	\$0.00	\$0.00	\$0.00	(\$709.91)	\$4,898.33
American Funds Fdmntl Inv R3	\$9,035.17	\$0.00	\$0.00	\$0.00	\$0.00	(\$1,554.10)	\$7,481.07
BlkRck Equity Dividend Fnd R	\$78,041.44	\$3,851.92	\$462.56	\$0.00	\$0.00	(\$3,694.56)	\$78,661.36
Carillon Eagle Sm Cap Grw R3	\$8,696.87	\$0.00	\$0.00	\$0.00	\$0.00	(\$2,386.47)	\$6,310.40
Dodge & Cox Intl Stock Fd I	\$1,908.49	\$275.97	\$156.86	\$0.00	\$0.00	(\$126.60)	\$2,214.72
Fidelity Adv Nw Insight Fd M	\$170,746.46	\$6,272.32	\$334.52	\$0.00	\$0.00	(\$48,109.72)	\$129,243.58
Inv Dev Mrkts Fd A	\$0.00	\$341.98	\$168.87	\$0.00	\$0.00	\$8.96	\$519.81
Invesco EQV Intl Equity FR	\$0.00	\$275.98	\$156.86	\$0.00	\$0.00	\$12.37	\$445.21
Invesco Small Cap Eqty Fnd R	\$14,042.07	\$718.65	\$107.24	\$0.00	\$0.00	(\$2,963.85)	\$11,904.11
PIMCO VIT Real Return Port Adm	\$0.00	\$276.62	\$228.07	\$0.00	\$0.00	(\$15.35)	\$489.34
Voya Fixed Account	\$68,509.53	\$5,271.40	(\$2,480.86)	\$0.00	\$0.00	\$701.39	\$72,001.46
Voya Gov Money Market Port I	\$230.87	\$0.00	\$0.00	\$0.00	\$0.00	\$1.00	\$231.87
Voya High Yield Port Srv	\$4,690.07	\$1,316.63	\$7.78	\$0.00	\$0.00	(\$646.16)	\$5,368.32
Voya Indx Solution 2025 P Adv	\$45,088.12	\$3,985.50	\$0.00	\$0.00	\$0.00	(\$7,604.97)	\$41,468.65
Voya Indx Solution 2035 P Adv	\$24,830.71	\$5,180.00	\$0.00	\$0.00	\$0.00	(\$4,715.92)	\$25,294.79
Voya Indx Solution 2040 Pt Adv	\$11,706.58	\$2,600.00	\$129.56	\$0.00	\$0.00	(\$2,264.23)	\$12,171.91
Voya Indx Solution 2050 Pt Adv	\$7,021.02	\$1,560.00	\$90.73	\$0.00	\$0.00	(\$1,368.60)	\$7,303.15
Voya Indx Solution Inc P Adv	\$3,603.12	\$1,040.00	\$0.00	\$0.00	\$0.00	(\$568.95)	\$4,074.17
Voya Intermediate Bond Prt I	\$119,308.18	\$6,711.39	\$456.15	\$0.00	\$0.00	(\$18,240.53)	\$108,235.19
Voya Mid Cap Opport Port I	\$115,482.54	\$4,109.99	\$0.00	\$0.00	\$0.00	(\$29,739.40)	\$89,853.13
Voya Russell MdCp Indx Prt I	\$56,451.23	\$1,094.65	\$181.66	\$0.00	\$0.00	(\$10,319.06)	\$47,408.48
Plan Total	\$745,000.71	\$44,883.00	\$0.00	\$0.00	\$0.00	(\$134,304.66)	\$655,579.05

Summary By Fund

Portfolio Statements

Account number 4469641

31 DEC 22

PASSAIC VALLEY SEWERAGE COMM

◆ Asset Detail - Base Currency

Page 1 of 1

Description / Asset ID	Investment Mgr ID	Exchange rate/ local market price	Accrued Income/expense	Market Value	Cost	Unrealized gain/loss		
Shares/PAR value						Market	Translation	Total
Equities								
Funds - common stock								
United States - USD								
MFB NT COLLECTIVE S&P500 INDEX FUND-NONLENDING CUSIP 658991310								
61.910		14,357.948	0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40
Total USD			0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40
Total United States			0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40
Total Funds - Common Stock								
61.910			0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40
Total Equities								
61.910			0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40
Total								
61.910			0.00	888,900.56	448,262.16	440,638.40	0.00	440,638.40

Although this report has been prepared using information believed to be reliable, it may contain information provided by third parties or derived from third party information, and/or information that may have been obtained from categorized or otherwise reported based upon client direction. The Northern Trust Company does not guarantee the accuracy, timeliness or completeness of any such information. The information included in this report is intended to assist clients with their financial reporting needs, but you must consult with your accountants, auditors and/or legal counsel to ensure your accounting and financial reporting complies with applicable laws, regulations and accounting guidance. The Northern Trust Company and its affiliates shall have no responsibility for the consequences of investment decisions made in reliance on information contained in this report.

++ Informational Only Asset - an asset that is not held in the account but that is included in Northern Trust's reports at the client's request solely as a matter of convenience to the client. Custodial and other responsibilities for this asset rest solely with the client or another custodian. Northern Trust has no custodial or other responsibilities for this asset, and the asset is not an asset of any Northern Trust account for purposes of the applicable account agreement.

Northern Trust

*Generated by Northern Trust from reviewed periodic data on 19 Jul 23 B003



Plan Account Number: 552-112030-644
For the Period: 01/01/2022 - 12/31/2022

Activity

TRANSACTIONS IN EXCESS OF 5% OVER PLAN BEGINNING MARKET VALUE

Plan Beginning Market Value With Loans: \$7,269,026.03

SERIES OF TRANSACTIONS

Activity Date	Settlement Date	Account Number	Security Description	Activity Type	Quantity	Price	Amount	% Of Mkt Value
01/05/22	01/06/22	552-038330-644	UNITED STATES TREASURY NOTE 1.125% DUE2026-10-31 (91282CDG3)	Bought	51,000.000	\$98.75	\$50,467.26	0.69%
03/22/22	03/23/22	552-038330-644	UNITED STATES TREASURY NOTE 1.125% DUE2026-10-31 (91282CDG3)	Bought	60,000.000	94.35	56,880.60	0.78%
04/07/22	04/08/22	552-038330-644	UNITED STATES TREASURY NOTE 1.125% DUE2026-10-31 (91282CDG3)	Sold	96,000.000	93.10	89,848.53	1.24%
04/12/22	04/08/22	552-038330-644	UNITED STATES TREASURY NOTE 1.125% DUE2026-10-31 (91282CDG3)	Sold	96,000.000	93.10	89,851.51	1.24%
04/12/22	04/08/22	552-038330-644	UNITED STATES TREASURY NOTE 1.125% DUE2026-10-31 (91282CDG3)	Sold - Canceled	96,000.000		89,848.53	1.24%
01/12/22	01/12/22	552-038330-644	UNITED STATES TREASURY NOTE 1.375% DUE2031-11-15 (91282CDJ7)	Bought	281,000.000	96.70	\$376,896.43 272,355.89	5.19% 3.75%
04/22/22	04/25/22	552-038330-644	UNITED STATES TREASURY NOTE 1.375% DUE2031-11-15 (91282CDJ7)	Sold	57,000.000	87.25	50,085.29	0.69%
10/31/22	10/31/22	552-038330-644	UNITED STATES TREASURY NOTE 1.375% DUE2031-11-15 (91282CDJ7)	Sold	70,000.000	80.11	56,523.78	0.78%
							\$378,964.96	5.22%

000015 MSCY7DF1 000140

Multiple Employer Plan Participating Employer Information

For the plan year beginning 01/01/2022 and ending 12/31/2022

Name of plan

Passaic Valley Sewerage Commission / I.B.E.W. Local 1158 Annuity Plan

PN

004

Sponsor Name:

Passaic Valley Sewerage Commission / I.B.E.W. Local 1158

EIN

22-0886457

[illegible]

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:	☐ 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.)	
B This return/report is:	☐ a single-employer plan;	☐ a DFE (specify) _____
	☐ the first return/report;	☐ the final return/report;
	☐ an amended return/report;	☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here ▶	☒	
D Check box if filing under:	☒ Form 5558;	☐ automatic extension;
	☐ special extension (enter description)	☐ the DFVC program;
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 I.B.E.W. Local 1158 Annuity Plan	1b Three-digit plan number (PN) ▶	004
1c Effective date of plan 01/01/1999		
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) I.B.E.W. Local 1158 1149 Bloomfield Avenue US Clifton NJ 07012	2b Employer Identification Number (EIN) 22-0886457	
	2c Plan Sponsor's telephone number (973) 344-1800	
	2d Business code (see instructions) 813930	

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	GS	10-9-23	George Serio
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	GS	10-9-23	George Serio
	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

[illegible]

Schedule H, line 4j
Schedule of Reportable Transactions.

[illegible]